

Montana State University-Great Falls COT Dental Assistant Program



Student Information and Application Packet Fall 2012



Table of Contents

Letter from Dental Assistant Program Director.....2

Dental Assistant Program Description and Admissions Process.....3-4

Dental Assistant Program Course Work.....5

Dental Assistant Program Application Forms7-11

- Application Packet Cover Sheet and Check off Sheet**
- Student Immunization and Verification form**
- Job Shadow Experience Verification form**
- Job Shadow Confidentiality Statement**

Dear Prospective Dental Assistant student,

I am pleased by your interest in the Dental Assistant program here at Montana State University-Great Falls College of Technology. I graduated from this Dental Assistant program in 1987 and have found dental assisting to be a very rewarding career. In the coming years the demand for skilled dental assistants is expected to rise significantly. In fact, according to the U.S. Bureau of Labor Statistics; job openings for Dental Assistants are expected to increase by 30% in the next few years.

MSU-Great Falls College of Technology's Dental Assistant program is accredited through the American Dental Association and upon graduation from the program; students are eligible to sit for the Dental Assisting National Board certification exam to become a Certified Dental Assistant (CDA.) Graduates are qualified to perform the expanded functions allowed by the Montana Board of Dentistry rule, including (but not limited to) taking and processing oral radiographs, coronal polishing, placing dental sealants, providing oral hygiene instruction, and fabricating temporary crowns.

The Dental Assistant program has a limited enrollment capacity. **Eighteen new students are enrolled in the fall of each year.** The small class size is advantageous to students, allowing them more individualized attention and more opportunity for hands-on experience. The Dental Assistant program selects students on a first come, first served basis from the pool of completed applications received by the application priority deadline.

Information regarding the profession, the program, and application materials for fall 2011 entry are enclosed in this packet. **Please read the materials carefully.** For additional information, answers to specific questions, or to set up an appointment please contact Student Central at (406)771-4414 or Robin Williams, CDA, MS, Dental Assistant Program Director at (406) 771-4351. Please don't hesitate to contact me.

Sincerely,

Robin R. Williams, CDA, MS
Dental Assistant Program Director
Montana State University—Great Falls College of Technology
2100-16th Ave S
Great Falls, MT 59405
(406)771-4351

**MONTANA STATE UNIVERSITY-GREAT FALLS
COLLEGE OF TECHNOLOGY
DENTAL ASSISTANT
ONE-YEAR CERTIFICATE OF APPLIED SCIENCE PROGRAM**

Job description and occupational outlook

Dental Assistants are important members of the dental health care team and primarily help to increase the efficiency and productivity of the dental practice by assisting the dentist in delivering patient care. The Dental Assistant performs a wide variety of tasks requiring both interpersonal and technical skill. Most of the time, Dental Assistants work clinically with the dentist delivering patient care, although at times, they may also work independently or in the business aspect of the dental office.

The dental assisting profession provides a rewarding career in service to the public. It calls for individuals who are flexible, responsible, intelligent, and caring. General dentists or dental specialists employ most Dental Assistants, however other opportunities for employment exist in public health settings, insurance or supply companies, and educational institutions. Because dentists often employ two or three Dental Assistants, employment opportunities are excellent. The approximate average hourly wage for most entry-level Dental Assistant graduates in Montana is currently \$11.00 - \$15.00 with various benefits, depending on location and demand factors.

The American Dental Association Commission on Dental Accreditation accredits the Dental Assistant program at MSU-Great Falls College of Technology. Upon graduation, students sit for the national certification examination administered by the Dental Assisting National Board to become Certified Dental Assistants. They are also qualified to perform expanded functions approved by the Montana Board of Dentistry. Students must be currently certified in healthcare provider CPR (American Red Cross and American Heart Association are two of several instruction providers) and be current on all immunizations including the Hepatitis B series. Students are also encouraged to become student members of the American Dental Assistants Association.

The MSU – Great Falls Dental Assistant program is a one year (11 month) limited enrollment program accepting up to 18 students each year. Interested students must complete a current application to the program (**separate from the institution application**) for acceptance and are urged to contact Student Central or program advisors for student advising specific to program admission requirements.

Following acceptance to the program, the Dental Assistant program is three semesters in length concluding summer semester with the students being enrolled in clinical practice. Dental Assistant program students will receive their training through a variety of methods including classroom lecture, practice in mock procedures, and actual clinical experience in our on-site Dental Clinic (which is open to the public.) All Dental Assistant program coursework must be completed with a “C-” or better to continue in and/or graduate from the program. All Dental Assistant program coursework must be successfully completed prior to enrollment in DA 190, Clinical Practice and Seminar. Students will also be required to purchase uniform attire, pay for their certification examination, and provide own transportation and lodging costs (if necessary) during clinical office practice.

Dental Assistant program admissions process

The Dental Assistant program admissions committee reviews submitted application packets. Although not required, it is recommended that students complete most, if not all general education core coursework prior to entry to the Dental Assistant program. The **postmarked date** of submission of a complete application packet will be the decisive factor for accepting up to 18 students to the program. Only students in Good Academic Standing will be eligible for program acceptance. The earliest postmarks will be given the highest priority and only complete applications will be accepted for evaluation purposes.

The **complete** Dental Assistant program application must be submitted via mail to:

Robin R. Williams, CDA, MS
Dental Assistant Program Director
2100-16th Ave S
Great Falls, MT 59405

by **June 1, 2012** for priority selection to the program.

Priority applicants will be notified of their admission acceptance by June 25, 2012 for Fall 2012 semester entry to the program. The Dental Assistant program admissions committee will consider applications received after the priority deadline of June 1, 2012 only if any of 18 admission positions remain open. Again, the earliest postmarks on complete applications will determine admission for any of these remaining openings.

Dental Assistant program characteristics/expectations

Students can expect to commit to a full week at MSU – Great Falls College of Technology each week. Most dental courses include assignments that require the students to commit time (outside the scheduled class time) to program duties, responsibilities, and community-based activities. Duties include clinical cleaning and maintenance as well as restorative clinic rotations. These assignments are considered a part of the dental curriculum, so personal activities will need to be scheduled around these responsibilities.

There are a variety of learning activities within the program which make for an exciting and challenging student experience. Students should read assigned material and complete any other assignments prior to class attendance. A good rule of thumb is that for every class hour, a student will spend **at least** 2 hours outside of class in preparation for class and/or completion of assignments.

Student Health Insurance

Program students entering the clinic setting are strongly advised to carry their own medical health insurance. Students will be financially responsible for their health care if they become ill or injured in the clinical setting. All students enrolled for 4 or more credits are required to have health insurance. For students without coverage, MSU-GF College of Technology offers a program developed especially for students by Blue Cross & Blue Shield of Montana (BCBSMT). This plan provides coverage for injuries and illnesses on or off campus. Coverage includes hospitalization, maternity, prescription drugs, surgical services, emergency room charges, and immunizations among others. Please contact Student Central for further information.

Student Central
MSU – Great Falls College of Technology
Phone – 406-771-4414
Fax – 406-771-4329

Program course requirements

Students that apply to the Dental Assistant program must have already successfully completed (C- or better) M 090—Introductory Algebra, and WRIT 095—Developmental Writing (or their equivalent courses) **OR** be currently at the competency level for the program-required math and writing courses. Students may also complete any or all of the general education coursework (non-DA) prior to entry to the Dental Assistant program. Again, if you have any questions, please contact the DA Program Director. The program course sequence is as follows:

Fall Semester 2012

Course	Title	Credits
DENT 110	Theory of Infection Control & Disease Prevention	1
DENT 115	Head, Neck, & Oral Anatomy	4
DENT 116	Dental Office Management	2
DENT 120	Oral Radiology I	3
DENT 123	Chairside Theory and Practice I	4
WRIT 095**	Developmental Writing	4
TOTAL SEMESTER CREDITS		18

Spring Semester 2013

Course	Title	Credits
DENT 121*	Oral Radiology II	2
DENT 124*	Chairside Theory and Practice II	4
DENT 140*	Dental Science/Preventive Dentistry	4
DENT 145*	Dental Specialties	3
M 090**	Introductory Algebra or higher	4
TOTAL SEMESTER CREDITS		17

Summer Semester 2013

Course	Title	Credits
DENT 195*	Clinical Practice and Seminar	7
COMM 135	Interpersonal Communications OR	
PSYX 100	Introduction to Psychology	3
TOTAL SEMESTER CREDITS		10

Total program credits (including general education coursework) 45 credits

* Indicates program prerequisite needed (see catalog for details)

** WRIT & M courses listed are the minimum program requirements. Students who test into higher level WRIT & M courses should take the appropriate level course to fulfill the program's WRIT & M requirements.

Information regarding transferable courses

General education coursework taken at other educational institutions may be designated as equivalent courses for MSU – Great Falls College of Technology. For current listing of approved equivalent courses, visit the Transfer Guide under Student Information at:

https://atlas.montana.edu:9001/pls/gfagent/hwzkxfer.p_selstate

If you have additional questions about transferability of courses, send a written request for evaluation to the Registrar at MSU – Great Falls College of Technology. Please include appropriate course descriptions and official transcripts from former colleges with your request for evaluation.

Dental Assistant program expenses

The Dental Assistant program is a relatively expensive program. Students should begin planning early for financial aid or other arrangements to meet their educational needs. The College offers the students a variety of opportunities to participate in fundraising efforts; however it is recommended that a student not rely on these funds to meet educational expenses. Beyond tuition and fees, students will be required to purchase the following:

- Books and classroom & clinic supplies (approx. \$1330)
- Two professional uniforms (approx. \$250)
- Comfortable, professional shoes
- Graduation fees (approx. \$50)
- Certification examination fee (approx. \$375)
- Student medical insurance (approx. \$1600)
- Transportation and lodging at distant clinical experience or service learning sites, if applicable

**MSU–Great Falls College of Technology
Dental Assistant Program**

APPLICATION PACKET COVER & CHECK-OFF SHEET

NAME _____

ADDRESS _____

CITY _____ ST _____ Zip Code _____

TELEPHONE (Home) _____ (Other) _____

E-Mail ADDRESS _____

STUDENT IDENTIFICATION NUMBER: _____

Check-off List

√	Item
	Application Packet Cover & Check-off sheet (<i>personal information must be complete and legible</i>)
	Complete application and documentation for admission to MSU-GF College of Technology. New students, please include a photocopy of acceptance letter. <i>Continuing students do not need to include a copy of their acceptance letter.</i>
	Student Immunization and Verification form
	Photocopy of current CPR certification card (must be <i>Healthcare Provider CPR</i> or equivalent)
	Job Shadow Experience Verification Form
	Official Transcripts for all post-secondary education completed outside of MSU-Great Falls (send transcripts to Registrar- <i>No need to include in packet</i>)



MSU – GREAT FALLS COLLEGE OF TECHNOLOGY

Student Immunization and Verification Form

Name _____ Male _____ Female _____ Date of Birth _____

Address _____ City _____ Zip _____

Program of Study _____ Phone # _____

Email Address: _____

IMMUNIZATIONS: PLEASE LIST DATES....

Measles, Mumps, Rubella _____ Diphtheria _____ Tetanus (within last 7-10 years) _____

Hepatitis B Series (proof of test results required) 1) _____ 2) _____ 3) _____

Titer _____ (STRONGLY recommended by OSHA, CDC, and MSU – Great Falls College of Technology)

TB (proof of test results required) _____ positive _____ negative _____

PPD Date completed _____ Two-step TB test required Date completed _____

Varicella (Proof of Chicken Pox or Vaccination date) _____

VERIFY THE FOLLOWING....

	YES	NO	Initials
CPR for Health Care Providers verification, completed and current upon admission: Online courses not accepted. (Photocopy of certification card, both sides, showing expiration and instructor's signature).			
I have read the Technical Standards Sheet for the program of application.			
I have provided proof of all immunizations or test results required.			

JOB SHADOW INSTRUCTIONS

In order to insure that you are aware of what is involved in the job of a dental assistant, we require that you complete a mandatory job shadow experience. This experience may be carried out at the dental office/clinic of your choice. You should select a facility large enough to provide you with a full range of dental procedures. You are required to complete a minimum of four (4) hours of observation time. You are encouraged to ask the individuals you shadow pertinent questions related to dentistry and observe as many procedures as possible. It is essential that you become aware of what you will be participating in if you are selected for the clinical portion of the program. Fill out the attached confidentiality statement prior to your job shadow and provide it to the facility personnel when you arrive for your job shadow. After you have completed your job shadow have the technologist(s) that you observed complete and sign the attached form. Include the completed form in your application packet for the Dental Assistant program at MSU-Great Falls College of Technology.

Dress is professional/casual. NO blue jeans, low-cut tops or open toe shoes. Chewing gum is not acceptable while on duty. No jewelry should be worn with the exception of watch, wedding set, and small earrings for pierced ears only.



**MSU Great Falls College of Technology
Dental Assistant Program
JOB SHADOW VERIFICATION**

The individual who is providing this form is in the process of making an application to the Dental Assistant program at MSU-Great Falls College of Technology. We feel that it is essential that this individual become aware of what is involved in the job performance of a dental assistant. We request that you have this individual observe as many different procedures as possible in your department and then document on this form which procedures they were able to observe. If you have any questions regarding this request or the form please feel free to call either of the individuals listed below. We thank you for your assistance in providing this opportunity for this applicant. **Please return the completed form to the individual.**

Dress is professional/casual. **NO** blue jeans, low-cut tops or open toe shoes. Chewing gum is not acceptable while on site. No jewelry allowed with the exception of watch, wedding set, and small earrings for pierced ears only.

APPLICANT NAME: _____

DATE OF OBSERVATION: _____

TIME OF OBSERVATION: _____ a.m. / p.m. to _____ a.m. / p.m.

Dental Office/Clinic OBSERVED: _____

Please print name(s) of the dental practitioner(s) observed:

PROCEDURES OBSERVED: _____

Dentist/Dental Assistant SIGNATURE: _____

For questions please call: Robin Williams 771-4351



MSU Great Falls College of Technology
Dental Assistant Program
JOB SHADOW
Confidentiality Statement

I thank you for this opportunity to job shadow in your facility. I realize that everything that I observe during this time **must be kept confidential** to protect patient privacy and by signing below, I agree to keep this information confidential while at your facility and afterward.

Healthcare Observer: _____
Please Print Name

Signature: _____

Date: _____