

COLLEGE OF DENTAL HYGIENISTS OF MANITOBA

Ensuring the public has access to safe, competent dental hygiene care and expertise that contributes to improved oral and overall health.

Issue 6 February 2011

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Continuing Competency Program (CCP) Q and A Sessions

The CDHM will be offering two Q and A sessions in March 2011 regarding any questions you might have pertaining to the 2011 Continuing Competency Record (CCR) and the Professional Activity Record (PAR).

Your choice of sessions:

Faculty of Dentistry, University of Manitoba, 780 Bannatyne, Schwartz Theatre

- · Saturday, March 5, 2011 9:30 11:30 AM
- · Wednesday, March 9, 2011 6:30 8:30 PM

If you are interested in attending any of the above sessions, please RSVP by email at ccp@cdhm.info or by telephone 219-2678 by February 21, 2011, indicating what session you will be attending.

CDHM Amended Bylaws

On October 23, 2010 the CDHM held its Annual General Meeting (AGM). As per section 54(2) of The Dental Hygienists Act the by-laws may be amended and repealed after notice is given in accordance with the by-laws, a by-law under section (1) may be amended or repealed by a majority of the members of the college

- a) present and voting at a general meeting; or
- voting in a mail vote or other method of voting conducted in accordance with the bylaws.

At the AGM the membership voted to amend the by-laws so that they now contain the most current version of the CDHA's Code of Ethics.

A Code of Ethics is a document that is designed to set out acceptable behaviours that registrants of a profession are expected to incorporate into their practice. As well, a Code of Ethics can also increase confidence in a governing body by indicating to the public that registrants of the organization are committed to following basic ethical guidelines in the course of providing treatment.

Please find below the links to the CDHM amended by-laws and the CDHA Code of Ethics:

http://cdhm.info/legislation/CDHM By-laws 2010.pdf

http://www.cdha.ca/pdfs/Profession/Resources/CDHA Code of Ethics public.pdf



Registrar's Report - Stephanie Gordon

Professionalism: What it means to be a regulated health care provider

Over the past few months I've spent a considerable amount of time pondering the term 'professionalism' as it relates to dental hygienists and how the College can facilitate the integration of this important concept into everyday practice.

My initial thought was that to fully understand the term 'professionalism' I must first review this expression through a broader lens that was not specific to dental hygiene. As I delved into the current literature many key concepts kept emerging. I observed that a few fundamental components must be met for an occupation to be deemed a profession. This includes the notion that professionals are required to have specialized education training that contains particular competencies in a certain field of study. As well, professionals of an organization must uphold strict ethical and moral regulations.

At the CDHM Annual General Meeting held on October 23, 2010, with the unanimous support of the membership, the College of Dental Hygienists of Manitoba adopted the Canadian Dental Hygienists Association's (CDHA) Code of Ethics. Principle V of the Code of Ethics termed *Professionalism* indicates that "Professionalism is the commitment to use and advance professional knowledge and skills to serve the client and the public good. Dental hygienists express their professional commitment individually in their practice and communally through their professional associations and regulatory bodies." I've interpreted this overarching concept to mean that each of us, practising in the profession, must act in a professional manner when communicating with clients, the public, our colleagues, our professional association and our regulatory body.

Interestingly, in the literature, it is indicated that 'professionalism' and being a good role model are intertwined. Thus, being a health care provider should be synonymous with the term 'professional' and furthermore with the term 'role model'. I believe that we are not just providers of clinical care but that we are experts in our field and we must be held to a professional standard. Pride in our designation is a necessary factor in moving our profession forward.

A few concrete behaviours specific to professionals are outlined below. A professional is someone who:

- Communicates effectively and actively listens
- Is on time and manages his/her time efficiently
- Fulfills deadlines
- Is accountable and takes responsibility for his/her behaviours
- Dresses appropriately for the role

On a similar note, I would like to congratulate and welcome two new 'professionals' to the Board of Assessors (BOA), Ms. Janis Gojda and Ms. Tara Kinchen. The College is very fortunate to have 2 fabulous dental hygienists with strong backgrounds in clinical practice and health promotion who are a great asset to this important committee. The BOA assesses and approves applicants for registration as a dental hygienist in Manitoba in accordance with the requirements set out in *The Dental Hygienists Act* and *Regulations*. With the guidance, mentorship and professionalism of our 2 experienced BOA's, Mr. Sam Dajani and Ms. Lila Jorheim MacInnes, the BOA orientation session for Janis and Tara in December 2010 was a great success.

I would also like to personally thank Ms. Kathy Griffiths for her role as a BOA over the previous three years; her expertise in assessing registrants' applications and renewals will be greatly missed.

Sincerely,

Stephanie

Stephanie Gordon BA, RDH CDHM Registrar/Executive Director

UPCOMING MEETINGS

REGULATED HEALTH PROFESSIONS ACT WORKING GROUP SUBCOMMITTEE MEETING:

FEBRUARY 18, 2011

REGULATED HEALTH PROFESSIONS ACT MEETING:

MARCH 2, 2011



Outgoing Chair's Message - Mickey Emmons Wener

As my role changes in Council from Chair to member, I would like to thank Manitoba dental hygienists for putting your faith in me as together we made significant strides toward increasing Manitobans access to our care, while also opening up exciting career opportunities for practice. It has been my privilege and honour to have proudly served on MDHA's Legislation Committee, including serving as Chair until it was dissolved (1998-2008), to serving as Co-chair then Chair for the Transitional Council of the College of Dental Hygienists (2006-2008), to chairing the first Council (2008-2010).

As the inaugural Council, we have been fortunate to have had two insightful, hard-working Registrar/Executive Directors, who together with Council and staff have amongst our accomplishments the establishment of Policy Governance to guide our decision making; the launching of our website and newsletter; the creation of a novel, evidence-based continuing competency program; and efforts to educate dental hygienists regarding the new legislation and its potential for practice. Council will continue to make its impact on practice as the CDHM - RHPA working group moves forward collaboratively with the MDHA and the School of Dental Hygiene to prepare for more legislative change as the Regulated Health Professions Act comes into force for our profession as one of 21self-regulated health professions in Manitoba.

I warmly welcome my colleague, and friend, Patti Hawthorn, to the position of Council Chair. In addition to Patti's long history with MDHA, including serving as President, she has ably served on the CDHM Transitional Council and has repeatedly shown her skill and worth on the CDHM Council as Nominations Chair in 2009 and 2010, tackling scope of practice subcommittee work, and most recently capably handling the position of Interim Registrar while we were between Registrars. Council is in good hands!

Annual General Meeting: We are pleased to report that feedback from the participants at the CDHM AGM on October 23, 2010 overwhelmingly indicated that the meeting was very informative, well run, a good use of their time and provided a great opportunity to connect with their colleagues. There was particular interest in the legalities of practice in Canada and Manitoba, particularly as it pertained to alternative and community-based practice settings (find further information here, including clarification of supervision, in the Extended Practice Update section of the newsletter). The presentation by Doris Lavoie of the National Dental Hygiene Certification Board was very well received as it gave much insight into the development, security and future directions of the NDHC Exam. Attendees appreciated hearing more about the CDHM continuing competency program, and the student-run W.I.S.H. Clinic housed in Winnipeg's inner-city Mt. Carmel Clinic. Thank you to all who took the time to provide us with your comments, including helpful suggestions for next year's AGM.

My hope for the New Year is that more dental hygienists will embrace the opportunities provided through legislative change. I encourage you to think about how you might reach out and increase other's access to the important oral health care that we provide.

All the best to you for 2011!

Sincerely, Mickey

Mickey Wener, RDH, MEd CDHM Out-going Chair, Council Member

> AGM 2010: Stephanie Gordon, CDHM Registrar/Executive Director with Doris Lavoie, NDHCB Executive Director





Incoming Chair's Message - Patti Hawthorn

"It Only Takes A Spark To Get A Fire Glowing..."

Over the years, many names and faces have come and gone in the dental hygiene community. Some take on new interests, some change roles, some raise families, some move on – others don't.

When asked to become a representative on the Transitional Council four years ago, a "spark" of interest rekindled an old flame that had been lit long ago in me as a dental hygiene student sitting on the MDHA Board. That flame prompted me to move yet once again.

UPCOMING MEETINGS

COUNCIL:

FEBRUARY 7, 2011 MAY 16, 2011 AUGUST 29, 2011 NOVEMBER 21,2011

ANNUAL GENERAL MEETING:

OCTOBER 22, 2011

By becoming a member of the CDHM Council and new position as Chair, I feel I have come full circle with yet more to learn and something to offer. My way has been paved by a multitude of talented and dedicated individuals who have given countless "sparks" and have led others to help achieve what the College has become today.

One of these individuals in particular is Mickey Wener, who has stood at the helm for so long and has so capably steered us through many challenges, always seeing the light. I am grateful to have Mickey as our Extended Practice Coordinator – her vision will enlighten hygienists and stakeholders alike as we venture through yet more legislative changes with the inception of the Regulated Health Professions Act. Thank you Mickey for hours beyond the call of duty!

Our Council is now complete with our new members Nadine Cartman and Andrea Fruehm, as well as the assignment, by government, of our third and final public representative, Harvey Fineman. Harvey joins us with 31 ½ years experience with the City of Winnipeg Dept. of Social Services. He has served as Supervisor of Investigative Services and as Respondent for the City of Winnipeg Social Service Advisory Committee Appeal Board. We warmly welcome all of our new Board members to Council.

Our hard working Registrar, Stephanie Gordon and Registration/Program Coordinator, Virginia Bagshaw, have survived their first round of registration renewals on top of the multitude of tasks required of the office and committees. I hope you both had a chance to rest a bit during the Christmas holidays.

A final thank you is due to our members for the support shown at our last AGM in October. It is encouraging to see the interest and questions you have for the College in our endeavor to provide you with a clearer understanding of where self-regulation is taking us as recognized health professionals. Your sparks of interest and participation can help fan that flame and get that fire glowing – do you have something to offer?

On behalf of Council, I hope your holiday season was filled with joyous celebration and that the coming New Year brings peace and new hope for a better world to live in!

Sincerely,

Patti Hawthorn

Patti Hawthorn, RDH CDHM Chair This newsletter package contains important documents including:

CDHM CCP Declaration
2011 Registration Wall Certificates
2011 Registration Wallet Cards/
Income Tax Receipts

Continuing Competency Program (CCP)

Sheryl Sloshower, CCP Coordinator

I would like to wish you all a Happy New Year!

Please note that the CDHM CCP Declaration is enclosed with this newsletter package. It is mandatory to send in the declaration with your completed CCR by April 30, 2011. You will also be able to access the declaration on the CDHM website at: http://www.cdhm.info/quality-care/forms/.

The Guidelines for the Continuing Competency Record Feedback for Year 1 can now be found on the CDHM website at: http://www.cdhm.info/quality-care/checklist-for-submission/. The information provided as a result of the feedback for the Learning Year will aid the registrant with the preparation of the 2012 CCR/PAR. Missing documentation will be noted but will not have to be submitted for the Learning Year.

The College of Dental Hygienists of Manitoba will require Continuing Competency Program Reviewers for Year 1 to assist the College with providing feedback to the membership. If you are interested in this position, please refer to the website for the criteria.

I have received many emails regarding the requirements for the CCP. Please read your CCP Package carefully which you should have received in the mail. The website also contains the CCP Package in its entirety at: http://cdhm.info/quality-care/.

Year 1 (May 2010-April2011):

1 Competency Goal and an optional PAR

Year 2 and onward (May 2011 and onward): Choose one of the following options:

- 2 Competency Goals and an optional PAR
- 1 Competency Goal and 1 PAR

Please note that competency **activities** carried out within 24 months of the reporting period deadline (April 30) will be considered eligible. This pertains to the **date** the member participated in the identified continuing competency activities.

Continued competency activities will be varied and can include (but not limited to):

- Attending educational courses or seminars
- Completing online courses
- Reviewing professional journals/articles
- Participation in study or journal clubs
- Watching dental hygiene videos or DVDs

For evidence-based practice, journal articles and DVD's should be as current as possible. The suggested time frame is within the last 5 years.

I encourage everyone to visit the CCP page on the CDHM website at http://www.cdhm.info/quality-care/ which contains the CCP package in its entirety, the power point presentation from the general information sessions and a summary from Navigating the Dental Hygiene Competency Program. Additionally, there are FAQ, a checklist for submission, wonderful resources, and activity news and practice tips. The CCR, PAR and External Feedback Forms are available in MS Word format. This will allow the member to type into the document, to print and mail the forms, or to save and email the forms to ccp@cdhm.info. When emailing the documents it is imperative that they be saved as a PDF file prior to emailing.

Jane Rothney, the acting dental librarian at the Neil John Maclean Health Sciences Library will be happy to assist our members. She has informed me that any member can come into the library to receive a Consumer Health card. These cards are free and will provide you with access to all the databases while inside the library. There is no way at present to provide access to library databases from home without student, faculty or hospital affiliation with the University of Manitoba. An alumni library card is available for purchase which allows you to check books out from the regular collection. Janet can be contacted at:

Phone: 789-3656

Email: <u>Janet_Rothney@umanitoba.ca</u>

Website: http://www.umanitoba.ca/libraries/units/health/

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Extended Practice Update: Information Regarding Legalities of Practice

Mickey Wener, Extended Practice Coordinator

In the position of Extended Practice Coordinator, I work toward ensuring that dental hygienists and other key stakeholders are aware of our legislation and the opportunities it presents for promoting oral health. It was evident at our October AGM and through my work with the Support and Study Group, that many of you are interested in understanding the legalities surrounding practice in private dentist-owned practices and in other settings or programs that have presented themselves as a result of the advent of dental hygiene legislation. This edition of CDHM Connections will help to clarify two main issues: 1) supervision and 2) legal practice settings.

I. Clarification of Supervision Requirements for Registered Dental Hygienists

BEFORE 3000 HOURS:

Section 3(2)(b) of the *Dental Hygienists Regulation* states that there be a supervision requirement by a dentist for those registered dental hygienists with less than 3000 practice hours, i.e. without the Extended Practice (RDH-EP) designation. Supervision can be open to interpretation as either *direct* or *indirect*.

Direct: the supervising dentist is physically present for clinical care* provided by the RDH.

<u>Indirect</u>: the supervising dentist oversees the clinical care* being provided by the RDH, but is not physically present. The degree to which either direct or indirect supervision is used is jointly determined and agreed upon between the RDH and the employing dentist. Key factors need to be taken into consideration such as the experience of the dental hygienist and public safety.

It is the RDH's responsibility for professional practice to ensure that when working under indirect supervision that the public's interests are central. RDHs working under indirect supervision need a written statement of who is providing supervision, either the employing dentist or an alternative dentist.

AFTER 3000 HOURS:

Once 3000 career hours of practice has been reached, the RDH is eligible to apply to be placed on the Extended Practice Roster. The RDH-EP can <u>self-initiate</u> clinical care* in all approved settings and programs without the supervision of a dentist. This allows for dental hygiene clinical care to be rendered outside of dentist-owned practices in settings such as personal care homes, hospitals, government health clinics, etc.

In the interest of public safety, for both RDHs and RDH-EPs [Dental Hygienists Regulations 3(3)], appropriate consultation must be sought by the dental hygienist in the case of concerns regarding a client's oral health condition, medical condition, or medications.

II. In What Practice Settings can Dental Hygienists Legally Provide Care?

RDHs and RDH-EPs (Extended Practice) can autonomously:

- Provide oral health promotion (education, advocacy) for any client/group in any setting, for example, caregiver education in personal care homes or early childhood caries education for pre/post natal groups.
- Provide the services required to fabricate and deliver mouthguards for clients in any setting, including the dental hygienist's home, an arena, or the client's home.
- Provide oral therapeutic agents (anticariogenic agents, desensitizing agents, periodontal chemotherapeutic agents) and sealants for any client in any setting such as a school, a community health clinic, or an individual's home.

RDH-EPs can provide clinical care* autonomously:

- In designated government Personal Care Homes (PCHs), hospitals and psychiatric facilities.
- In Manitoba Regional Health Authorities, First Nations or Inuit communities, and cities/towns through affiliation with the Federal, Provincial or a municipal government.
- As part of a University of Manitoba setting or program.
- In a setting approved by the patient's dentist through referral. This could include a satellite practice, a client's home, or any other setting.
- In a setting or oral health program not included in the legislation, but approved by the Minister of Health. For example this was the process used to allow RDH-EPs to self-initiate at Siloam Mission.

Extended Practice Update continued......

Regarding practice in general:

- For all practice settings, collaborating inter-professionally to ensure the best care for the client is crucial. This could include a dentist, a physician, a nurse practitioner, an occupational therapist, a speech language pathologist, a social worker, or another professional.
- There is no legislative requirement to have a dentist provide an exam prior/during/following care being provided by a dental hygienist. For dental hygienists employed in dentist-owned private practices, this would be an issue to be discussed between employing dentist and employed dental hygienist. For dental hygienists self-initiating care and practising autonomously, exams by a dentist are not a requirement.
- If the RDH-EP is in doubt as to the safety of care being rendered due to a client's oral or medical health condition, or if s/he is not familiar with the drugs the client is taking, consultation is required by legislation before proceeding. For a health condition: consult with a physician, dentist, or an RN-Extended Practice; for drugs, consult with a physician, dentist, or pharmacist.
- To address referral needs for oral care outside the scope of practice of a dental hygienist, the RDH-EP would be advised to have a collaborating dentist or refer to the University of Manitoba CCOH Home Dental Care Program who currently provides care to individuals in personal care homes, hospitals, or their homes.

There were many questions raised regarding the entrepreneurial aspect of practice, which is within the purview of the professional associations. MDHA/CDHA would address topics such as developing a business plan, market research, billing, insurance coverage for direct billing by RDHs, etc. Note that there are many practice resources on CDHA's web site.

The information provided is meant to address some of the questions raised at the AGM. For additional information, see: http://cdhm.info/legislation/CDHMStakeholderUpdate April2008.pdf or contact either Stephanie Gordon at registrar@cdhm.info or Mickey Wener at mewener@cdhm.info.

Sincerely,

Mickey

Mickey Wener, RDH, MEd CDHM Extended Practice Coordinator

*Clinical care: dental hygiene care requiring supervision includes scaling, root planing, debridement, curettage and local anaesthesia [Dental Hygienists Regulation 3(2) referring to The Dental Hygienists Act 2(2)]. All other care can be provided without supervision, except for restorative and orthodontic procedures which are always provided collaboratively with a dentist regardless of practice hours.

Continuing Competency Program continued......

Journal Study Clubs are a continuing competency activity that you might want to explore in the New Year.

Evaluation of scientific literature and promoting the delivery of evidence-based care can become the focus of a group of dental hygiene colleagues. Journal members discuss and evaluate professional issues utilizing research-based literature. Topics include patient care, public health/access to care, technology, modalities of treatment, and professional issues. For each topic, one member serves as a program facilitator researching the scientific literature on an agreed upon topic, chooses appropriate articles, and disseminates the articles to the members to read prior to meeting.

Discussion at the study club event follows the format of examining literature content, relevance, significance, evidence accuracy, and application to clinical practice. This process supports dental hygienists' commitment to life-long learning and the practice of evidence-based care, while providing a valuable venue for continuing dental hygiene competence and professional development.

For more information pertaining to study clubs read: <u>How to run an effective journal club: a systematic review by Y. Deenadayalan, K. Grimmer-Somers, M. Prior, S. Kumar.</u> (J Eval Clin Pract. 2008 Oct; 14(5):898-911.Review. PubMed PMID: 19018924.)

Sincerely,

Sheryl

Sheryl Sloshower, RDH
CDHM Continuing Competency Program Coordinator

Degree of Change: The University of Manitoba Bachelor of Science in Dental Hygiene

Carol Yakiwchuk, Dip. DH, BSc (DH), RDH, RCR

University of Manitoba dental hygiene graduates understand firsthand the significant investment of time, effort, and commitment required to attain a diploma in dental hygiene from the School of Dental Hygiene. Yet, until the baccalaureate degree in Dental Hygiene was approved in 2009, there was no mechanism in place for dental hygienists to receive recognition for these hard-earned credit hours toward any U of M degree. Faced with this barrier, I shifted my attention in other directions to expand my knowledge and to help others. I became involved in health promotion; project management; teaching and instructing; and volunteering with our provincial and national dental hygiene associations, the Transitional Council for the CDHM, World Special Olympics, and with the National Dental Hygiene Certification Board. While these opportunities provided me with terrific opportunities to learn and grow, they also reaffirmed my burning desire for a degree. These experiences also helped me realize that this degree credential, in addition to paving the way for further education and personal growth, could also serve to provide the additional impetus toward dental hygienists attaining stronger recognition as full-fledged health professionals.

Education is not the filling of a pail, but the lighting of a fire. William Butler Yeats

I thoroughly enjoyed the privilege of being a student once again, and appreciated the choice in electives and the flexibility in scheduling courses. The program offered me exciting and meaningful learning opportunities to further hone my ability to practice independently, teach more effectively, and gain additional expertise in providing evidence-based care for those I serve. Completing the degree also enabled me to take yet another step forward as a post-graduate masters student in the Faculty of Nursing and Health Studies with Athabasca University.

The University of Manitoba baccalaureate in dental hygiene offers each of us a stepping stone toward higher learning, increased recognition, more effective practice, and new professional opportunities. As a degree of change, it has lit my fire and changed me forever.

Reflections: The BScDH course and CDHM / MDHA Support and Study Group

Andrea Fruehm, RDH, BScDH candidate

As many of you know, the new University of Manitoba Dental Hygiene Baccalaureate program was recently launched. I am fortunate to be one of the first graduating students of this degree completion program and would like to share with you a snap shot of what it was like to participate in these studies. One of the courses I took was independent, meaning I could choose a project to pursue. I was offered to be a part of the CDHM/MDHA's new study group. As I learned more about it, I became excited at the prospect of using this towards my course studies.

The study group was started by the CDHM as a resource for hygienists looking for ways to practice in settings that would allow the public increased access to dental hygiene services. The group started their sessions by exploring what the current Manitoba legislation allows in regards to independent practice, as well as what steps to take and who to contact at personal care homes and other approved institutions. Future discussions will centre around business formation and growth strategies.

My role within the study group was to research what makes study groups effective, prepare a strategic plan, create resources and organize session notes and feedback. This is a role that is important to the study groups' success and I am pleased that as a BScDH student I was able to contribute in this way. I had a great learning experience through the research I conducted, the participation in the study group meetings and working with Mickey Wener, the facilitator.

Being a part of the CDHM/MDHA Support and Study Group, "Exploring Opportunities for Alternative Practice Settings" was insightful and rewarding. I would recommend future BScDh students looking for a project to fulfill one of their independent study courses to strongly consider this evolving study group, or a similar project for their studies. This was a wonderful, inspiring project to be a part of and I wish the study group continued success in the future.

Carol Yakiwchuk and Andrea Fruehm both graduated from the University of Manitoba. It is evident that pursuing higher learning has moved their careers forward in a very positive way. Their careers are something to aspire to and be proud of.

Deer Lodge Centre Student Compiled Medication List continued.....



University of Manitoba School of Dental Hygiene Class of 2009, Carol Yakiwchuk, Dip. DH, BSc (DH), RDH, RCR and Marcia Rushka, RDH

| Medication | Drug Function | Treatment Considerations |
|-----------------------------------|---|---|
| Clindamycin Clopidogrel Bisulfate | Bacteriostatic Inhibits platelet aggregation | Determine why patient is taking drug Monitor vitals Semi-supine position for patient Beware of inability of blood to clot properly |
| Clotrimazone | Antifungal | Examine oral mucosa for signs of fungal infection |
| Clozapine | Antipsychotic for those with Schizophrenia | Monitor vitals at every appointment Assess saliva flow After supine, let patient sit for two minutes Place on frequent recall |
| Cyanocobalamin | Vitamin B12 water soluble vitamin | May cause oral symptom logy |
| Cyclobenzaprine HCL | Skeletal muscle relaxant Adjunct for relief of muscle spasm and pain in musculoskeletal conditions | Monitor vitals at every appointment Assess saliva flow After supine, let patient sit for two minutes Caution with vasoconstrictor Place on frequent recalls |
| Dantrolene Sodium | Skeletal muscle relaxant | Monitor vitals |
| Diclofenac | Non-steroidal anti-inflammatoryInhibits prostaglandin synthesisReduces pain | Assess saliva flowConsider semi-supine positionPotential for photosensitivity |
| Docusate Sodium | Stool softener | Monitor vitals |
| Domperidone | Suppress nausea and vomiting in Parkinson's Disease Symptomatic management of upper GI | Motility disordersNo significant findings |
| Donepezil HCL | Slows progression of Alzheimer's Disease | Monitor vitals at every appointment Assess saliva flow After supine, let patient sit for two minutes Use caution with anaesthesia or sedation Place on frequent recalls |
| Esomeprazole Magnesium | Reduces gastric acid production | Assess saliva flowSemi-supine position |



The MDHA lecture series

provides professional

leaders in the dental &

MDHA Lecture Series:

health fields to speak on

topics relevant to the care

development and networking opportunities. The series showcases local

MDHA Update

MDHA Professional Development 2010-2011 Calendar

February 28, 2011 Manitoba Dental Hygienist Association Lecture Series

Tools of the Trade!

Featured Speaker: Linda MacEachern, Regional Account Manager, Hu-Friedy

Faculty of Dentistry, Schwartz Theatre, 7:00-9:00pm

Date TBD

(due to scheduling conflict)

Manitoba Dental Hygienists Association Workshop
Fluoride Update and Tobacco Cessation for your Client

Featured Speaker: Dr. Doug Brothwell, DMD, Bed, DDPH, MSc, Cert QM

Faculty of Dentistry, Schwartz Theatre, 9:00am-1:00pm

that dental hygienists provide.

April 14, 2011 Manitoba Dental Hygienist Association Lecture Series

Posture Education and Strengthening for the Dental Hygienist

Featured Speaker: Rickie Walkden, BMR (PT)
Faculty of Dentistry, Schwartz Theatre, 7:00-9:00pm

MDHA Members ONLY. Cost for complete series \$120 MDHA Half Day Workshop: MDHA Members \$60, Non-members \$100 Contemporary Ultrasonic Instrumentation Workshop:

MDHA Members \$55, Non-members \$85

See the MDHA website at www.mdha.ca for more information regarding these and future Professional Development opportunities. Interested/Questions call us at 981-7327 or send an email to info@mdha.ca

New: Ultrasonic Workshops available for March 2011!
Sponsored by: Manitoba Dental Hygienists Association
and DENTSPLY Canada

Session 1: Thursday, March 3, 2011

Featured Speaker: Lisa Shoemaker, RDH, Clinical Educator

Theatre E, Faculty of Dentistry, 6:00-9:00pm Supper is included with registration fee

Session 2: Saturday, March 5, 2011

Featured Speaker: Lisa Shoemaker, RDH, Clinical Educator

Theatre E, Faculty of Dentistry, 9:00am-12:00pm Breakfast is included with registration fee

Registration deadline for Ultrasonic Workshop is February 15, 2011
Registration can be done over the phone or via email
Prepayment must be received prior to February 21, 2011

Prepayment (payable to MDHA) and contact information required by mail to:

MDHA, PO Box 25112 Winnipeg, Manitoba, R2V 4C7

Top 5 Reasons to Join the



Find out more! www.mdha.ca email: info@mdha.ca

www.cdha.ca

Manitoba Dental Hygienists Association

- 1. Reduced Fees on CE courses
- 2. Professional Updates & Communications
- 3. Membership has it's Benefits*
- 4. Stay Connected with Alumni
- 5. Give back to your Profession & Community

*Members have access to a comprehensive insurance program, designed specifically for hygienists, plus our growing partner discount with savings on technology, uniforms, personal & auto insurance and much more!

Renewal of Registration - 2011

Please note:

- Wall certificates are issued to *Practising* dental hygienists only. We encourage you to proudly display the wall certificate in your place of practice. Certificates of registration are common in all professions. They confirm to patients and dental team members, that you are a Registered Dental Hygienist and that you have met the high standards of our profession.
- Wallet Cards/Income Tax Receipts are issued to both *Practising* and *Non-Practising* dental hygienists. Both the wallet card and tax receipt portions are perforated and can be detached for their respective purposes.
- Changes to Contact Information: If there are changes to your contact information during the year, please submit these in writing (by mail or by email). Please note changes will not be accepted by phone. Current contact information is imperative.
- Rosters: For those individuals that complete additional dental hygiene skills training (Local Anesthetic, Orthodontic, Restorative) or reach the 3000 minimum practice hours, and wish to be included on the appropriate roster, please contact us or visit www.cdhm.info. A declaration and the certificate of completion, if applicable, will need to be submitted. The declaration may be found at our website at www.cdhm.info and a completed copy may be faxed to our office at 204-219-2679.
- Practice Hours: It is important for you to continually track your practice hours. In order to meet the practice hour requirement
 for the Register of Dental Hygienists Practising, minimum practice hours will be totaled for the 3 years immediately
 preceding the renewal year. For 2012, hours worked in 2009, 2010 and 2011 will be totaled. Minimum practice hours are
 as follows:
 - Graduated between January 15, 2011 and January 14, 2012 no minimum practice hours are required
 - Graduated between January 15, 2010 and January 14, 2011 400 practice hours are required
 - Graduated before January 15, 2010 600 practice hours are required
- CPR Requirements: Completion of a Basic Rescuer (Level C or HCP) Cardiopulmonary Resuscitation Course (CPR) will be
 required annually to ensure dental hygienists' are adequately prepared to respond in an emergency. Evidence of CPR
 course completion within 12 months prior to renewal of your CDHM registration will be required. Plan to complete a CPR
 course between January and November 2011 for 2012 renewal.

| MOVING?? Change of Name and Address Notification | | | | |
|---|--|--|--|--|
| current. Incorrect or out of date addresses can l | Dental Hygienists of Manitoba (CDHM) ensure that their mailing address is always ad to missed mailings which may include important notices and documents. Name g, or by email within 30 days of changes as per by-law 2.1 and should include | | | |
| Name (in full) | CDHM Reg. Number | | | |
| New Name (in full, if applicable) | Old Address | | | |
| New Address | Home Phone Email | | | |
| • | Signature ame/address change card and use it to submit a name change or address further information. Telephone: 204-219-2678 Fax: 204-219-2679 or email: | | | |

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Website: www.cdhm.info
Office Hours:
Monday-Thursday, 9:00am-4:00pm