Course Title: Periodontology I – DHY 209HY

Term: Spring 2014

Hours/Credits: 1 Lecture hour/1 Credit

Pre-Requisites: BIO-104, BIO-109, DHY-101, DHY-108 and DHY-109

Class Day and Time: DHY 209-001 - Friday 10:30 AM – 11:20 AM
               DHY 209-002 - Friday 11:35 AM – 12:25 PM

Classroom: Pitkin Education Center - B-322

Instructor: Denise D. Avrutik, RDH, MS

Office Hours: Monday: 7:30 AM – 8:30 AM and 12:00 Noon – 12:30 PM
               Tuesday: 12:30 PM – 1:00 PM
               Wednesday: 7:30 AM – 8:30 AM
               Also by appointment – Telephone: 201- 493-3628

Office: B-313

Email Address: davrutik@bergen.edu


Instructional Resources:

- BCC Library and Resource Center
- Dental/Dental Hygiene Journals – National and International
- Web-based resources
Internet Resources:

- [www.adha.org](http://www.adha.org) (American Dental Hygienists’ Association)
- [www.ada.org](http://www.ada.org) (American Dental Association)
- [www.cochrane.org](http://www.cochrane.org) (Cochrane Reviews)
- [http://thePoint.lww.com](http://thePoint.lww.com) - Periodontal Resources on the Internet – companion adjunct to your textbook.

Course Description:

This course is the study of the principles and concepts of periodontal disease including the tissues surrounding the teeth in both healthy and diseased states. Soft tissue management, periodontal therapies and case management are discussed. The role of systemic disease and periodontal health is also addressed. Prerequisites: BIO-104, BIO-109, DHY-101, DHY-108 and DHY-109

Course Objectives:

Upon completion of the course, the student will be able to:

- Achieve accuracy in using periodontal terminology.
- Describe the clinical and microscopic appearance of the tissues of the periodontium in health.
- Define and contrast the terms gingival disease, periodontal disease and periodontitis.
- Discuss the controlling factors in periodontal disease.
- Identify the risk factors of periodontal disease.
- List, describe and identify the various periodontal diseases in the classification system established by the American Academy of Periodontology.
- Describe the factors that influence the progression of periodontal disease.
- Explain the role epidemiology plays in evaluating the prevalence of periodontal disease.
- Define the term oral biofilm and describe its role in gingival health and disease.
- State the most effective ways to control dental plaque biofilms.
- Identify the local etiologic factors that influence plaque biofilm pathogenicity and retention.
- Describe the immune system and explain its primary function.
- Define the term inflammation and name the events that can trigger an inflammatory response.
• Describe the role of the host response in periodontal disease.
• Explain the pathogenesis of inflammatory periodontal disease.
• Describe the systemic risk factors for periodontitis.
• Identify the genetic risk factors for periodontitis.
• Discuss the implications of smoking on periodontal health status.
• Compare and contrast the characteristics and clinical appearance of healthy and inflamed gingival tissue.
• Define the two major subdivisions of gingival disease as established by the American Academy of Periodontology.
• Name, define and describe the three major categories of periodontitis.
• Compare and contrast the clinical and radiographic features of chronic periodontitis and aggressive periodontitis.
• Name and explain systemic and genetic factors that may contribute to the initiation and progression of periodontitis.
• Describe the possible role periodontitis plays as a risk factor for systemic disease.

**Competencies for Entry into the Profession of Dental Hygiene**

Dental hygienists must complete an accredited educational program and qualify for licensure in any state or jurisdiction. They practice in collaboration with dental and other health care professionals in a variety of settings.

**Core Competencies (C)**
C.1 Apply a professional code of ethics in all endeavors.
C.2 Adhere to state and federal laws, recommendations, and regulations in the provision of oral health care.
C.3 Use critical thinking skills and comprehensive problem-solving to identify oral health care strategies that promote patient health and wellness.
C.4 Use evidence-based decision making to evaluate emerging technology and treatment modalities to integrate into patient dental hygiene care plans to achieve high-quality, cost-effective care.
C.5 Assume responsibility for professional actions and care based on accepted scientific theories, research, and the accepted standard of care.
C.6 Continuously performs self-assessment for lifelong learning and professional growth.
C.7 Integrate accepted scientific theories and research into educational, preventive, and therapeutic oral health services.
C.8 Promote the values of the dental hygiene profession through service-based activities, positive community affiliations, and active involvement in local organizations.
C.9 Apply quality assurance mechanisms to ensure continuous commitment to accepted standards of care.
C.10 Communicate effectively with diverse individuals and groups, serving all persons without discrimination by acknowledging and appreciating diversity.
C.11 Record accurate, consistent, and complete documentation of oral health services provided.

C.12 Initiate a collaborative approach with all patients when developing individualized care plans that are specialized, comprehensive, culturally sensitive, and acceptable to all parties involved in care planning.

C.13 Initiate consultations and collaborations with all relevant health care providers to facilitate optimal treatments.

C.14 Manage medical emergencies by using professional judgment, providing life support, and utilizing required CPR and any specialized training or knowledge.

**Health Promotion and Disease Prevention (HP)**

HP.1 Promote positive values of overall health and wellness to the public and organizations within and outside the profession.

HP.2 Respect the goals, values, beliefs, and preferences of all patients.

HP.3 Refer patients who may have physiological, psychological, or social problems for comprehensive evaluation.

HP.4 Identify individual and population risk factors, and develop strategies that promote health-related quality of life.

HP.5 Evaluate factors that can be used to promote patient adherence to disease prevention or health maintenance strategies.

HP.6 Utilize methods that ensure the health and safety of the patient and the oral health professional in the delivery of care.

**Community Involvement (CM)**

CM.1 Assess the oral health needs and services of the community to determine action plans and availability of resources to meet the health care needs.

CM.2 Provide screening, referral, and educational services that allow patients to access the resources of the health care system.

CM.3 Provide community oral health services in a variety of settings.

CM.4 Facilitate patient access to oral health services by influencing individuals or organizations for the provision of oral health care.

CM.5 Evaluate reimbursement mechanisms and their impact on the patient’s access to oral health care.

CM.6 Evaluate the outcomes of community-based programs, and plan for future activities.

CM.7 Advocate for effective oral health care for underserved populations.

**Patient Care (PC)**

**Assessment**

PC.1 Systematically collect, analyze, and record diagnostic data on the general, oral, and psychosocial health status of a variety of patients using methods consistent with medical legal principles.
PC.2 Recognize predisposing and etiologic risk factors that require intervention to prevent disease.
PC.3 Recognize the relationships among systemic disease, medications, and oral health that impact overall patient care and treatment outcomes.
PC.4 Identify patients at risk for a medical emergency, and manage the patient care in a manner that prevents an emergency.

Dental Hygiene Diagnosis
PC.5 Use patient assessment data, diagnostic technologies, and critical decision making skills to determine a dental hygiene diagnosis, a component of the dental diagnosis, to reach conclusions about the patient’s dental hygiene care needs.

Planning
PC.6 Utilize reflective judgment in developing a comprehensive patient dental hygiene care plan.
PC.7 Collaborate with the patient and other health professionals as indicated to formulate a comprehensive dental hygiene care plan that is patient-centered and based on the best scientific evidence and professional judgment.
PC.8 Make referrals to professional colleagues and other health care professionals as indicated in the patient care plan.
PC.9 Obtain the patient’s informed consent based on a thorough case presentation.

Implementation
PC.10 Provide specialized treatment that includes educational, preventive, and therapeutic services designed to achieve and maintain oral health. Partner with the patient in achieving oral health goals.

Evaluation
PC.11 Evaluate the effectiveness of the provided services, and modify care plans as needed.
PC.12 Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient self-reports as specified in patient goals.
PC.13 Compare actual outcomes to expected outcomes, reevaluating goals, diagnoses, and services when expected outcomes are not achieved.

Professional Growth and Development (PGD)
PGD.1 Pursue career opportunities within health care, industry, education, research, and other roles as they evolve for the dental hygienist.
PGD.2 Develop practice management and marketing strategies to be used in the delivery of oral health care.
PGD.3 Access professional and social networks to pursue professional goals

Reference: American Dental Education Association, House of Delegates, (2111), Competencies for Entry into the Profession of Dental Hygiene
**Curriculum Core Competencies:**

- Apply a professional code of ethics in all endeavors.
- Adhere to state and federal laws, recommendations, and regulation in the provision of dental hygiene care.
- Provide dental hygiene care to promote patient/client health and wellness using critical thinking and problem solving skills in the provision of evidenced based on practice.
- Use evidence based decision making to evaluate and incorporate emerging treatment modalities.
- Assume responsibility for dental hygiene actions and care based on accepted scientific theories and research as well as the accepted standard of care.
- Communicate effectively with individuals and groups from diverse populations both verbally and in writing.

**Teaching Methodology:** Periodontology I is a hybrid online course. A portion of the course work will be presented by lecture and PowerPoint presentations in class and the remainder will be offered online. Inquiry learning and case studies are often utilized to engage the students and increase the student’s understanding, contribution and participation in the course.

**ADA Compliance Statement:**

Students who require accommodations in accordance with the Americans with Disabilities Act (ADA) can request these services from the Office of Specialized Services. To learn more about how to apply for services. Please visit them at: http://www.bergen.edu/oss

**Examination Policy:**

There will be 2 examinations during the semester. The exam dates will be announced during session one of the Spring semester.

Make-up exams will be administered at the discretion of the instructor and will represent a format different than the regularly scheduled exam. If the student misses the scheduled make-up exam, a grade of “0” will be given.

**Course Requirements:**

Grading is the responsibility and province of the instructor. All students will be graded consistently and fairly. Continuous open communication between student and instructor will be encouraged and appreciated.
There will be assigned readings and supplemental studies.

To receive a passing grade, students must achieve a grade average of 75 and above.

**Evaluation:**

The course grade will be based upon the following weights:

Two in-class examinations – A midterm and a cumulative final examination

Total weight - 80% - Both weighted equally (40% each)

Homework Assignments – 20%

The following grading system reflects the policy established by the college and shall be used in this course:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
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<tbody>
<tr>
<td>A</td>
<td>92 – 100</td>
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<tr>
<td>B+</td>
<td>89 – 91</td>
</tr>
<tr>
<td>B</td>
<td>83 – 88</td>
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<tr>
<td>C+</td>
<td>80 – 82</td>
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<tr>
<td>C</td>
<td>75 – 79</td>
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<tr>
<td>F</td>
<td>below 75</td>
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</tbody>
</table>

**Grading Policy**

It is an unfortunate feature of grade windows that many people are within a point of the next higher grade. In order to maintain the integrity of the system I feel that I have to be consistent in allocating grades. In doing so, I don’t think that one can permit personal issues to influence the decision. I have outlined a grading scheme that is as generous as possible but maintains the standards of the college. In doing so I am not able to change the assigned grades.

**Examination Grade Policy**

A cumulative average of 75 must be achieved on all examinations in Periodontology I to successfully pass the course. When a student has not been able to earn a “C” grade or better, the student will receive the letter grade “F” which signifies the course must be repeated.
Attendance/Punctuality:

Bergen Community College’s attendance policy states: “All students are expected to attend punctually every scheduled meeting of each course in which they are registered. Attendance and lateness policies and sanctions are to be determined by the instructor of each course.”

All program classes and activities must be prioritized. Scheduling conflicts must be resolved by the student so that program classes and activities are met.

Please note that attendance is critical to successful completion of the program. It is your responsibility to find out what you have missed by consulting the instructor. I will not pursue you regarding your missed work.

More than two (2) unexcused absences will result in a loss of credit in this course and will result in the student repeating the entire course.

Two tardy arrivals will equal one absence.

Absence of the Instructor:

As noted in the college catalog, students are expected to wait twenty (20) minutes for a faculty member to come to class. If at the end of the twenty minutes, the faculty member does not come, the students should sign an attendance sheet and indicate the course, date and time. A student should deliver this attendance sheet to the dental hygiene office. The students cannot be penalized by faculty for not waiting longer than the twenty minutes.

Serious Illness, Injury or Pregnancy:

A student in the Dental Hygiene program, who sustains a serious illness, injury or becomes pregnant, must present written medical permission to attend classes and clinical practice at the time of resuming studies. Pregnant students must provide the Dental Hygiene Coordinator with a written permission slip from their physician to participate in radiology and clinical courses. The college medical office and the instructor must each receive a copy of this medical clearance.

Your good health is essential to the practice of dental hygiene. In order to successfully complete the program, full participation in all areas of practice is required regardless of medical conditions.

Academic Conduct:
The Dental Hygiene faculty adheres to the policy statement governing academic conduct as outlined in the Bergen Community College catalog.

- Tape recorders are not permitted in DHY 209.
- Faculty may not post exam grades due to laws.
- Faculty reserve the right to delay the return of exam grades until all students have taken the exam and faculty review of the exam has been completed.
- Cheating, plagiarism and unethical behavior will not be tolerated. Any student who has demonstrated any of the above behaviors will be disciplined according to college procedures.
- Cell phone use is NOT permitted during class.
- Please advise your professor prior to class.

**Progression Requirements:**

- A student must complete the Dental Hygiene program within four consecutive years from enrollment in the program.
- Two core dental hygiene course failures prohibit the student from progressing in the program.
- All dental hygiene students who are withdrawing from a dental hygiene course (DHY) or have received an “F” grade in any course must notify the dental hygiene program chairman about their intention to repeat the course.
- General science and education pre- and co- requisites must be fulfilled as listed in the course sequence of the catalog and program brochure.
- It is the responsibility of the individual student to review the prerequisites for each course prior to registration.

**Recommended Practice:**

To effectively manage the course for successful completion, the following is recommended:

- Read and follow the course syllabus
- Follow the course calendar
- Complete all of the required readings, assignments and reviews.
- Use the email communication system for communicating with each other and your professor on a regular basis.
- Consult the instructor if you have any questions regarding the course material.

**Email and Moodle Communication**

I will attempt to answer all email communication within 24 hours of receipt Monday through Friday. The only exception to this would be on my non-teaching day which is
Thursday. I will check my email at a minimum of once during the weekend and will answer all weekend Moodle mail by 8:30 PM on Sunday. Please check your email on a daily basis and respond in an efficient manner. If you would like to schedule an online discussion with me please email me a suggested time.

**Netiquette Reminders During Discussions and Forums**

Remember to be respectful, keep your responses on topic, post your messages to the appropriate audience, quote responsibly and reply substantially and keep your responses jargon free.

**Assignments:**

All assignments must be submitted by the designated date and time. No late assignments will be accepted.

**Moodle**

When possible, Power Point presentations will be placed on Moodle for class and online teaching.
# Course Content

(Subject to change)

<table>
<thead>
<tr>
<th>Month</th>
<th>Topic</th>
<th>Assigned Readings</th>
<th>Competencies</th>
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<tr>
<td><strong>January</strong></td>
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<tr>
<td>25</td>
<td>Periodontal Disease</td>
<td>Chapters 1, 2 and 3</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td>HW – Focus on Patients Pg. 65</td>
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<td>01</td>
<td>Classifications of Periodontal Disease</td>
<td>Chapter 4</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td>Causes of Periodontal Disease</td>
<td>Chapter 5, HW – Focus on Patients Pg. 92</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td>15</td>
<td>Oral Biofilms and Periodontal Infections</td>
<td>Chapter 6, HW – Focus on Patients Pg. 118</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td>22</td>
<td>Local Contributing Factors to Periodontal Disease</td>
<td>Chapter 7, HW – Focus on Patients Pg. 134</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td><strong>March</strong></td>
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<tr>
<td>01</td>
<td>Immunity and Inflammation</td>
<td>Chapter 8, HW – Focus on Patients Pg. 154</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td>08</td>
<td>Host Immune Response to Periodontal Pathogens</td>
<td>Chapter 9, HW – Focus on Patients Pg. 169</td>
<td>C.1,3,5,7,9,11,12,13, HP. 1,3,4,5, PC.1,2,3,5,6,7,8,10,11, 12, 13</td>
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<td><strong>April</strong></td>
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<td>05</td>
<td>Smoking and Periodontal Disease</td>
<td>Chapter 11 and 12</td>
<td>C.1,3,5,7,9,11,12,13,</td>
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<td>Week</td>
<td>Topic</td>
<td>Chapters</td>
<td>HW – Focus on Patients</td>
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<td>Etiologic Risk Factors for Periodontitis</td>
<td>Chapter 1, 2</td>
<td>C.1,2,3,4,5,6,7,8,10,11,12,13</td>
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<td>19</td>
<td>Clinical Features of the Gingiva and Diseases of the Gingiva</td>
<td>Chapter 3, 4</td>
<td>C.1,2,3,4,5,6,7,8,10,11,12,13</td>
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<td>26</td>
<td>Chronic Periodontitis</td>
<td>Chapter 5</td>
<td>C.1,2,3,4,5,6,7,8,10,11,12,13</td>
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<td>3</td>
<td>Aggressive Periodontitis and Other Periodontal Conditions</td>
<td>Chapter 6, 7</td>
<td>C.1,2,3,4,5,6,7,8,10,11,12,13</td>
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<td>Periodontitis as a Risk Factor for Systemic Disease</td>
<td>Chapter 8</td>
<td>C.1,2,3,4,5,6,7,8,10,11,12,13</td>
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<tr>
<td>10</td>
<td>Cumulative Final Exam</td>
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Lecture Outline

Lecture 1  
Periodontal Disease  

Goal:  
To introduce the student to the periodontium in health and disease.

Objectives:  
1. Describe sequentially the embryologic and histologic development of the periodontium.  
2. List and recognize the clinical, histologic and radiographic features of periodontal health, and the varying classifications of gingivitis and periodontitis.  
3. Describe the functions of the periodontium as a whole and the in functions of the individual components.  
4. Define the term pathogenesis.  
5. Define periodontal disease and contrast it to periodontitis.  
6. Name and describe two types of periodontal disease.  
7. Clinically identify the visible clinical signs of periodontal health, gingivitis and periodontal disease.  
8. Describe the development of periodontal disease.  
9. Describe the position of the crest of the alveolar bone in gingivitis.  
10. Describe the position of the junctional epithelium in health, gingivitis, and periodontitis.  
11. Describe the progressive destruction of alveolar bone loss that occurs in periodontitis.  
12. Compare and contrast horizontal and vertical bone loss.  
13. Define the terms active disease site and inactive disease site.  
15. Define the term gingival pocket.  
16. Define the term periodontal pocket.  
17. Describe suprabony and infrabony pockets.

Lecture 2  
Classifications of Periodontal Disease  

Goal:  
Outline the American Academy of Periodontology’s Classification of Periodontal Disease.

Objectives:  
1. List, describe and contrast all of the American Academy of Periodontology’s classification of periodontal disease.  
2. Define and contrast the terms gingival disease, periodontal disease and periodontitis.  
3. Describe plaque induced gingival diseases, gingival diseases modified by systemic factors and non plaque induced gingival lesions.  
4. Define and contrast the terms chronic periodontitis and aggressive periodontitis.

Lectures 3  
Causes of Periodontal Disease  

Goal:  
Introduces the student to the epidemiology of periodontal disease.
Objectives:
1. Describe the variables in periodontal disease.
2. Define the prevalence and incidence as measurements of disease in a population.
3. Discuss the historical and current theories associated with progression of periodontal disease.
4. Describe how clinical dental hygiene practice can be affected by epidemiological research.

Lecture 4
Oral Biofilms and Periodontal Infections
Goal: Explain the role of bacteria in the initiation and progression of periodontal disease.

Objectives:
1. Define the term biofilm and explain the advantages and disadvantages to bacteria living in biofilm.
2. Name the three bacteria designated as periodontal pathogens by the World Workshop in Periodontology.
3. Identify the bacteria associated with health, gingival disease and periodontitis.
4. Name, identify and describe the components of the biofilm structure.
5. Explain the significance of each component of the biofilm structure.
6. Explain why systemic antibiotics and antimicrobial agents are not effective in eliminating dental plaque biofilms.
7. State the most effective ways to control dental plaque biofilm.
8. Explain why frequent periodontal instrumentation is vital in the control of dental plaque biofilms within a periodontal pockets.

Lectures 5
Local Contributing Factors to Periodontal Disease
Goal: Explain how local contributing factors can increase the risk of developing and allowing the progression of gingivitis or periodontitis.

Objectives:
1. Define the terms pathogenicity and local contributing factors.
2. Identify the local etiologic factors that contribute to the retention of microbial plaque.
3. Identify and differentiate the location, composition, modes of attachment, mechanisms of mineralization, and pathologic potential of supragingival and subgingival calculus deposits.
4. Describe the role of trauma from occlusion as a contributing factor in periodontal disease.
Lectures 6  Immunity and Inflammation
Goal: Study the immune system and inflammation and the role they play in our body’s defense system.
Objectives:
1. Define the term immune system and name its primary function.
2. Define the term inflammation and name two events that can trigger the inflammatory response.
3. Compare and contrast acute inflammation and chronic inflammation.
4. Define the term phagocytosis and describe the steps in this process.
5. Describe the role of polymorphonuclear leukocytes in the immune system.
6. Describe the role of macrophages in the immune system.
7. Describe the three ways that antibodies participate in the host defense.
8. Describe the role of B lymphocytes and T lymphocytes in the immune system.
9. Define the term inflammatory mediator.

Lecture 7  Host Immune Response to Periodontic Pathogens
Goal: Study the body’s response to periodontal pathogens.
Objectives:
1. Define the term immune system and name its primary function.
2. Define the term biochemical mediator and name three types of mediators.
3. Describe the tissue destruction that can be initiated by the biochemical mediators secreted by immune cells.
4. Describe the development of periodontal disease.
5. Describe the role of the host response in the severity and tissue destruction of periodontitis.
6. Explain the immunologic interactions of the host in periodontal disease.
   Discuss current knowledge of the immunopathology of periodontal disease.

Lecture 8  Systemic Factors Associated with Periodontal Disease
Goal: Examine the relationship of systemic risk factors and tobacco smoking in periodontitis.
Objectives:
1. Describe systemic factors that may modify or exaggerate the host response to periodontal pathogens.
2. Discuss the implications of diabetes on the periodontium.
3. Explain the link between skeletal osteoporosis and alveolar bone loss in the jaw.
4. Discuss how hormone alterations may affect the periodontium.
5. Describe a pregnancy-associated pyogenic granuloma.
6. Explain the implications of Down Syndrome on the
 periodontium.

**Lectures 9**  
Smoking and Periodontal Disease  
Etiologic Risk Factors for Periodontitis  

**Goal:** Discuss the contributing etiologic risk factors for periodontitis and describe the causes, appearance and management for chronic periodontitis.

**Objectives:**
1. Discuss the implications of smoking on periodontal health.
2. Discuss the implications of smoking on the host response to periodontal disease.
3. Describe the effects of smoking on periodontal treatment outcomes.
4. Explain why tobacco cessation counseling is a valuable part of patient care and a routine component of periodontal treatment.
5. Define the term biologic equilibrium.
6. Describe the factors that can disrupt the balance between health and disease in the periodontium.
7. Define and provide examples of the term contributing risk factors.
8. Name and define the three major categories of periodontitis.
9. Identify and describe the clinical and radiographic features of chronic periodontitis.
10. Define the term clinical attachment loss.
11. List systemic factors that may contribute to chronic periodontitis.
12. Define recurrent and refractory periodontitis.

**Lecture 10**  
Clinical Features of the Gingiva and Diseases of the Gingiva  

**Goal:** Describe the appearance of healthy and diseased gingiva and to differentiate between dental plaque induced gingival diseases and non-plaque induced gingival lesions.

**Objectives:**
1. Describe the characteristics of healthy gingiva.
2. List the clinical signs of inflammation.
3. Compare and contrast the clinical features of healthy and inflamed gingival tissue.
4. Differentiate between the color of acute and chronic inflammation.
5. Differentiate between bulbous, blunted and cratered papilla.
6. Name and describe the two subdivisions of gingival disease.
7. List systemic factors that may modify gingival disease.
8. Explain how medications and malnutrition can modify gingival disease.
9. Name three types of medications that can cause gingival enlargement.
10. Describe the protocols utilized for managing patients with primary herpetic gingivostomatitis.
Lecture 11  Chronic Periodontitis
Goal: Describe the classifications of periodontitis, the general characteristics of chronic periodontitis, the severity, extent and the progression of periodontitis. Differentiate between refractory and recurrent forms of chronic periodontitis. Discuss initial nonsurgical therapy in the treatment of chronic periodontitis.

Objectives: 1. Name and describe the three major categories of periodontitis.
2. Recognize and describe clinical and radiographic features of chronic periodontitis.
3. Define the term clinical attachment loss.
4. In the clinical setting, explain to your patient the signs and symptoms of chronic periodontal disease.
5. In a clinical setting for a patient with chronic periodontitis, describe to your instructor the clinical signs of disease present in the patient’s mouth.
6. List systemic factors that may be contributing factors to periodontitis.
7. Define and differentiate between recurrent and refractory periodontitis.

Lecture 12  Aggressive Periodontitis and Other Periodontal Conditions
Goal: Examine the characteristics, appearance and treatment of aggressive periodontitis and discuss less common forms of periodontal conditions.

Objectives: 1. Compare and contrast the clinical and radiographic features of chronic periodontitis and aggressive periodontitis.
2. Describe the treatment for aggressive periodontitis.
3. Differentiate between localized and generalized aggressive periodontitis clinically and radiographically.
4. Define necrotizing periodontal diseases.
5. Describe the tissue destruction that occurs in necrotizing periodontal diseases.
6. Compare and contrast the clinical findings of necrotizing ulcerative gingivitis and necrotizing ulcerative periodontitis.
7. Compare and contrast the tissue destruction in chronic periodontitis with that seen in necrotizing ulcerative periodontitis.
8. List the local factors that may contribute to the initiation and progression of periodontitis.
9. Describe how secondary occlusion can lead to rapid bone loss.

Lecture 13  Periodontitis as a Risk Factor for Systemic Disease
Goal: Study how the presence of a chronic oral infection such as periodontitis may have an adverse effect on an individual's systemic health.

Objectives: 1. Describe the possible impact of periodontal infection on cardiovascular health.
2. Discuss the possible impact of periodontal infection on
pregnancy outcomes.
3. Explain the probable bidirectional association between periodontal disease and diabetes.
4. Discuss the association between periodontal disease and pneumonia in health compromised individuals.
Bergen County Community College
Division of Health Professions
Dental Hygiene Department
DHY 209 – Periodontology I
Spring 2014

Student Acknowledgment Verification

I, _______________________________________________ acknowledge that I have read and understand the requirements of this course, DHY 209 – Periodontology I, and agree to abide by the rules set forth in this course outline.

_________________________________________  ____________________________________________
Student Signature                           Denise D. Avrutik, RDH, MS
                                                Assistant Professor, Dental Hygiene

January 24, 2014
Date