

SIXTH EDITION

DENTAL ASSISTING

A Comprehensive Approach





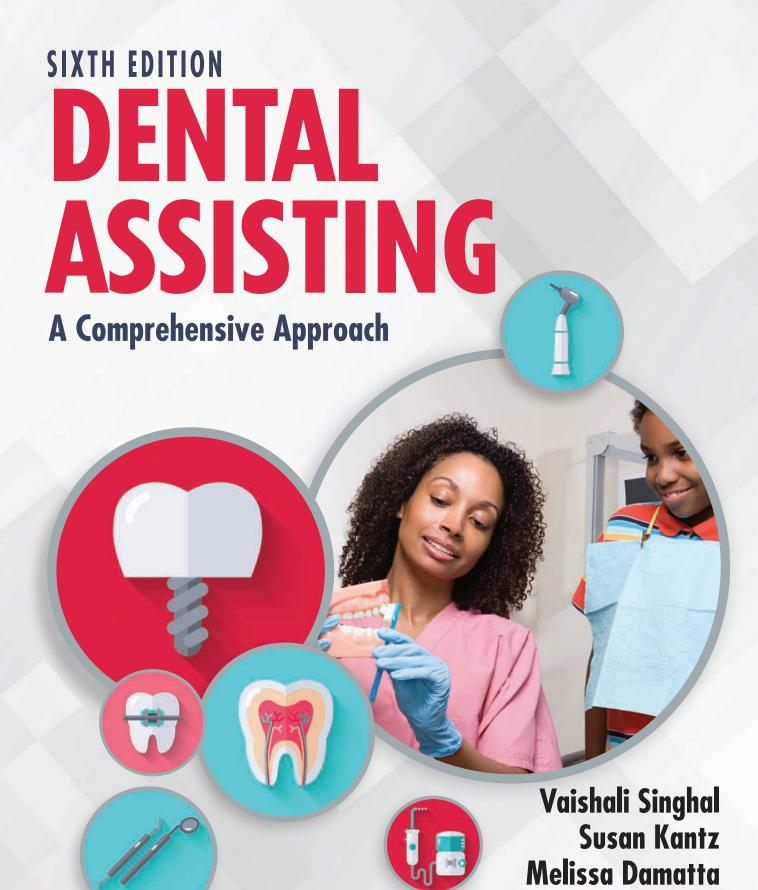
Vaishali Singhal Susan Kantz Melissa Damatta Donna Phinney Judy Halstead



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A Comprehensive Approach



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Donna Phinney

Judy Halstead

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Dedication

This book is dedicated to Judy Halstead and the memory of Donna Phinney. Donna and Judy's professionalism, expertise, and dedication to their students were the backbone of the first five editions. Their shared passion for Dental Assisting education created and sustained this text over the years, and we are proud to continue their legacy.

BRIEF CONTENTS

I DENT	ISTRY AS A PROFESSION		Chapter 26	Dental Sealants	806
Introduction	Language of Dentistry	1	VI DENT	TAL RADIOGRAPHY	
Chapter 1	Introduction to the Dental Profession	11	Chapter 27	Introduction to Dental Radiography, Radiogra	phic
Chapter 2	Psychology, Communication, and Multicultural Interaction	31	Chantor 20	Equipment, and Radiation Safety	821
Chapter 3	Ethics, Jurisprudence, and the Health Information Portability and Accountability Act	55	Chapter 28	Dental Radiology Infection Control, Exposure, Processing and Evaluation of Dental Radiograph and Mounting of Dental Radiographs	
II DENT	AL SCIENCES		Chapter 29	Extraoral Radiography, Digital Radiography, a	
Chapter 4	General Anatomy and Physiology	75		Radiographic Interpretation	907
Chapter 5	Head and Neck Anatomy	123	VII ASSIS	ST WITH RESTORATIVE	
Chapter 6	Landmarks of the Face and Oral Cavity	158	PROC	EDURES AND DENTAL MATERIA	LS
Chapter 7	Embryology and Histology	171	Chapter 30	Dental Emergency Procedures and	
Chapter 8	Dental Anatomy	191		Dental Cements	961
Chapter 9	Oral Pathology	225	Chapter 31	Amalgam Procedures and Materials	991
III PREC	LINICAL DENTAL SKILLS		Chapter 32	Composite Procedures and Materials	1028
Chapter 10	Microbiology	265	Chapter 33	Dental Laboratory Materials	1048
Chapter 11	Infection Control	291	VIII ASSIS	ST WITH COMPREHENSIVE	
Chapter 12	Management of Hazardous Materials	344		ENT CARE	
Chapter 13	The Special Needs and Medically		Chapter 34		1103
	Compromised Patient	368	Chapter 35	·	1130
Chapter 14	Pharmacology	399	Chapter 36	Oral and Maxillofacial Surgery	1186
Chapter 15	Medical Emergencies	431	Chapter 37	· .	1218
IV PREV	ENTION AND NUTRITION		Chapter 38	Periodontics	1249
Chapter 16	Oral Health and Preventive Techniques	477	Chapter 39	Dental Implants	1283
Chapter 17	Nutrition	515	Chapter 40	Fixed Prosthodontics	1303
V ASSIS	T WITH DIAGNOSIS AND PREVENTI	ON	Chapter 41	Computerized Impression and	
Chapter 18	The Dental Office	543		Restorative Systems	1337
Chapter 19	Dental Instruments and Tray Systems	579	Chapter 42	Removable Prosthodontics	1346
Chapter 20	Ergonomics and Instrument Transfer	628	Chapter 43	Cosmetic Dentistry and Teeth Whitening	1382
Chapter 21	Moisture Control	654	IX DENT	TAL PRACTICE MANAGEMENT	
Chapter 22	New Patient Examination	689	Chapter 44		1395
Chapter 23	Anesthesia and Sedation	723	Chapter 45	•	1447
Chapter 24	Oral Prophylaxis and Recare Appointment	752	r	•	
Chapter 25	Coronal Polishing and Topical			,	1481
	Fluoride Application	778		Index	1489

LIST OF PROCEDURES

Chapter 9 Oral Pathology

9-1 The Extraoral and Intraoral Exams

Chapter 11 Infection Control

- 11-1 Clinical Handwashing
- 11-2 Using Alcohol-based Hand Rubs
- 11-3 Performing a Surgical Hand Scrub and Donning Surgical Gloves
- 11-4 Donning Gloves
- 11-5 Steps for Donning and Doffing PPE
- 11-6 Using an Ultrasonic Cleaner
- 11-7 Treatment of a Contaminated Tray
- 11-8 Operating a Steam Autoclave
- 11-9 Using a Dry Heat Sterilizer
- 11-10 Using an Unsaturated Chemical Vapor Sterilizer

Chapter 13 The Special Needs and Medically Compromised Patient

- 13-1 One Person Wheelchair Transfer
- 13-2 Two Person Wheelchair Transfer

Chapter 15 Medical Emergencies

- 15-1 Taking Blood Pressure
- 15-2 Measuring Radial Pulse
- 15-3 Observing and Recording Respiration

Chapter 16 Oral Health and Preventive Techniques

- 16-1 Toothbrushing Methods
- 16-2 Dental Flossing Technique
- 16-3 Applying Disclosing Agent for Biofilm Identification
- 16-4 Completing the Biofilm Control Record
- 16-5 Demonstrate Biofilm Removal Aids
- 16-6 Adult with Airway Obstruction
- 16-7 Treatment of a Patient with Syncope
- 16-8 Procedure to Treat a Patient with Asthma
- 16-9 Procedure to Treat the Hyperventilating Patient
- 16-10 Procedure for Treating of a Patient Experiencing Seizures

Chapter 18 The Dental Office

- 18-1 Positioning Patient Dental Chair
- 18-2 Daily Routine to Open the Office
- 18-3 Daily Routine to Close the Office
- 18-4 Seating the Dental Patient
- 18-5 Dismissing the Dental Patient

Chapter 19 Dental Instruments and Tray Systems

- 19-1 Identify Examination Instruments
- 19-2 Identify Expendable Materials
- 19-3 Identify Hand Cutting Instruments
- 19-4 Identify Amalgam Restorative Instruments
- 19-5 Identify Composite Restorative Instruments
- 19-6 Identify Accessory Restorative Instruments

- 19-7 Identification of Dental Burs
- 19-8 Identification of Abrasive and Polishing Rotary Instruments
- 19-9 Identify and Attach Dental Handpieces, Handpiece Attachments, and Rotary Instruments

Chapter 20 Ergonomics and Instrument Transfer

- 20-1 Single-Handed Pen Grasp Double Instrument Transfer
- 20-2 Two-Handed Palm Grasp Double Instrument Transfer

Chapter 21 Moisture Control

- 21-1 Positioning and Placement of HVE
- 21-2 Preparing the Dental Dam Setup
- 21-3 Assist Operator in Placing Clamp before Dental Dam

Chapter 22 New Patient Examination

- 22-1 Procedure Taking Blood Pressure Using Automated Wrist Cuff
- 22-2 Taking an Oral Temperature Using a Digital Thermometer
- 22-3 Taking a Tympanic Temperature
- 22-4 Taking Intraoral Images
- 22-5 Assist with New Patient Examination

Chapter 23 Anesthesia and Sedation

- 23-1 Assembling the Local Anesthetic Syringe
- 23-2 Assisting with the Administration of Topical and Local Anesthesia
- 23-3 Disassembling a Dental Local Anesthetic Needle
- 23-4 Assisting with the Administration of Nitrous Oxide

Chapter 24 Oral Prophylaxis and Recare Appointment

- 24-1 Comprehensive Periodontal Charting
- 24-2 Assisting During Oral Prophylaxis
- 24-3 Assisting During Scaling and Root Planing

Chapter 25 Coronal Polishing and Topical Fluoride Application

- 25-1 Coronal Polishing—Rubber Cup Technique
- 25-2 Polishing with Air-Powder Polish
- 25-3 Topical Fluoride Application—Tray Technique
- 25-4 Topical Fluoride Application—Varnish Technique

Chapter 26 Dental Sealants

26-1 Placing Photopolymerized Dental Sealants

Chapter 28 Dental Radiology Infection Control, Exposure, Processing and Evaluation of Dental Radiographs, and Mounting of Dental Radiographs

- 28-1 Infection Control Before, During, and After Exposure
- 28-2 Exposure of a Full Mouth Series of Radiographs Using the Paralleling Technique
- 28-3 Full Mouth Series Exposure with Bisecting-the-Angle Technique
- 28-4 Adult Occlusal Exposures

28-5	Pediatric	Occlusal	Images
20 3	i Calatiic	Occiusai	IIIIaqcs

- 28-6 Pediatric Periapical and Bitewing Exposures
- 28-7 Automatic Processing of Films in an Autoprocessor with a Daylight Loader (Peri-Pro)
- 28-8 Mounting Traditional Films
- 28-9 Steps in Film Duplication

Chapter 29 Extraoral Radiography, Digital Radiography, and Radiographic Interpretation

- 29-1 Panoramic Exposure
- 29-2 Digital Radiography Techniques

Chapter 30 Dental Emergency Procedures and Dental Cements

- 30-1 Mixing Zinc Phosphate Cement
- 30-2 Mixing Zinc Oxide–Eugenol Cement—Powder/Liquid Form
- 30-3 Mixing Zinc Oxide-Eugenol Cement—Two-Paste System
- 30-4 Mixing Polycarboxylate Cement
- 30-5 Mixing Glass Ionomer Cement
- 30-6 Assisting with a Temporary Cement Restoration

Chapter 31 Amalgam Procedures and Materials

- 31-1 Placing Cement Bases
- 31-2 Placing Calcium Hydroxide Cement Liner—Two-Paste System
- 31-3 Placing a Cavity Varnish
- 31-4 Placing a Self-Curing Amalgam Bonding Agent
- 31-5 Assembly of the Universal Matrix and Retainer
- 31-6 Placement and Removal of the Universal Matrix
- 31-7 Triturating Dental Amalgam
- 31-8 Assisting with a Class II Amalgam Restoration
- 31-9 Assisting with Finishing and Polishing an Amalgam Restoration

Chapter 32 Composite Procedures and Materials

- 32-1 Placing Light-Cured Glass Ionomer Cavity Liner
- 32-2 Placing the Etchant
- 32-3 Placing the Bonding Agent
- 32-4 Placement and Removal of the Matrix Strip
- 32-5 Assisting with a Class III Composite Restoration

Chapter 33 Dental Laboratory Materials

- 33-1 Mixing Alginate with an Alginator II Mixing Device
- 33-2 Mixing an Alginate Impression and Loading Impression Tray
- 33-3 Taking an Alginate Impression
- 33-4 Taking a Bite Registration
- 33-5 Taking a Polyether Impression
- 33-6 Taking a Silicone (Polysiloxane) Two-Step Impression
- 33-7 Mixing Plaster for an Alginate Impression
- 33-8 Pouring Anatomic Portion of Plaster Study Model
- 33-9 Pouring Art Portion of Plaster Study Model Using Double-Pour Method
- 33-10 Removing Plaster Model from Alginate Impression
- 33-11 Trimming Diagnostic Casts/Study Models
- 33-12 Performing a Facebow Transfer

- 33-13 Mounting Models on an Articulator after Facebow Records Have Been Completed
- 33-14 Constructing a Self-Curing Acrylic Resin Custom Tray
- 33-15 Constructing a Vacuum-Formed Acrylic Resin Custom Tray
- 33-16 Sizing, Adapting, and Seating Aluminum Temporary Crown
- 33-17 Cementing the Aluminum Crown
- 33-18 Sizing, Adapting, and Seating a Preformed Acrylic Crown
- 33-19 Develop or Place a Pontic in a Model for a Three-Unit Bridge on a Dental Model; Adapt a Matrix; Make, Trim, and Fit the Three-Unit Provisional Bridge
- 33-20 Preparing a Full Crown Provisional on a Lower Left Molar on a Patient
- 33-21 Cementing Custom Self-Curing Composite Temporary Crown

Chapter 34 Pediatric Dentistry

- 34-1 T-Band Placement
- 34-2 Stainless Steel Crown Placement
- 34-3 Assisting with a Pulpotomy

Chapter 35 Orthodontics

- 35-1 Assisting in the Placement and Removal of Separators
- 35-2 Assisting with Cementation of Orthodontic Bands
- 35-3 Assisting with Direct Bonding of Brackets
- 35-4 Assisting in Insertion of First Orthodontic Wire
- 35-5 Retie Appointment
- 35-6 Assist with Debanding/Debonding Appointment for Removal of the Braces

Chapter 36 Oral and Maxillofacial Surgery

- 36-1 Assisting with Routine Extraction
- 36-2 Assisting with Multiple Extractions
- 36-3 Assisting with Extraction of Impacted Tooth
- 36-4 Assisting with Suture Removal
- 36-5 Assisting with Treatment of Alveolitis

Chapter 37 Endodontics

- 37-1 Assist in Pulpal Disease Diagnosis
- 37-2 Assist in Root Canal Therapy (Cold Lateral Condensation Technique)

Chapter 38 Periodontics

- 38-1 Occlusal Adjustment
- 38-2 Gingivectomy
- 38-3 Osseous Surgery
- 38-4 Preparation and Placement of Noneugenol Periodontal Dressing
- 38-5 Removal of Periodontal Dressing

Chapter 39 Dental Implants

39-1 Two-Stage Implant Technique

Chapter 40 Fixed Prosthodontics

- 40-1 Placing and Removing Retraction Cord—Advanced Chairside Function
- 40-2 Porcelain Veneers
- 40-3 Gold Crown Preparation

Chapter 41 Computerized Impression and Restorative Systems

41-1 CAD/CAM Restoration

Chapter 42 Removable Prosthodontics

- 42-1 Fabrication of Partial Dentures
- 42-2 Full Dentures Fabrication
- 42-3 Chairside Denture Reline
- 42-4 Laboratory Denture Reline

Chapter 43 Cosmetic Dentistry and Teeth Whitening

43-1 Professional In-Office Whitening for Vital Teeth

Chapter 44 Dental Practice Management

- 44-1 Preparing for the Day's Appointments
- 44-2 Reordering Supplies
- 44-3 Posting Patient Charges
- 44-4 Balancing Day Sheets
- 44-5 Preparing a Deposit Slip
- 44-6 Reconciling a Bank Statement
- 44-7 Writing a Business Check
- 44-8 Filing Insurance Claims

Chapter 45 Career Planning

- 45-1 Preparing a Cover Letter
- 45-2 Preparing a Professional Resume
- 45-3 Preparing a Follow-up Letter

CONTENTS

Psychology in Dentistry 32

Health Behavior Theories 32

Stages of Change Theory (Transtheoretical Model) 33 • Social Learning Theory

INTRODUCT	,	(Social Cognitive Theory) 33 • Health Belief Model 33 • Learning Ladder 34 • Maslow's Hierarchy of Needs 34	
Dental Termi Word Parts	••	Components of the Communication Process 36 Oral Communication 37 • Listening Skills 37	
Strategy for Building Dental Vocabulary 4		Defense Mechanisms 40	
Break the Each Wor	Word into Its Parts 5 • Define the Meaning of d Part 5 • Put the Parts Together 5 le the Meaning 6 • Use Your Senses 6	Dental Phobias 40 Communicating with Patients, Staff, and Other Professionals 40	
Make It Pronunciation	Meaningful 6	The Different Generations 40 • Stress in the Dental Office 43 • Culture, Ethnicity, and	
Plurals 7		Race 43 • Multicultural Interaction 45 • Written Communication 45	
Acronyms	ponyms/Homonyms 7 s 7 · Eponyms 7 · Homonyms 8 refinitions and Pronunciation 9	Letters 46 • Newsletters 46 • Patient Records 46 • Office Policy Manual 46 • Electronic Messaging 46 • Script Development 46	
	uestions 9 • Critical Thinking 10 • Key Terms 10	Effective Writing 46	
SECTION	Dentistry as a Profession	Preparing a Dental Presentation 47 Types of Oral Presentations 47 • Preparing a Table Clinic Presentation 47	
CHAPTER 1	Introduction to the Dental	Creating Good Visuals 48 Backdrop 49 • Title 49 • Content 49 • Design 49	
CHAPTER	Profession 11	Handouts 50 Delivering the Presentation 50 Delivering the Presentation 50 Delivering the Presentation 50 Delivering the Presentation 50	
Introduction		Dress 50 • Body Language 50 • Speaking 50 Chapter Summary 51	
History of De		Case Study 51 • Review Questions 51	
Later Progress of Dentistry 13		 Critical Thinking 53 Key Terms 53 	
-	Dentistry in the United States 13		
Education and Organized Dentistry 14 American Dental Association 16		CHAPTER 3 Ethics, Jurisprudence, and the	
Advances in Equipment and Pharmaceuticals 17		Health Information Portability and	
 Infection 	ed Handpiece 17 • Sit-Down Dentistry 18 n Control and Prevention 18 Ovider 10 Local Aparthesia 10	Accountability Act 55	
 Advance 	Oxide 19 • Local Anesthesia 19 es in Imaging 19 • Advances in Techniques 20	Introduction 55	
 Dental S 	Specialties 20	Ethics for the Dental Assistant 56 License to Practice 56 • Societal Trust 57	
Roles and Du Direct Car DMD) 2 Assistant • Earning	Restorative Options 20 uties of the Dental Team Members 21 re Dental Team 21 • Dentist (DDS or 1 • Dental Hygienist (RDH or LDH) 22 • Dental 22 • Dental Assisting Career Opportunities 23 DANB Certification 23 • Duties of the Expanded 5 Dental Assistant (EFDA) 23	 Confidentiality 57 • Ethical Principles 58 • Ethical Dilemmas 58 • Dental Jurisprudence for the Dental Assistant 59 • Regulatory versus Nonregulatory Agencies 61 • Insurance Relations 66 • Legal Relations 66 • HIPAA in Public Health 66 • Emergency Care 66 • Correctional Dentistry 67 • Education 67 • HIPAA in Technology 67 	
 Indirect Assistant Technicia 	Care Dental Team 24 • Dental Business 24 • Certified Dental Laboratory n (CDT) 24 • Dental Products Salesperson 25 Educator 25 • Other Members of the Dental	Chapter Summary 69 Case Study 69 • Review Questions 69 • Critical Thinking 71 • Key Terms 71	
	mary 25 ly 25 • Review Questions 26 Thinking 26 • Key Terms 26	SECTION II Dental Sciences	
CHAPTER 2 Psychology, Communication, and		CHAPTER 4 General Anatomy and Physiology 75	
	Multicultural Interaction 31	Introduction to Anatomy and Physiology 75	
Introduction Psychology		Organization of the Human Body 75 Cell 77 • Tissue 78 • Organs 78 • Body Systems 78	

Body Locations and Directions 79

Anatomical Position 79 • Body Planes 79 • Body Cavities 79 • Directional Terms of the Body 79 • Interrelationship Between Oral Health and the Body 80

S	kel	letal	Systen	n 80
3	ĸe	etai	Systen	11 01

Anatomy of Bones 81 • Functions of Bones 82

• Categories of Bones 82 • Divisions of the Skeleton 82 • Types of Joints 82 • Common Diseases and Conditions of the Skeletal System 82

Muscular System 83

Anatomy of Muscles 83 • Types of Muscles 84 Physiology of Skeletal Muscles 87 • Muscle Function 88 • Common Conditions and Diseases of the Muscular System 88

Nervous System 88

Structure of the Nervous System 89 • Central Nervous System (CNS) 89 • Peripheral Nervous System (PNS) 90 Common Diseases of the Nervous System 90

Endocrine System 93

Function of the Endocrine System 93

Endocrine Glands 93

Common Diseases and Conditions of the Endocrine and Reproductive Systems 94

Reproductive System 95

Female Reproductive System 95 • Male Reproductive System 96 • Common Diseases and Conditions of the Reproductive Systems 97

Cardiovascular System 97

The Heart 97 • Blood Vessels 100 • Components of Blood 100 • Common Diseases and Conditions of the Cardiovascular System 102

Digestive System 103

Route of Digestion 103 • Accessory Organs 105 • Common Diseases and Conditions of the Digestive System 105

Respiratory System 105

Anatomy and Physiology of the Respiratory System 106 Respiratory Process 107 • Respiratory Muscles 107 • Respiration Rate 107 • Common Diseases of the Respiratory System 108

Lymphatic System 108

Anatomy and Physiology of the Lymphatic System 108 · Common Diseases and Conditions of the Lymphatic and Immune Systems 109

Integumentary System 109

Functions of the Integumentary System 109 • Layers of the Skin 110 • Accessory Organs 111 • Diseases and Conditions of the Integumentary System 111

Urinary System 112

Functions of the Urinary System 112 • Organs of the Urinary System 112 • Composition of Urine 112 Common Diseases and Conditions of the Urinary System 112

Chapter Summary 114

Case Study 114 • Review Questions 114 • Critical Thinking 115 • Key Terms 116

CHAPTER 5 Head and Neck Anatomy 123

Introduction 123

Bones of the Cranium 123

Bones of the Neurocranium 123 • Bones of the Viscerocranium 127

Temporomandibular Joint (TMJ) 130

Temporal Bone Section 130 • Mandible Bone Section 130

Muscles of the Head and Neck 130

Muscles of Mastication 130 • Muscles of Facial Expression 131 • Muscles of the Tongue and Floor of the Mouth 132 • Muscles of the Soft Palate 133 • Muscles of the Neck 133

Tongue and Salivary Glands 135

Body: Dorsal Surface: Tongue Structure 135 • Body: Ventral Surface: Tongue Structure 136 • Base of Tongue 137 • Function of Saliva 137 • Major Salivary Glands 138 • Minor Salivary Glands 138

Nerves of the Head and Neck 139

Cranial Nerves 139 • Branches of the Trigeminal Nerve 139

Circulation of the Head and Neck 141

Pathway of Blood to the Head 141 • Branches of Veins Important to Dentistry 141 • Head and Neck Lymph Nodes 141

Chapter Summary 150

Case Study 151 • Review Questions 151 • Critical Thinking 152 • Key Terms 152

CHAPTER 6 Landmarks of the Face and Oral Cavity 158

Introduction 158

Landmarks of the Face and Oral Cavity 158

Landmarks of the Face 158

Divisions of the Oral Cavity 159

Vestibule 159 • Oral Cavity Proper 160

Chapter Summary 166

Review Questions 166 • Critical Thinking 168 • Key Terms 168

CHAPTER 7 Embryology and Histology 171

Introduction 171

Development of the Orofacial Complex 172

Prenatal Development: Stage 1 Germinal Stage Prenatal Development: Stage 2 Embryonic Stage Prenatal Development: Stage 3 Fetal Stage 172

Development of the Oral Cavity and Face 173

Pharyngeal Arches 174 • Hard Palate Formation 174

Tooth Development: Odontogenesis 176 Dental Lamina 176

Stages of Tooth Development 176

Bud Stage 177 • Cap Stage 177 • Bell Stage 177
• Appositional Stage 178 • Dentinogenesis 179
• Cementogenesis 180 • The Pulp 180 • Artifacts of Enamel, Dentin, Cementum, and Pulp 181 • Parts of a Tooth 182

Periodontium 183

Attachment Unit 183

Cementum 185

Periodontal Ligament (PDL) Components 185 • Gingival Unit 185 • Gingival Unit Fibers 186

Chapter Summary 187

Review Questions 187 • Critical Thinking 188 • Key Terms 188

CHAPTER 8 Dental Anatomy

Introduction 191

Types of Teeth and Their Functions 191

Incisors 191 • Canines 191 • Premolars 192 Molars 192

Dental Arches 192

Dental Quadrants 192 • Dental Sextants 193

Dentition Periods 193

Primary Dentition 193 • Mixed Dentition 194 Permanent Dentition 194

Surfaces of the Teeth 194 Points of Reference 196

Line Angles and Point Angles 197 • Divisions into Thirds 197

Tooth Morphology 198

Anatomic Landmarks of Anterior Teeth 198 • Elevations 198 • Depressions 198 • Contact Areas 198

Anterior Permanent Dentition 199

Maxillary Central Incisor 199 • Mandibular Central Incisor 199 • Maxillary Lateral Incisor 201 • Mandibular Lateral Incisor 202 • Maxillary Canines 202 • Mandibular Canine 204

Posterior Permanent Dentition 205

Premolars 206 • Molars 210

Universal Numbering System 214

Primary Dentition 214

Importance of Primary Teeth
Primary and Permanent Teeth
214 • Comparison of
215 • D. Maxillary Central Incisor 216 • D. Maxillary Lateral Incisor 216

D. Maxillary Canine 216
D. Maxillary First Molar 217
D. Maxillary Second Molar 217
D. Mandibular Central Incisor 217 • D. Mandibular Lateral Incisor 218 • D. Mandibular Canine 218 • D. Mandibular First Molar 218 • D. Mandibular Second Molar 219

Chapter Summary 219

Case Study 219 • Review Questions 220 • Critical Thinking 221 • KeyTerms 221

CHAPTER 9 Oral Pathology 225

Introduction to Oral Pathology 226

Diagnosis of Lesions 226 Clinical Diagnosis 226 • Radiographic Diagnosis 227 • Historical Diagnosis 228 • Laboratory, Microscopic, and Surgical Diagnoses 228 • Therapeutic Diagnosis 228 Differential Diagnosis 228 • Final Diagnosis 228

Inflammatory Process 228

Initiation Phase 229 • Amplification Phase 229 • Termination Phase 229

Classification of Lesions by Location 229

Lesions Classified above the Surface of the Oral Mucosa 229 • Lesions Classified below the Surface of the Oral Mucosa 229 • Lesions Classified as Flat or Even with the Surface of the Oral Mucosa 229

Infectious Diseases of the Tooth 229

Dental Caries Process 229 • Rampant Caries 233 Prevention and Treatment of Dental Caries 234

Lesions of the Oral Cavity Caused by Biological Agents 235

Actinomycosis 235 • Herpes Simplex Virus 235 • Aphthous Ulcers 236 • Herpes Zoster (Shingles) 236 • Syphilis 236 • Candida Albicans 237 • Cellulitis 238

Developmental Disturbances of the Teeth 238

Amelogenesis Imperfecta 238 • Dentinogenesis Imperfecta 239 • Ankylosis 239 • Anodontia and Hypodontia 239 • Fusion 239 • Gemination 239 • Macrodontia/Microdontia 240 • Supernumerary Teeth 240 • Dens in Dente 240

Anomalies of the Tongue 240

Fissured Tongue 240 • Bifid Tongue 240 • Ankyloglossia 240 • Geographic Tongue 241

Lesions Produced by Chemical Agents 241

Aspirin Burns 241 · Nicotine Stomatitis 241 Chewing Tobacco Lesion 242 • Black Hairy Tongue 242 • Gingival Hyperplasia 242

Lesions Produced by Physical Agents 243

Mucocele/Ranula 243 • Denture Induced Hyperplasia 243 • Amalgam Tattoo and Oral Piercings 243

Oral Conditions Related to Hormonal Imbalances 245

Lesions Caused by Nutritional Deficiencies 245

Angular Cheilitis 245 • Glossitis 245 • Anorexia Nervosa and Bulimia 245

Neoplasms 245

Benign Neoplasms 246 • Malignant Neoplasms 247 • Common Sites for Oral Cancer 249 • Stages of Cancer 249 • Warning Signs of Oral Cancer 249

Precancerous Lesions 249

Leukoplakia 249 • Erythroplakia 249 • Lichen Planus 250

Oral Lesions Related to HIV and AIDS 250

Candida Albicans 250 • Periodontal Disease 251 Herpetic Lesions
Oral Ulcerations
251 · Hairy Leukoplakia
251
Kaposi's Sarcoma
251

Lesions Caused by the Human Papilloma Virus 252

Oral Cancer Screening 252

Steps in Oral Cancer Screening Procedure 252

Teaching Your Patient to Do Oral Cancer Self-Screening 256

Types of Diagnostic Tools Available for Oral Cancer Screening 256

OralCDx Brush Test® 257 • ViziLite® and Vizilite TBlue® 257 • VELscope® 257

Caring for Patients Undergoing Cancer Treatment 257

Types of Treatment 257 • Patient Treatment Prior to 258 • Patient Treatment during 258 • Patient Treatment after Radiation Therapy 258

Chapter Summary 260

Case Study 260 • Review Questions 261 • Critical Thinking 262 • KeyTerms 262

SECTION III Preclinical Dental Skills

CHAPTER 10 Microbiology 265

Introduction 265

History of Microbiology 266

Infectious Diseases 266

Pathogenicity 266 • Acute and Chronic Diseases 266 Latent Diseases 266 • Opportunistic Diseases 267

Groups of Microorganisms 267

Bacteria 267

Viruses 269 • Protozoa 269 • Fungi 269 • Rickettsiae 269 • Algae 269

Prions 270

Normal Flora 270

Benefits of Normal Flora 270

Diseases Caused by Microorganisms 270

Bacterial Diseases 270 • Viral Diseases 272 • Protozoal Diseases 277 • Fungal Diseases 278 • Rickettsial
Diseases 278 • Prion Diseases 278 • Harmful Effects of Normal Flora 279

The Body's Resistance to Disease 280

Nonspecific Defenses 280 • Specific Defenses 281

Immunity 281

Innate Immunity 281 • Adaptive Immunity 281 Vaccines 281

Epidemiology	28	2
Chapter Summar	y	282

Case Study 282 • Review Questions 283 • Critical Thinking 284 • Key Terms 284

CHAPTER 11 Infection Control 291

Aseptic Technique 292

Asepsis Steps 292

Hand Hygiene 292

Hand Hygiene Techniques 292 • Hand Care 297

Personal Protective Equipment (PPE) 300

Types of Gloves Used in Dentistry 300 • Protective Clothing 304 • Masks 305 • Protective Eyewear 30

Changes in PPE related to COVID-19

pandemic 306

Donning and Doffing PPE 307

Surface Sanitization 308

Housekeeping Surfaces 308 • Clinical Contact Surfaces 310

Patient Treatment Instruments 315

Single Use Items 315 • Instrument Processing Area 315

Processing of Contaminated Dental Instruments 3

Ultrasonic General Cleaning 316 • Automated Washing/Disinfectors 319 • Handscrubbing Dental Instruments 319 • Procedures for More Difficult Stains 319 • Treatment of Contaminated Tray in Sterilization Area 319

Disinfection Protocols 322

Classification of Instruments and Procedures 322

Disinfectant Categories 322

Chemicals Not EPA Registered as Disinfectant 324

Disinfecting Procedures 324

Disinfecting Clinical Contact Surfaces 326 • Disinfecting Transfer Surfaces 326 • Disinfecting Contaminated Instruments 326 • Factors Affecting Disinfectant Efficiency 326 • Disinfecting Waterlines 326 • Disinfecting Dental Vacuum Systems 328

Sterilization 329

Preparation and Packaging for Sterilization 329 • Methods of Sterilization 330 • Corrosion Control 334 • Handpiece Sterilization 335 • Factors Affecting Sterilization 336 • Monitoring Sterilization 336 • Sterilization Protocol 337

Guidelines for Infection Control in Dentistry 338

Nonregulatory Agencies and Infection Control 338 • Regulatory Agencies 339

Chapter Summary 340

Case Study 340 • Review Questions 340 • Critical Thinking 342 • Key Terms 342

CHAPTER 12 Management of Hazardous Materials 344

Introduction 344

OSHA's Bloodborne Pathogen Standard 348

Exposure Control Plan 348 • Goals and Objectives 348 • OSHA Compliance Directive 349 • Engineering/
Work Practice Controls 349 • Occupational Exposure to Bloodborne Pathogens 350 • Documentation of Exposure Incident 351

Employee Work Site Safety 352

Broken Glass 352 • Laundry 352 • Hazardous Chemicals 352

OSHA's Hazardous Communication Standard (HCS) 353

Safety Data Sheets 353 • Harmonized Label 353 • Chemical Warning Label Determination 354 • Quality Assurance/Updates 354

Evacuation Plans and Fire Extinguishers 363

Chapter Summary 365

Case Study $365 \cdot \text{Review Questions} \quad 366 \cdot \text{Critical Thinking} \quad 367$

CHAPTER 13 The Special Needs and Medically Compromised Patient 368

Introduction 368

The Patient with Special Needs 368

The Americans with Disabilities Act 369

General Treatment Considerations 369

Assessment, Planning, and Scheduling 369 • Patient Care Modification 369 • Protective Body Stabilization 371 • Use of a Mouth Prop 371

The Patient Who Uses a Wheelchair 371

Wheelchair Transfer 372 • Ergonomics for Wheelchair Transfer 372 • Providing Treatment in the Wheelchair 376

Sensory Disabilities 376

Vision Impairment 376 • Deaf or Hard of Hearing 377

Intellectual and Physical Disabilities 377

Intellectual Disabilities 377 • Physical Disabilities 378

The Medically Compromised Patient 378

The Pregnant Patient 380 • The Older Patient 380 • Cardiovascular Diseases 381 • Neurologic Disorders 384

Blood Disorders 386

Red Blood Cell Disorders 386 • Musculoskeletal
Disorders 387 • Endocrine Disorders 388 • Psychiatric
Disorders 388 • Kidney Disease 390 • Respiratory
Disorders 390 • Cancer 391 • HIV/AIDS 392

Chapter Summary 393

Case Study 393 • Review Questions 393 • Critical Thinking 395 • Key Terms 395

CHAPTER 14 Pharmacology 399

Introduction 400

Why Study Pharmacology? 400

Scope of Dental Therapeutics 401

Drug Laws 401

Drug Development and Testing 401

Sources of Drugs 402 • Drug Names 402

Drug References 402

Dosages and Routes of Administration 403

Calculating Dosages 403 • Routes of Administration 403

Drug Processing by the Body 405

Absorption 405 • Distribution 405 • Metabolism 405 • Excretion 406

Writing a Prescription 407

Parts of the Prescription 407 • Abbreviations and Units of Measure 407 • Computer Generated Prescriptions 408

Laws Governing Prescriptions 409

Who May Write a Prescription? 409
• Documentation 409 • Patient Information 409 •

 Documentation 409 • Patient Information 40 Controlled Substances 409

Substance Use disorder 410

Recognizing Prescription Seeking Behaviors 410
• Protecting the Office against Drug Diversion 411

Therapeutic versus Adverse Drug Effects 411 Types of Adverse Reactions 411

Commonly Used Medications in Dentistry 414

Anesthetics 414 • Anti-Anxiety and Sedative Medications 416 • Analgesics 417 • Anti-Infective Drugs 418

Patient Risk Assessment 421

ASA Classification System 421

Dental Implications of Medications for Systemic Disease 421

Cardiovascular Medications 421 • Endocrine Medications 423 • Psychiatric Medications 424 • Medications for Neurological Disorders 424 • Cancer Chemotherapy 424 • Osteoporosis 425 Medications Used to Treat Substance Use Disorders 425

Chapter Summary 425

Case Study 426 • Review Questions 426 • Critical Thinking 428 • Key Terms 428

CHAPTER 15 Medical Emergencies 431

Introduction 432

Prevention 432

Medical History 432

Vital Signs 432

Anxious Patients 438

American Society of Anesthesiologist (ASA)

Classification 438
Medical Consult 438

Staff and Office Preparation 439

Basic Emergency Kit 440 • Optional Emergency Kit Items 440 • Team Effort in Emergency Management 440

Syncope 442

Vasovagal Syncope 442 • Postural Hypotension 443

Respiratory Disorders 444

Asthma 445 • Hyperventilation 446 • Chronic Obstructive Pulmonary Disease (COPD) 446

Adrenal Disorders 447

Acute Adrenal Insufficiency 447 • Medical History and Prevention and of Acute Adrenal Insufficiency 447 • Management of an Acute Adrenal Crisis in the Dental Office 450

Thyroid Disorders 450

Thyroid Anatomy 450 • Hormones Produced by the Thyroid Gland 450 • Hyperthyroidism and Hypothyroidism 451 • Medical History and Prevention of Thyroid Disorder Related Medical Emergencies 451 • Management of Thyroid Disorders in the Dental Office 452

Diabetes 452

Types of Diabetes 452 • Acute and Chronic Complications of Diabetes 454 • Management of Diabetes 454 • Medical History and Prevention of Diabetic Complications in the Dental Office 454 • Management of the Diabetic Patient in the Dental Office 455

Angina and Myocardial Infarction 455

Angina 455 • Management of a Patient with a History of Angina 457 • Myocardial Infarction 457

Cardiac Arrest 459

Basic Life Support 459

Congestive Heart Failure 460

Causes of Congestive Heart Failure 460 • Medical History and Prevention of an Emergency Related to Congestive Heart Failure 460 • ASA Classifications 460 • Dental Management of the Patient with Congestive Heart Failure 460 • Management of Acute Pulmonary Edema in the Dental Office 460

Epilepsy and Seizures 461

Generalized Seizures 462 • Causes of Epilepsy and Seizures 463 • Medical History and Prevention of Seizures in the Dental Office 463 • Management of Epilepsy and Seizures in the Dental Office 463

Cerebrovascular Accident 463

Types of Cerebrovascular Accidents 464 • Predisposing Factors to a Cerebrovascular Accident 464 • Medical History and Prevention of a Cerebrovascular Accident 466 • Dental Management of the Patient with a History of a Cerebrovascular Accident 465 • Management of a Cerebrovascular Accident in the Dental Office 466

Allergic Reactions 467

Physiology of an Allergic Reaction 467 • Common Dental Allergens 468 • Medical History and Prevention of an Allergic Reaction 468 • Management of an Allergic Reaction in the Dental Office 468

Airway Obstruction 469

The Role of the Dental Assistant in Managing a Medical Emergency 469

Chapter Summary 470

Case Study 470 • Review Questions 471 • Critical Thinking 472 • Key Terms 473

SECTION IV Prevention and Nutrition

CHAPTER 16 Oral Health and Preventive Techniques 477

Introduction 477

Dental Disease 478

Soft and Hard Deposits 478

Preventive Dentistry 479

Patient Motivation 479 • Age Characteristics 479 • Home Care 479 • Fluoride 480 • Dental Sealants 480

Biofilm Control and Oral Self-Care 481

Manual Tooth Brushing 481

Brushing Tips for Best Results 481 • Toothbrush Methods That Cause Harm 482 • Toothbrush Care 482 • Methods for Manual Tooth Brushing 482 • Tongue Brushing 482

Dentifrices 482

Types of Dentifrice 482

Dental Floss 485

Types of Dental Floss 485 • Dental Flossing Technique 486

Oral Self-Care Assessments 488

Disclosing Agents 488 • Precautions When Applying Disclosing Agents 488 • Measure Patient's Oral Hygiene 488 • Biofilm Control Record 489

Oral Hygiene Aids 490

Biofilm Removal Aids 490 • Stimulators 493 • On-the-Go Aids 495 • Automated Oral Hygiene Devices 497

Fluoride 499

History of Fluoride in Dentistry 500 • Benefits of Fluoride 500 • Mechanism of Action: Systemic versus Topical Fluoride 500 • Patient Assessment 500 • Fluoridation 501 • Fluoride Toxicity 501 • Systemic Fluoride 501 • Topical Fluoride 502

Hygiene Care of Prosthetic Appliances 502

Full and Partial Dentures 502 • Fixed Bridges 503 • Implants 503 • Orthodontic Appliances 504

Challenges to Oral Self-Care 504

The Pregnant Patient 504 • The Infant Patient 504 • The Older Patient 505 • The Patient with Cancer 505 • The Patient with Heart Disease 505 • The Patient with Disabilities 505

Dental Public Health 507

Healthy People 2020 507 • Surgeon General's Report on Oral Health 507 • Government Financing of Dental Care 508 • Community Oral Health Prevention Programs 508

Chapter Summary 508

Case Study 509 • Review Questions 509 • Critical Thinking 510 • Key Terms 511

CHAPTER 17 Nutrition 515

Introduction 515 Health and Nutrition 515 Nutrition and Oral Health 516

> Nutrition and Oral Structures before Birth 516 • Nutrition during Growth and Development of the Mouth 516 • Nutrition for a Lifetime of Oral Health 516

Carbohydrates 517 • Proteins 518 • Fats 519 • Vitamíns 519 • Minerals 520 • Water 520

Food Groups and Healthy Eating 523

Vegetables Group 523 • Fruits Group 523 • Grains Group 524 • Dairy Group 524 • Protein Group 524 • Oils 524 • Balancing Energy 525 • Nutrition Labels 525

Disease Prevention and Health Promotion 526

Dietary Guidelines for Americans 526 • Reliable Sources of Nutritional Information 527 • Health Monitoring Devices 527 • Energy Drinks and Shots 527

Nutrition and Dental Disease 527

Dental Caries 528 • Periodontal Disease 529

Nutrition and Systemic Effects 530

Malnutrition 530 • Diabetes 530 • Phenylketonuria 531 • Protein Energy Malnutrition 531 • Cancer 531 • Immune System Disorders 531 • Osteoporosis 531 • Physical and Mental Conditions 532

Diet Management for Patients with Special Dental Needs 532

- Oral Surgery 532 Oral Trauma 532 Orthodontic Treatment 532 New Dentures 532
- Temporomandibular Joint Disorders 533
- Stomatitis 533

Religious and Cultural Diet Considerations 533

Eating Disorders 533

Chronic Dieting Syndrome 534 • Bulimia 534 • Anorexia Nervosa 534 • Female Athlete Triad Syndrome 535

Role of the Dental Assistant in Nutrition 535

Diet Assessment Tools 535 • Diet Counseling 536 Cariogenic Foods Counseling 536

Chapter Summary 537

Case Study 537 • Review Questions 538 • Critical Thinking 539 • Key Terms 539

SECTION V Assist with Diagnosis and Prevention

CHAPTER 18 The Dental Office 543

Introduction 543

Dental Office Design 543

Reception Area 544 • Business Office 544 • Treatment Room 546 • Sterilization Area 551 • Dental Office Laboratory 551 • Film Processing Area 547

- Radiography Room 548 Dentist's Private Office 548
 Staff Lounge 548 Patient Education Area 548
- Consultation Room/Area 548 Storage Area 549
- Laundry Room 550

Safety Rules in Operating Clinical Dental Equipment 550

Biohazard Safety 550 • Physical Safety 550 • Chemical Safety 551

Clinical Dental Equipment 551

Patient Dental Chair 551 • Dental Stools 554 • Dental Delivery Unit 554 • Dental Unit Equipment 556

• Computerized Equipment 561 • Dental Viewbox 563

Dental Cabinets 563

Routine Office Care 563

Opening and Closing the Dental Office 564

Receiving and Dismissing

Patients 564

Prepare the Treatment Area 564 • Prepare Tray Setup 567 • Prepare for Patient Seating 567 • Greet and Seat the Patient 567 • Dismiss the Patient 570

Patients Who May Need Seating Accommodations 574

Small Children 574 • Older Patients 575 • Pregnant Patients 575 • Patients with Sensory Disabilities 575

- Patients with Wheelchairs or Walkers 575
- Non-English-Speaking Patients 575

Chapter Summary 575

Case Study 576 • Review Questions 576 • Critical Thinking 577 • Key Terms 577

CHAPTER 19 Dental Instruments and Tray Systems 579

Introduction 579

Hand Instruments 580

Parts of Hand Instruments 580 • Identifying Hand Instruments 580

Categories of Hand Instruments 582

Examination Instruments 583 • Hand Cutting Instruments 587 • Restorative Instruments 590 • Accessory Instruments 595

Dental Handpieces 596

Handpiece Power Sources 596 • Handpiece Speed 597 Handpiece Designs 598
 Parts and Features of Dental Handpieces 599
 Emerging Handpiece Technologies 601

Dental Rotary Instruments 604

Parts of Rotary Instruments 604 • Burs 605 Abrasive Rotary Instruments 612

Tray Systems 618

Trays and Tubs 618 • Cassette System for Instruments 618 • Prepare for Tray Setup 619 • Color-Coding Systems 621

Chapter Summary 622

Case Study 622 • Review Questions 622 • Critical Thinking 623 • Key Terms 623

CHAPTER 20 Ergonomics and Instrument Transfer 628

Introduction 628

Work-Related Injuries in the Dental Office 628

Lower Back Pain 629 • Upper Back and Shoulders 629 Neck and Shoulders 629 • Wrist and Hands 629 • Stress 631

Ergonomics in Dentistry 632

Body Mechanics 633 • Dental Team Positioning 633 • Motion Economy 634 • Assistant as Operator 634

Instrument Transfer 636

Instrument Transfer Positions 636 • Work Area
Preparation 638 • Instrument Transfer Zones 638
• Instrument Grasps 638

Types of Instrument Transfers 639

Single-Handed Transfer 639 • Double Instrument Exchange 643 • Two-Handed Transfer 645 • Instrument Transfer Modifications 647 • Six-Handed Transfer 649

Developing Teamwork 649

Chapter Summary 650

Case Study 650 • Review Questions 650 • Critical Thinking 651 • Key Terms 652

CHAPTER 21 Moisture Control 654

Introduction 654

Moisture Control Techniques 655

Aspiration Techniques 655

Saliva Ejector . 655 • Oral Evacuator (HVE) 656 • HVE Grasps 656 • HVE Suctioning Guidelines 657 • Position of HVE 657 • Placement of HVE 657 • Rinse and Dry Mouth 661

Isolation Techniques 662

Cotton Rolls 663 • Dry Angles 663 • Cotton Pellet 664 • Isolite System 664 • Dental Dam 664

Alternative Methods in Placing the Dental Dam 683 Pharmacological Methods 684

Controlling Excess Salivation 684 • Controlling Excessive Bleeding 684

Chapter Summary 684

Case Study 685 • Review Questions 685 • Critical Thinking 686 • Key Terms 686

CHAPTER 22 New Patient Examination 689

Introduction 689

Types of Patient

Examinations 689

Limited/Emergency Oral Examination 689 • Comprehensive New Patient Examination 690

Components of the New Patient Examination 690

Patient Records 690 • Vital Signs 695 • Dental Radiographs 698 • Extraoral and Intraoral Soft Tissue Examination 698 • Examination of the Occlusion and Oral Habits 699 • Dental Charting 699
• Diagnosis 713 • Treatment Planning 718

• Financial Planning 718

Chapter Summary 718

Case Study 718 • Review Questions 719 • Critical Thinking 721 • Key Terms 721

CHAPTER 23 Anesthesia and Sedation 723

Pain Management 724

Local Anesthetics 724 • Topical Anesthetics 724 • Noninjectable Anesthesia 725

Dental Local Anesthetics 725

Color Coding of Local Anesthetic Cartridges 726

Injection Techniques 727

Supplemental Anesthetic Techniques 728

Local Anesthetic Reversal Agent 728

Computer Controlled Local Anesthesia 731

Complications of Local Anesthesia Administration 731

Prevention and Management of a Local Anesthesia Related Emergency 731

Armamentarium 733

Armamentarium for Topical and Local Anesthesia 733

Assembling the Anesthetic Syringe 736

Preparing the Aspirating Syringe 736 • Reloading the Aspirating Syringe 742

Charting Anesthetic Administration 742

Needlestick Safety 742

Postexposure Management 743 • Postexposure Prophylaxis 743

Sedation 743

Nitrous Oxide Inhalation Sedation 744

Chapter Summary 749

Case Study 749 • Review Questions 749 • Critical Thinking 751 • Key Terms 751

CHAPTER 24 Oral Prophylaxis and Recare Appointment 752

Introduction 752

Assessment 753

Hard and Soft Deposits 753 • Risk Assessment 754 • Measuring Periodontal Disease 754

Dental Hygiene Diagnosis 756

Planning 758

Implementation 760

Armamentarium 760 • Pain Control 765 • Oral Prophylaxis 769 • Home Care Instructions 773

Evaluation 773

Documentation 774

Chapter Summary 774

Case Study 774 • Review Questions 774 • Critical Thinking 776 • Key Terms 776

CHAPTER 25 Coronal Polishing and Topical Fluoride Application 778

Introduction 778

Coronal Polishing 779

Rationale for Coronal Polishing 779 • Contraindications and Modifications 779

Dental Stains 780

Intrinsic Stains 781 • Extrinsic Stains 781

Types of Coronal Polishing 782

Rubber Cup Polishing 782 • Air-Powder Polishing 790

Ergonomics During Coronal Polishing 793
Topical Fluoride Application 795

Fluoride Tray Application 795

Fluoride Varnish Application 799 Silver Diamine Fluoride 801

Chapter Summary 802

Case Study 802 • Review Questions 803 • Critical Thinking 804 • Key Terms 804

CHAPTER 26 Dental Sealants 806

Introduction 806

Indications for Dental Sealants 806

Contraindications for Dental Sealants 807

Types of Sealant Materials 807

Resin-Based Sealants 807 • Glass Ionomer Sealants 811

• Enameloplasty Sealant Technique 815 Cause of Sealant Failures 815

Chapter Summary 816

Case Study 817 • Review Questions 817 • Critical Thinking 818 • Key Terms 818

SECTION VI Dental Radiography

CHAPTER 27 Introduction to Dental Radiography, Radiographic Equipment, and Radiation Safety 821

Introduction 822

The History of Radiology 822

Radiation Physics 822

Electromagnetic Energy $\;\;823\; \bullet$ The Structure of an Atom and Ionization $\;\;823\;$

Producing X-Rays 824

Components of the Dental X-Ray Unit 825 • Radiation Production 828

Radiation Types 831

Primary Radiation 831 • Secondary Radiation 831 • Scatter Radiation 831 • Leakage Radiation 831

Taking Quality Radiographs 831

Contrast 831 • Density 831

Shadow Casting 831

Principle 1 832 • Principle 2 832 • Principle 3 832 • Principle 4 833 • Principle 5 833 • Distance and the Inverse Square Rule 833

Safety and Precautions 833

Manufacturer's Responsibilities 833 • Dentist's Responsibilities 834 • Dental Assistant's Responsibilities 834 • Patient's Responsibilities 835

Radiation Units of Measurement 835

Biological Effects of Radiation 835

Somatic and Genetic Effects of Radiation 835

Occupational Exposure 836

Intraoral Dental Film 837

Composition of Dental Film 837 • Dental Film Speed 837 • Dental Film Sizes 838 • Dental Film Packet 839 • Dental Film Storage 839

Traditional Extraoral Film and Duplicating Film 840

Chapter Summary 840

Case Study 840 • Review Questions 841 • Critical Thinking 842 • Key Terms 842

CHAPTER 28 Dental Radiology Infection Control, Exposure, Processing and Evaluation of Dental Radiographs, and Mounting of Dental Radiographs 843

Introduction 844

Infection Control in Dental Radiographic

Procedures 844

Barrier versus Disinfection versus Sterilization 844

Techniques for Exposing Intraoral Radiographs 851

Paralleling Technique 851 • Adult Full Mouth Survey of Radiographs 857 • Bisecting Technique 858 • Bisection of Angle Procedure 872 • Comparison of BAT and Paralleling Technique 877

Critique of Radiographs 877

Common Technique Errors 877 • Errors during Exposure 879

Occlusal Techniques 880

Localization Techniques 883

Right Angle Technique 883 • Tube Shift Technique (SLOB rule) 883

Modified Exposure Techniques 883

Edentulous Patients 883 • Tori 884 • Pediatric Patients 884 • Patients with a Gag Reflex 890 • Endodontic Exposures 890 • Special Needs Patients/Compromised Patients 890

Radiography Record Keeping 892

Processing Dental Film 892

Developing Process 892 • Fixing Process 893

Processing Techniques 893

Automatic Processing 893 • Handling Processing Solutions 896 • Comparison of Processing Techniques 896

Common Film Processing Errors 896

Film with Light Image 896 • Film with Dark Image 896 • Fogged Film 897 • Partial Image 897 • Spotted Films 897 • Torn or Scratched Film 898 • Air Bubbles on the Film 898 • Reticulation 898 • Streaks 899

Film Mounts and Film Mounting 899

Mounting Views 899 • Viewing of Mounted Radiographs 900

Duplicating Radiographs 902

Chapter Summary 904

Case Study 904 • Review Questions 904 • Critical Thinking 906 • Key Terms 906

CHAPTER 29 Extraoral Radiography, Digital Radiography, and Radiographic Interpretation 907

Introduction 907

Extraoral Radiographs 908

Panoramic Radiography 908 • Other Extraoral Images 912

Digital Radiography in the Dental Office 923

The Fundamental Concepts of Digital Radiography 923
• Types of Digital Imaging 924 • Advantages and Disadvantages of Digital Radiography 926 • Three-Dimensional Imaging in Dentistry 929

Hand-held Intraoral Radiography 932

Radiographic Interpretation: Normal Anatomy 932

Radiographic Interpretation: Radiographic Pathologies 935

Dental Caries 935 • Pulpal and Periapical Lesions 942 • Radiopaque Lesions 943 • Resorption 944

Periodontal Pathologies Radiographic Interpretation of Periodontal Disease 944

Radiographic Dental Anomalies 945

Radiographic Appearance of Dental Materials 945 Quality Assurance in Dental Radiology 945

X-Ray Machine Tests 945 • Radiographic Film Test 954 • Screen and Cassette Test 954 • Viewbox Test 955

• Darkroom Test 955 • Processing Equipment Test 956

Dental Radiographic Equipment Test 956

Laws Regulating Dental Radiography 956

Requirements of the Dental Assistant as the Radiographer 957

Responsibilities of the Dental Assistant 957

• Legal Documentation 958

Risk Management 958

HIPAA and Patient Privacy for Radiographs 958

Chapter Summary 958

Case Study 959 • Review Questions 959 • Critical Thinking 960

SECTION VII Assist with Restorative **Procedures and Dental Materials**

CHAPTER 30 Dental Emergency Procedures and Dental Cements 961

Introduction 961

Dental Emergencies 961

Soft Tissue Emergencies 961

Oral Trauma 962 • Oral Lesions 962 • Periodontal Tissue Injuries 963

Hard Tissue Emergencies 966

Hard Tissue Trauma 966 • Progression of Dental Caries 968 • Loose or Dislodged Restorations

Cavity Preparation 970

Dental Cements 972 Chapter Summary 985

> Case Study 986 • Review Questions 986 • Critical Thinking 987 • Key Terms 987

CHAPTER 31 Amalgam Procedures and Materials 991

Introduction 991

Properties of Dental Materials 991

Acidity 991 • Adhesion 992 • Biting Forces 992

• Corrosion 992 • Dimensional Change 992

• Elasticity 992 • Flow 993 • Galvanism 993

Hardness
Retention
993 • Microleakage
993 • Solubility
993
993 • Solubility
993

• Thermal Properties 993 • Viscosity 994

· Wettability 994

Regulations of Dental Materials 994

Preparation for Placement of Dental Amalgam 994

Bases, Liners, and Varnishes 995 • Amalgam Bonding 1000 • Treatment of Cavity Preparations 1001

Matrix Systems for Dental Amalgam 1002

Universal Matrix Retainer 1003 • AutoMatrix 1008 • Sectional Matrix Systems 1008 • T-band Matrices 1008

Dental Amalgam 1008

Composition 1009 • Types of Dental Amalgam 1010 • Forms of Dental Alloy 1010 • Mercury Used in Dental Amalgam 1010 • Amalgam Properties 1010

Amalgam Manipulation 1011

Amalgam Restoration 1014

Amalgam Restoration Postoperative Instructions 1014

Finishing and Polishing an Amalgam Restoration 1019

Finishing and Polishing Amalgam Controversy 1020

Indications for Finishing and Polishing 1020

Contraindications for Finishing and Polishing

• Differences between Finishing and Polishing 1020

Finishing and Polishing Procedure 1020

Case Study 1023 • Review Questions 1024 Critical Thinking 1025 • Key Terms 1025

CHAPTER 32 Composite Procedures and Materials 1028

Introduction 1028

Composite Restorative Materials 1028

Composition of Composites 1028 • Types of Composite Fillers 1029 • Properties of Composité Restorative Materials 1029

Preparation for Placement of Composite 1030

Treatment of Cavity Preparation for Composite Restoration 1030

Matrix Systems for Composites 1035

Matrix Strip 1035 • Crown Matrix Form 1035

Composite Restoration 1035

Composite Procedures 1038

Types of Direct Esthetic Dental Restorations 1043

Composites 1043 • Glass Ionomer Restorations 1044

Hybrid (or Resin-Modified) Glass Ionomers 1044

· Compomers 1044

Chapter Summary 1044 Case Study 1045 • Review Questions 1045 • Critical Thinking 1046 • Key Terms 1046

CHAPTER 33 Dental Laboratory Materials 1048

Introduction 1048

Hydrocolloid Impression Materials 1049

Alginate (Irreversible Hydrocolloid) Impression Material 1049 • Taking Alginate Impressions for Diagnostic Casts (Study Models) 1052 • Wax Bite Registration 1052 • Reversible Hydrocolloid Impression Material (Agar-Agar) 1057

Elastomeric Impression Materials 1059

Polysulfide 1060 • Polyether 1060 • Silicone (Polysiloxane and Polyvinyl Siloxanes) 1061

Gypsum Materials 1062

Plaster 1065 • Trimming and Finishing Diagnostic Casts 1065 • Articulating Casts or Study Models 1070

Dental Waxes 1074

Wax Groups 1078

Custom Trays 1079

Self-Curing Acrylic Tray Resin Custom Trays 1079 • Light-Cured Acrylic Tray Resin Custom Trays 1079 • Vacuum-Formed Custom Trays 1082 • Thermoplastic Tray Material Custom Trays 1083 • Constructing a Custom Tray 1083

Temporary (Provisional) Restorations 1086

Types of Temporary Restorations 1086

Chapter Summary 1099

Case Study 1099 • Review Questions 1099 • Critical Thinking 1100 • Key Terms 1100

SECTION VIII Assist with Comprehensive **Patient Care**

CHAPTER 34 Pediatric Dentistry 1103

Introduction 1103

The Pediatric Office 1104

The Concept of a Dental Home 1104 • The Pediatric Dental Team 1104 • The Pediatric Patient 1105 • The Pediatric Dental Assistant 1105 • Child Abuse and Dental Neglect 1106

Etiology of Dental Caries 1106

Early Childhood Caries 1106

Infant Oral Exam 1106

Pediatric Charting 1106 • Charting Present and Missing Teeth 1107 • Charting Pediatric Conditions and Abnormalities 1107

Prevention 1107

Oral Hygiene Instructions 1108 • Dietary Guidelines 1108 • Fluoride Application 1108 • Dental Sealants 1109 • Regular Checkups 1109

Behavior Management 1109

Communication 1109 • Pharmacological Behavior Management 1110 Conscious Sedation 1111

Pediatric Restorative Procedures 1111

Pediatric Instruments and Equipment 1111 • Anesthetic Syringe Pass 1113 • Dental Dam 1113 • Preventive Résin Restoration 1114 • Pediatric Crowns 1114 Anterior Esthetic Crowns 1117

Pediatric Pulp Treatment 1117

Pulpotomy Procedure 1117 • Pulpectomy Procedure 1117

Pediatric Orthodontic Treatment 1120

Preventive Orthodontic Treatment 1120 • Interceptive Orthodontics 1121

Pediatric Emergency Treatment 1122

Primary Teeth Traumatic Injury 1122 • Primary Teeth Displacement Trauma 1122 • Effects on Permanent Tooth 1123 • Fractured Anterior Primary or Permanent Teeth 1123 • Orofacial Soft Tissue Trauma 1123 • Prevention of Orofacial Injury 1124

Chapter Summary 1125

Case Study 1125 • Review Questions 1125 • Critical Thinking 1126 • Key Terms 1127

CHAPTER 35 Orthodontics 1130

Introduction 1130

Focus of Orthodontic Treatment 1130

The Orthodontic Team 1131

Orthodontist 1131 • Orthodontic Scheduling Coordinator 1131 • Orthodontic Treatment and Financial Coordinator 1131 • Orthodontic Records Coordinator 1132 • Orthodontic Chairside Assistants or Certified Orthodontic Assistant (COA) 1132 • Infection Control Coordinator 1132

Orthodontic New Patient Exam 1132

Patient Information 1132 • Medical and Dental History 1132 • Chief Complaint 1133 • Panoramic Evaluation 1133 • Facial Exam and Profile Assessment 1134 • TMJ and Functional Evaluation 1134 • Teeth and Gingiva 1134

Evaluation of Occlusion and Skeletal Patterns 1135

Anterior-Posterior Plane of Occlusion and Related Skeletal Patterns 1136 • Transverse Plane of Occlusion 1139 • Vertical Plane of Occlusion and Related Skeletal Patterns 1142 • Perimeter Plane 1143

New Patient Exam Summary 1147

Orthodontic Diagnostic Records and Analysis 1147

Clinical Photographs 1147 • Study Models or Digital Intraoral Scans of the Teeth and Analysis 1147

Cephalometric Radiographs and Analysis 1148

Panoramic Evaluation and Periapical Radiographs
Cone Beam/CAT Scan/3D Radiography
1148 Periodontal Exam 1149 • Supplemental Diagnostic Records 1150 • Mounted Diagnostic Study Models and a Diagnostic Setup or Digital Diagnostic Planning 1150

Process of Diagnosis and Treatment Planning 1150

The Problem List 1150 • Objectives of Treatment 1150 Potential Treatment 1151
 Treatment Options 1151

Orthodontic Treatment Consultation

Orthodontic Treatment of Young Children 1151

Observation and Counseling 1151 • Interceptive 1151 Phase I Early Treatment with Limited Braces, Growth Appliances, Éxpansion, and Extractions 1152

Orthodontic Treatment of Adolescents 1153

Observation and Counseling 1153 • Phase II Treatment (Comprehensive Orthodontic Treatment) of Adolescents Following Phase I 1154 • Comprehensive Orthodontic Treatment of Adolescents with Growth Appliances 1154 • Comprehensive Orthodontic Treatment of Adolescents Combined with Multidisciplinary Care 1155 • Clear Aligner Therapy for Adolescents 1157

Orthodontic Treatment of Adults 1157

Comprehensive Orthodontic Treatment Combined with Multidisciplinary Treatment 1157 • Comprehensive Orthodontic Treatment with Orthognathic Surgery 1157 Clear Aligner Therapy 1157

Orthodontic Retention 1158

Appointments for Comprehensive Orthodontic Treatment with Braces 1158

Orthodontic Separators 1159 • Fitting and Cementing Orthodontic Bands 1159 • Orthodontic Bonding of Brackets to the Teeth 1161 • Orthodontic Wires Used in the Five Phases of Orthodontic Treatment 1161

• Insertion of the First Orthodontic Wire 1163

• Orthodontic Retie Adjustment Appointment 1165

 Orthodontic Debanding/Debonding Appointment for Removal of the Braces 1166

Chapter Summary 1181

Case Study 1182 • Review Questions 1182 • Critical Thinking 1183 • Key Terms 1183

CHAPTER 36 Oral and Maxillofacial Surgery 1186

Introduction 1186

The Oral and Maxillofacial Surgery Team 1186

Oral and Maxillofacial Surgeon 1186 • Receptionist and Business Staff 1187 • Surgical Dental Assistant Nurse Anesthetist or Anesthesiologist 1187

Consultation Appointment 1187

Oral Surgery Settings 1188 • Informed Consent 1188 Preoperative Instructions 1189

Methods to Control Pain and Anxiety 1190 Local Anesthesia 1190 • Sedation 1190 • General Anesthesia 1190 • Nitrous Oxide 1190

Oral Surgery Procedures 1191

Surgical Asepsis 1191 • Routine Extractions 1191 • Multiple Extractions 1198 • Extraction of Impacted Teeth 1206 • Biopsy 1209 • Cleft Lip and Palate Surgery 1209 • Temporomandibular Joint Disorder 1209 • Orofacial Trauma Patients 1209 • Orthognathic Surgery 1210

Postoperative Procedures 1210

Suture Removal 1211 • Postoperative Complications 1212

Chapter Summary 1214 Case Study 1215 • Review Questions 1215 Critical Thinking 1216
 Key Terms 1216

CHAPTER 37 Endodontics 1218

Introduction 1218

Pulp Tissue Anatomy 1218

Progression of Pulpal Disease 1219

Reversible Pulpitis 1219 • Irreversible Pulpitis 1219 Asymptomatic Irreversible Pulpitis 1220 Necrotic Pulp 1220

Periapical (Periradicular) Involvement 1220

Apical Periodontitis 1220 • Periapical (Periradicular) Abscess 1220 • Periapical Granuloma 1221 • Periapical Neoplasm 1221 • Osteomyelitis 1221 • Cellulitis 1221

Pulpal Disease Diagnosis 1221

Medical and Dental History 1221 • Clinical Examination 1222 • Radiographic Survey 1222 • Diagnostic Tests 1222 • Treatment Plan 1225

Classification of Endodontic Treatment 1225

Nonsurgical Endodontic Procedures 1225 • Pulp Capping 1225 • Surgical Endodontic Procedures 1241

Chapter Summary 1243

Case Study 1243 • Review Questions 1243 • Critical Thinking 1245 • Key Terms 1245

CHAPTER 38 Periodontics 1249

Introduction 1249

Periodontal Disease 1250 • Causes of Periodontal Disease 1250 • Progression of Periodontal Disease 1251 Classifications of Periodontal Disease 1251

Periodontal Examination 1252

Medical and Dental History 1252 • Clinical Examination 1253 • Periodontal Examination 1253 Presentation of Treatment Plan 1257

Periodontal Instruments 1257

Instrument Sharpening 1257 • Periodontal Probes 1258 • Explorers 1258 • Curettes 1258 • Scalers

• Files 1259 • Ultrasonic Instruments 1259

• Air Polishing Systems 1260 • Periodontal Knives 1261 Interdental Knives 1261 • Periotomes 1261 • Surgical Scalpel 1261 • Electrosurgery 1261 • Pocket Marking Pliers 1261 • Periosteal Elevators 1261 • Periodontal Scissors, Rongeurs, and Forceps 1261 • Lasers 1261

Nonsurgical Periodontal Procedures 1264

Occlusal Adjustment 1264 • Root Planing 1265 Gingival Curettage 1266

Adjunctive Therapies 1266

Oral Irrigation 1266 • Systemic Antibiotic Therapy 1266 • Locally Applied Drug Delivery 1267 • Peridex® 1267 • Enzyme Suppression Therapy 1267 • Precautions/ Contraindications 1267

Healing 1267

Surgical Periodontal Procedures 1267

Preoperative Instructions 1268 • Gingivectomy 1268 Gingivoplasty 1268 • Periodontal Flap Surgery
Osseous Surgery 1269 • Bone Grafting 1269 Mucogingival Súrgery 1270 • Crown Lengthening

Procedure 1270

Periodontal Dressings and Sutures 1270

Types of Periodontal Dressings 1271 • Patient Healing 1271

Periodontal Maintenance 1272

The Role of the Dental Assistant 1273

Chapter Summary 1281

Case Study 1281 • Review Questions 1281 • Critical Thinking 1282 • Key Terms 1282

CHAPTER 39 Dental Implants 1283

Introduction 1283

Advantages of Dental Implants 1283

Disadvantages of Implants 1284

Dental Implant Success Rate 1284

Parts of an Implant 1285

Implant Body or Fixture 1285 • Abutment 1285 Healing Screw and Healing Cap 1285
 Dental Implant Connectors 1286

Considerations for Dental Implants 1286

Crown/Bridge 1286 • Contraindications for the Placement of Implants 1286 • Patient Selection for Implantation 1287

Patient Preparation 1288

Treatment Sequence 1288

Types of Implants 1290

Subperiosteal Implants 1290 • Endosteal Implant 1290 • Mini Dental Implants 1290 • Transosteal Implant 1292

Immediate Load Dental Implants 1292

Surgical Techniques for Implant Placement 1293

Single Surgery Technique 1293 • Two Surgery Technique 1293

Postoperative Care and Home Care Instructions 1293 Dental Implant Maintenance 1294

Implant Retained Prostheses 1298

Role of the Dental Assistant 1298

Implant Coordinator 1299 • Implant Supply Company Representative 1299

Chapter Summary 1300

Case Study 1300 • Review Questions 1300 • Critical Thinking 1302

CHAPTER 40 Fixed Prosthodontics 1303

Fixed Prosthodontics 1303

The Objectives of Fixed Prosthodontics 1304 • Types of Fixed Prosthodontics 1304

Patient Factors 1309

Preparation Appointment 1309

Occlusal Exam 1309 • Radiographs 1309 • Preliminary Impression and Study Casts 1310 • Selecting a Shade 1310 • Case Presentation 1311

First Treatment Appointment 1311

Anesthetic Application 1312 • Tooth Preparation 1312 • Final Impression and Bite Registration 1314 • Provisional Coverage 1315

Communicating with the Dental Laboratory 1316

Communication Tools 1316 • Digital Communication 1317

Second Treatment Appointment 1318

Removal of Provisional Restoration 1318 • Cementation of Final Restoration 1318

Concerns Regarding Fixed Dental Prosthesis 1328

Oral Hygiene 1328 • Structural Stresses on a Fixed Appliance 1329 • Dental Sensitivity Related to Fixed Dental Prosthesis 1329 • Xerostomia and Sjogren's Syndrome 1330 • Replacement of an Existing Fixed Dental Prosthesis 1330

Changing Trends 1330 Informed Consent 1330

Documentation of Fixed Prosthodontic

Treatment 1331

Charting Fixed Prosthodontics 1331 • Documenting Patient Instructions 1331

Chapter Summary 1333

Case Study 1333 • Review Questions 1333 • Critical Thinking 1335 • Key Terms 1336

CHAPTER 41 Computerized Impression and Restorative Systems 1337

Introduction 1337 CAD/CAM 1337

Digital Impression Systems 1339

Soft Tissue Management 1341

The Role of the Dental Assistant 1341

Patient Considerations 1341

Chapter Summary 1343

Case Study 1344 • Review Questions 1344 • Critical Thinking 1345 • Key Terms 1345

CHAPTER 42 Removable Prosthodontics 1346

Introduction 1346

Objectives of Removable Prosthodontic Treatment 1347

Types of Partial Dentures 1347

Transitional Partial Denture 1347 • Cast Partial 1347

Kennedy Classification of Edentulous Arches 1348

Types of Full Dentures 1349 Immediate Denture 1349 • Overdentures 1350

Removable Partial Dentures 1350

Components of a Removable Partial Denture 1350
• Indications and Contraindications for Removable
Partial Dentures 1353 • Advantages of Removable
Partial Dentures 1353 • Disadvantages of Removable
Partial Dentures 1354 • Appointments and Procedures
for a Removable Partial Denture 1354 • Role of the Dental
Assistant in Removable Partial Denture Procedures 1357

Full Dentures 1358

Surfaces of the Full Denture 1358 • Components of a Full Denture 1359 • Advantages 1360 • Disadvantages 1360 • Appointments and Procedures for Full Dentures 1361 • Role of the Dental Assistant in Full Denture Procedures 1363

Healthy Oral Environment 1363

Xerostomic Denture Wearers 1363 • Denture Sore Spots 1364 • Denture Adhesives 1364 • Denture Relining 1364 • Denture Rebasing 1365 • Denture Repair 1365 • Denture Cleaners 1365

Charting for Removable Prosthodontics 1366

Charting Abbreviations 1366

Chapter Summary 1379

Case Study 1380 • Review Questions 1380 • Critical Thinking 1381 • Key Terms 1381

CHAPTER 43 Cosmetic Dentistry and Teeth Whitening 1382

Introduction 1382

Cosmetic Dental Team 1382

Procedures in Cosmetic Dentistry 1383

Tooth Whitening 1383

How Teeth Are Whitened 1384 • Indications for Dental Whitening 1384 • Whitening Techniques 1384

Cosmetic Prosthodontics 1390

Fixed Prosthodontics 1390 • Removable Prosthodontics 1390

Occlusion in Cosmetic Dentistry 1391

Contouring Soft Tissues in Cosmetic Dentistry 1391

Soft Tissue Contouring 1391 • Surgical Lip Repositioning 1392 • Tissue Grafting 1393

Chapter Summary 1393

Case Study 1393 • Review Questions 1393 • Critical Thinking 1394

SECTION IX Dental Practice Management

CHAPTER 44 Dental Practice Management 1395

Introduction 1395

Welcome Letter 1396

Format 1396

Marketing a Dental Practice 1396

Online Marketing 1397

Reception Area 1399

Front Office Staff 1399

Telephone Technique 1400

Basic Telephone Techniques 1400 • Answering Calls 1400 • Placing Callers on Hold 1400 • Taking Messages 1401
Outgoing Calls 1401

English as a Second Language 1401

Communication Technology 1402

Answering Machine. 1402

Answering with Headphones 1403

Answering Services 1403 • Voicemail 1403

Fax Machines 1403 • Email 1404

Cell Phones 1404

U.S. Postal Service 1404

Patient Care Plan 1405

Presenting the Care Plan 1405

Appointment Scheduling 1405

Appointment Scheduling Guidelines 1405 • Elements in Appointment Scheduling 1407 • Scheduling of Dental Hygiene 1407 • Scheduling of New Patients 1407 • Scheduling of an Emergency 1408 • Scheduling Appointments for Children 1408 • Scheduling Multiple Appointments 1408 • Scheduling Appointments for

the Expanded-Function Practice 1408 • Appointment Card 1408 • Scheduling for Production 1408 • Confirmation of Appointments 1409 • Conditions Affecting Patient Scheduling 1409 • Call Lists 1410 Other Scheduling Concerns 1410

Recare Systems 1410

Computerized Recare System 1410 • Chronological Card File 1412 • Color-Tagged Card File 1412

Business Office Systems 1412

Word Processing 1412 • Graphics 1412 • Spreadsheets 1413 • Dental Office Software 1413 • Employee Records 1414 • Inventory Management 1414 • Ordering Supplies 1416 • Computer Safety 1417

Dental Records Management 1418

Equipment and Supplies for Record Management 1418 • Patient Chart Filing 1418 • Record Confidentiality 1419 • Archival Storage 1420 • Electronic Record Keeping 1420 • Paperless Dental Practice 1420

Managing Office Finances 1420

Patient Account Management 1420 • Accounts Receivable 1421 • Bank Deposits 1424 • Monthly Billing 1426 • Accounts Payable 1428

Dental Insurance 1431

What Is Dental Insurance? 1431 • Parties Involved in Insurance 1432 • Managing Insurance Benefits 1432 Insurance Fraud 1434

Dental Benefit Programs 1437

Indemnity Plans 1437 Capitation 1437 Alternative Benefits 1437 • Medicaid 1439

Staying Current 1440

Teledentistry 1440 • Connecting with the Office through Mobile Devices 1440 • Web Conferencing 1440 • Distance Learning 1440

Chapter Summary 1441

Case Study 1441 • Review Questions 1441 • Key Terms 1442

CHAPTER 45 Career Planning 1447

Introduction 1447

Know Your State Requirements 1448

A Job Search Plan 1448

Establishing Career Objectives 1448 • Creating a Portfolio 1448 • Employment Opportunities 1456 • Employment Search 1458 • Searching for the Right Position 1458

Arranging an Interview 1458

Job Application 1459 • Pre-Interview 1463

The Interview 1463

Research Dental Office 1463 • Visit Location 1463 • Develop Talking Points 1463 • Have Questions
Ready 1464 • Practice Interview 1464 • Interview
Dress 1466 • Follow Up Letter 1466 • Second
Interview 1466 • Accepting the Job 1467 • Turning
Down an Offer 1468

Job Orientation 1468

Keeping Your Job 1468

Attitude 1469 • Attendance 1469 • Appearance 1469 • Dependability 1470 • Patient Care 1470 • Competence 1470 • Team Player 1470 • Honesty and Respect 1471

Losing Your Job 1471

Being Placed on Probation 1471 • Saving Your Job 1471 • Leaving a Job 1472 • Being Fired 1472

Advancing in Your Job 1472

Professional Development 1472

Plethora of Learning Opportunities 1474

American Dental Assistants Association 1474 • DANB Professional Certification 1474 • DALE 1475

Professional Development Plan 1475

Continued Success 1475

Chapter Summary 1475

Case Study 1476 • Review Questions 1476 • Critical Thinking 1477

NEW TO THIS EDITION

General Updates

- Key Terms feature has been updated throughout the text to include phonetic pronunciation, the meaning of root and word parts, and the definition for each key term
- Dental operator steps were added to each step-by-step procedure, as applicable
- New images have been added throughout the text, including new step-by-step procedure photos, to enhance the topics discussed

Chapter 2

- Added/expanded discussion of:
 - Several health behavior theories in addition to Maslow's and how each can be utilized to improve the oral health of the patient
 - Characteristics of children, older adults, and Generation Alpha
 - Preparing dental presentations
- Expanded on the topic of written communication to include office letters and other forms of written communication, including electronic communication

Chapter 3

- Added/expanded discussion of:
 - Ethical principles
 - Ethical dilemmas
 - The differences between criminal law and tort law
 - Regulatory and nonregulatory agencies involved in dentistry
 - HIPAA responsibilities in various areas of dentistry, including technology
- Added image of a sample patient consent
- Added image of a sample acknowledgement of HIPAA policy
- Moved CDT codes to Chapter 44

Chapter 4

- Formerly Chapter 6
- Added/expanded discussion of:
 - Information on the cell and organization of the human body
 - The urinary system
 - -The brain
 - -The interrelationship between oral health and the various systems
- Added anatomical images including on the cell

Chapter 5

- Removed the section "Landmarks of the Face and Oral Cavity" and moved it to a new Chapter 6
- Added a new table that includes descriptions of all the cranial nerves

 Added several tables to provide concise information about nerves, arteries and veins, as well as their branches that supply the head and neck

Chapter 6

- This is a newly added chapter
- Added/expanded discussion of:
 - Regions of the face
 - Healthy and unhealthy gingiva

Chapter 7

- Reduced the Stages of Pregnancy topic/content
- Added histological images of tooth development
- Added several images to enhance the topics discussed in the chapter

Chapter 8

- Formerly Chapter 9
- Added/expanded discussion of:
 - Tooth landmarks from each aspect
 - Tooth characteristics and distinguishing features to assist in identifying teeth
 - Primary and permanent teeth
 - Universal Numbering System
- Added color images of tooth landmarks from each aspect

Chapter 9

- Moved chapter from Dental Specialties section to Dental Sciences section
- Added/expanded discussion of:
 - Tools available for oral cancer detection
 - Educating patients to perform an oral cancer screening on themselves
- Added tables that provide standard terms used to describe lesions
- Moved dental caries topic to this chapter and added detailed information in a table format regarding stages of decay
- Added step-by-step procedure for performing an intraoral and extraoral exam

- Added/expanded discussion of:
 - Covid-related infection control procedures
 - Different surfaces in the dental office, with new images
 - Sanitizing surfaces, with new images
 - The Bloodborne Pathogens Standard and Hazard Communication Standard
- Additional images added for procedure related to handwashing

- Added new step-by-step procedures for:
 - Alcohol-based hand hygiene
 - Surgical hand scrub
 - Donning surgical gloves
 - Operating an ultrasonic cleaner
 - Operating an autoclave
- Expanded procedure related to treating a contaminated tray, with new images

Chapter 14

- Added/expanded discussion of:
 - Importance of knowing about drugs and how drugs are tested
 - Drug names
 - Routes of administration
 - Administration, distribution, metabolism, and excretion
 - Substance use disorder, including preventing drug diversion, identifying the patient with a substance use disorder, and medications used to treat substance use disorders
 - Adverse drug reactions
 - Commonly used drugs administered in a dental office or prescribed by a dentist
 - 2007 American Heart Association (AHA) guidelines for prophylactic antibiotics
 - American Society of Anesthesiologists (ASA) Classification of Risk Assessment
- Added new figures to include expanded information related to common abbreviations
- Added new tables detailing conversions for prescriptions, potential teratogenic effects of drugs, dental local anesthetics available for use in the United States, comparisons of over-the-counter analgesic medications, and comparisons of prescription pain medications
- Removed content related to caffeine, herbal and alternative medications

Chapter 15

- Added/expanded discussion of:
 - The importance of the medical history in preventing a medical emergency
 - The importance of vital signs
 - The most recent AHA blood pressure classifications and dental management protocol
 - Identification and management of the apprehensive patient
 - Stress reduction protocol
 - American Society of Anesthesiologist (ASA) classification
 - Medical consultation
 - The emergency kit

- Each emergency that may occur in a dental office including prevention, management, medical history questions, predisposing factors, signs and symptoms, and ASA classifications
- Added new step-by-step procedures for:
 - Taking blood pressure
 - Obtaining pulse and respiration
- Added a sample medical history form
- Added a sample medical consultation
- Added tables that describe the drugs in the emergency kit along with images of drugs
- Categorized emergencies into syncope, respiratory disorders, adrenal disorders, thyroid disorders, diabetes, angina and MI, congestive heart failure, seizures, cerebrovascular accident, allergies, and airway obstruction
- Added several images to enhance the topics discussed in the chapter
- Moved discussion of dental emergencies to a separate chapter
- Removed CPR/BLS section

Chapter 23

- Added/expanded discussion of:
 - Noninjectable anesthetics
 - Complications related to local anesthesia
 - Postexposure management
- Added tables that provide coverage of:
 - Short, intermediate, and long-acting local anesthetics
 - Injection name, area anesthetized, needle insertion site, length and gauge of needle used, and depth of insertion
 - Prevention of dental local anesthetic related emergencies
 - Systemic adverse reactions of dental local anesthetics

Chapter 24

- This is a new Chapter highlighting preventative dental treatment
- Includes three new step-by-step procedures relating to preventative care: periodontal charting, oral prophylaxis, and scaling and root planning
- Formatted to focus on the ADHA standards for clinical dental hygiene practice

- Added/expanded discussion of:
 - Silver Diamine Fluoride
 - Ergonomics during preventative care
 - Air-powder polishing
 - Stain
- Added a step-by-step procedure on air-powder polishing

Chapter 27

- Added/expanded discussion of:
 - Direct and indirect damage by an x-ray photon, including images
 - Shadow casting and the principles of shadow casting
 - Inverse square law
 - Linear nonthreshold curve, including image
- Added description and table with images of types of interactions with radiation
- Added table with information related to radioresistant and radiosensitive cells
- Included use of term "image receptor" to be inclusive of films and digital sensors unless specifically referring to traditional film

Chapter 28

- Updated the title for this chapter
- Added/expanded discussion of:
 - Infection control as it specifically relates to dental radiology equipment, digital systems, image receptors, supplies and processing for traditional films
 - Infection control before, during, and after exposures
 - Standard exposure sequence for paralleling and bisecting techniques
 - Anatomical landmarks to be used for bisecting technique
 - Object localization using SLOB rule and the right angle technique
- Included use of term "image receptor" to be inclusive of films and digital sensors unless specifically referring to traditional film
- Moved digital imaging from Chapter 23 to this chapter
- Added table and diagrams that specify maxillary and mandibular entry points for primary beam when using the bisecting technique
- Added step-by-step procedure for bisecting the angle technique

Chapter 29

- Updated the title for this chapter
- Added/expanded discussion of:
 - The coronal, axial and sagittal views of 3D imaging
 - Radiographic appearance of decay, with images
 - Radiographic pulpal and periapical lesions, with images
 - Radiographic appearance of periodontal disease, with images
 - Radiographic appearance of dental anomalies, with images Radiographic appearance of dental materials, with images
- Added direct and indirect digital panoramic options to the panoramic exposure procedure

 Added tables that summarize radiopaque and radiolucent maxillary landmarks and radiopaque and radiolucent mandibular landmarks

Chapter 33

- Updated step-by-step procedures to include automix cartridges with extruder guns
- Due to the eradication of polysulfide impressions, this stepby-step procedure was updated with taking a polyether impression

Chapter 38

- Added/expanded discussion of:
 - -The classifications of periodontal disease based on the most recent American Academy of Periodontology guidelines
 - Periodontal risk assessment
 - Adjunctive periodontal therapies
 - Peridex®
- Added tables that cover:
 - The risk factors for periodontal disease
 - Glickman's classification of furcation involvement
 - Healthy gingiva and changes that take place related to periodontal disease
 - Locally applied antimicrobial agents

Chapter 39

- Added/expanded discussion of:
 - Indications and contraindications to dental implants
 - Patient selection for dental implants
 - The role of the implant coordinator

Chapter 40

- Added/expanded discussion of:
 - Clinical considerations for bridges
 - Shade selection
 - Digital communication
- Added table covering symbols and abbreviations used in fixed prosthodontics
- Added image of digital patient charting with fixed prosthodontic procedures

Chapter 41

 Added discussion on advantages and disadvantages of CAD/ CAM technology

- Added/expanded discussion of:
 - Transitional partial dentures as a type of partial denture
 - Nesbit partial denture as a type of partial denture
 - Kennedy classification for edentulous arches, with image

- Patient instructions for care of partial dentures
- Surfaces of a full denture
- Post palatal seal of a maxillary denture
- Xerostomia and impact on dentures
- Denture adhesives
- Denture sore spots
- Added image of an electronic patient charting record with removable procedures charted
- Added table covering abbreviations and symbols used in removable prosthodontics

- Reorganized the chapter content for a better learning experience
- Added/expanded discussion of:
 - Language barriers
 - Teledentistry visits
 - CDT codes

PREFACE

The world of health care changes rapidly. The twenty-first century presents health care professionals with more challenges than ever before—but with challenge comes opportunity. Job prospects for dental assistants have never been better. The Bureau of Labor Statistics expects employment in our field to grow faster than the average for all occupations through the year 2030. Population growth, an increase in the aging population, and greater retention of natural teeth will fuel demands for dental services. As the health care industry requires more services to be completed by dentists, the dental assistant will be more valuable and needed than ever before. Many states are passing legislation allowing for an expansion in the skills that dental assistants can provide—with additional training. Placing restorations, obtaining virtual impressions, and monitoring general sedation are a few examples. As a dental assistant, you'll be expected to take on an increasing number of clinical and administrative responsibilities to stay competitive. Now is the time to equip yourselves with the range of skills and competencies you'll need to excel in the field. Now is the time to maximize your potential, to expand your base of knowledge, and to dedicate yourself to becoming the multifaceted dental assistant required in the twenty-first century. This text and complete learning system, Dental Assisting: A Comprehensive Approach, sixth edition, will guide you as a dental assisting student on this journey. The result of years of research, writing, and testing, this system is designed to prepare you for the Dental Assisting National Board (DANB) certification examination, some state credentialing, and the workplace. It presents information in a unique manner, using a variety of formats that account for the diverse ways in which today's students learn. To receive the full value of Dental Assisting: A Comprehensive Approach, sixth edition, it is important to understand the structure of the text, chapters, MindTap, and accompanying workbook as well as other supplements, and how they are all integrated into a complete learning system. Together, these materials will make your dental assisting education comprehensive and meaningful, providing you with the skills, knowledge, principles, values, and understanding needed to excel in your chosen profession.

Why We Wrote This Book Three dental educators, Vaishali Singhal, Susan Kantz, and Melissa Damatta, are the lead authors who developed the sixth edition of this textbook. Additionally, the book includes a team of contributing authors that includes notable educators and practitioners with expertise and national involvement in all phases and levels of dental assisting. We developed this edition according to the Commission on Dental Accreditation (CODA) Standards for Dental Assisting as well as the American Dental Association (ADA) content areas. The expansive table of contents for this textbook addresses some of the problems we identified with other dental assisting textbooks currently on the market; for example, educators have complained, "we were still fervently shopping for supplemental texts and media to improve our programs; most available videos were outdated and expensive, and often did not match the text; the

chapters of the existing texts were extremely large and were often not in a sequence suitable for our programs; and as a result the texts inhibited the flexibility of instruction." Thus, the goal of this text is to provide all inclusive text and supporting materials for dental assisting program instructors—to provide a comprehensive educational program rather than simply a text. This comprehensive program is structured to provide built-in flexibility to support the individual academic freedom of faculty. The chapters are ordered to allow for performance-based sequencing of procedures arranged from basic to complex and from general to specialty practice.

The Learning System

The components of the learning system were developed with today's learner in mind. The authors and Cengage recognize that students learn in different ways—they read, write, listen, watch, interact, and practice. For this reason, we've created a variety of products learners can use to fully comprehend and retain what they are taught. An instructor's manual ties the components together, making classroom integration easy and fun.

The Text

This text delivers comprehensive coverage of dental assisting theory and practice, supported by full-color illustrations and photographs throughout with 169 step-by-step procedures in nine sections. Section I, Dentistry as a Profession, introduces learners to the profession and its history as well as communication and legal issues. Section II, Dental Sciences, covers the basics of general anatomy, head and neck anatomy, embryology, histology, tooth anatomy, and oral pathology, creating a foundation on which learners can move forward in skills training. Section III, Preclinical Dental Sciences, covers microbiology and infection control in dentistry, managing hazardous materials that may be found in a dental office, managing patients who are medically compromised or have special needs, preventing and managing common medical emergencies that may occur in a dental office, and pharmacology, all of which are critical elements to the profession. This textbook contains the latest and most up-to-date infection control protocol related to the recent COVID-19 pandemic. Section IV, Prevention and Nutrition, discusses general techniques to maintain health and wellness of the oral cavity and the dentition. Section V, Assist with Diagnosis and Prevention, introduces the learner to the dental office and equipment, chairside assisting, instruments, management of pain and anxiety, and preventive techniques in dentistry. This section also includes information on advanced functions such as coronal polish and dental sealants. Section VI, Dental Radiography, provides updated information on radiographic techniques and procedures, including the latest on digital and three-dimensional radiography. Section VII, Assist with Restorative Procedures and Dental Materials, introduces

xxix

the learner to commonly used dental materials, assisting in procedures related to amalgam, dental cements, and composite as well as the management of dental emergencies. Section VIII, Assist with Comprehensive Patient Care, introduces learners to the specialized areas of dentistry and the importance of comprehensive care, as well as advanced skills of retraction cord placement and tooth whitening. Section IX, Dental Practice Management, contains coverage of dental office management, dental computer software, dental insurance, employment portfolios, and legal and ethical considerations, which are important components for managing a dental practice properly. New features such as patient dialogues and professional encounters have been added to the sixth edition. The professional encounter feature provides real-life scenarios regarding communication with a patient, offering the learner professional experiences of those in the field. Each chapter includes the following pedagogical features as applicable:

- Specific instructional objectives
- New feature: Comprehensive approach to building medical and dental terminology using root words along with key terms
- Introduction
- Step-by-step procedures with icons indicating handwashing, gloves, masks, protective clothing and protective eyewear, basic setup, and expanded functions (see icons below)
- In-text icons identifying legal and safety areas (see icons below)
- Boxed information containing tips and summaries
- New feature: Special features in online Instructor Manual that include documentation, patient dialogue, and professional encounters
- Chapter summary
- Case studies
- Review questions, including critical thinking questions
- New feature: Most up-to-date infection control protocol related to the COVID-19 pandemic



MindTap

It's 1 A.M. There are 20 tabs open on your computer. You lost your flashcards for the test, and you're so tired you can't even read. It would be nice if someone came up with a more efficient way of studying. Luckily, someone did. With a single login for MindTap® for *Dental Assisting: A Comprehensive Approach*, sixth edition, you can connect with your instructor, organize coursework, and have access to a range of study tools, including the ebook and apps, all in one place!

- Manage your time and workload without the hassle of heavy books! The MindTap Reader keeps all your notes together, lets you print the material, and will even read text out loud.
- Want to know where you stand? Use the Progress app to track your performance in relation to other students.
- Engage with the material. Videos and animations help your understanding of key concepts while simulations and quizzing help you bridge the gap from learning to realworld application.
- The MindTap eReader takes the textbook experience to a whole new level with the ability to have the material read to you with Readspeaker, print the material and take it with you for on-the-go preparation, and take notes or highlights within the eReader, which feeds to the StudyHub App for easy study guide creation.
- The New MindTap Mobile App not only includes access to the e-book both online and offline, but keeps you connected to your instructor and your course with alerts and notifications. It also arms you with on-the-go study tools like flashcards and quizzing, helping you to manage your limited time efficiently.
- Flashcards are prepopulated to provide a jump-start on your course preparation and studying. You can also create your own customized cards as you move through the course material, with theability to go directly to definitions by clicking on colored key terms within the text.

Instructor Resources

Additional instructor resources for this product are available online. Instructor assets include an Instructor's Manual, Educator's Guide, PowerPoint® slides, and a test bank powered by Cognero®. Sign up or sign in at www.cengage.com to search for and access this product and its online resources.

Components available on the Instructor Resource Center include:

- A computerized test bank, with questions geared to text chapters and mapped to CODA accreditation standards; available for download in many different LMS options
- Instructor presentations on PowerPoint™ with talking points, designed to support and facilitate classroom instruction
- An electronic version of the *Instructor's Manual* so that notes and ideas can be customized
- o assisting materials to create a dynamic learning system

- A transition guide to help make a smooth transition from the fifth to the sixth edition
- Skill checklists to use for student evaluation.
- Resources guide containing books, articles, and useful links, sorted by chapter.

Student Workbook

The workbook, which corresponds to the text, contains chapter objectives and exercises in a variety of formats. Each workbook chapter was standardized to include a variety of activities such as matching, true/false, fill in the blank, multiple choice, certification review, critical thinking questions, and case studies to allow each student to learn the concepts in a manner that is best suited to their individual learning style. The questions are mapped to the objectives, providing a holistic exposure to the content of each chapter.

When you use all of these components together, you'll discover an innovative, comprehensive system of teaching and learning that prepares students for success in the twenty-first century.

About the Authors

Vaishali Singhal is an associate professor at Rutgers University's School of Health Professions (SHP) and Rutgers School of Dental Medicine (RSDM) in Newark, New Jersey. Teaching at the university since 2001, she currently serves as program director of the Bachelor of Sciences in Health Sciences Program as well as course director for Practice Management and Ethics and Jurisprudence at the RSDM. At the faculty practice of RSDM, Dr. Singhal specializes in treating patients with serious mental illness. In 2019 she completed her doctoral thesis at SHP, evaluating ways to improve the oral health of patients with serious mental illness. She completed a Master of Science in Health Sciences at Rutgers University in 2011 and received her DMD from the RSDM in 1993. Her PhD and MS programs included specialized courses in education, which is Dr. Singhal's passion.

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INTRODUCTION

Language of Dentistry

Specific Instructional Objectives

At the completion of this section, you will be able to meet these objectives:

- 1. Defend the importance of being fluent in dental/medical terminology.
- 2. Analyze the structure of the dental terms.
- 3. Define dental terms.
- 4. Pronounce dental terms.
- 5. Apply rules in making words plural.
- 6. Recognize acronyms, eponyms, and homonyms.
- 7. Use terms presented in this chapter.

Dental Terminology

If you were going to a foreign country, you would need to learn its language to be able to communicate. In dentistry, you may find the words to be as foreign as another country's language. If you looked at some of the terms and said, "This looks like Greek to me," you would be right! Many of the terms used in **dentistry** and medicine come from Greek and Latin. Before you can study dentistry, you need to learn the dental language.

Every occupation uses a special language that has its own unique slang and technical terms. Computer programmers, for example, speak of "bits" and "bytes" and "megs" and "gigs." For someone unfamiliar with computers, those professional terms seem arcane and meaningless. Similarly, for the person unfamiliar with dentistry, the terms used in dentistry can be cryptic.

Dental **terminology** is the professional language used in dentistry. Dentistry uses medical and dental terminology in describing anatomy, pathology, treatment, procedures, and many other important facts needed to communicate dental care. It is important for the dental assistant to learn the dental language to communicate with other dental professionals and to read and understand dental communications.

Dental assistants have many responsibilities that relate to the proper use of dental terminology. For example, patient records are legal documents, and the assistant must complete them using acceptable terminology. In addition, dentistry uses a very precise and scientific language that may be difficult for the patient to understand. The dental assistant needs to translate

these scientific and technical terms and procedures into terms the patient can comprehend. Accomplishing this requires mastery of dental terminology. In this chapter, you will be given the tools needed to build your dental vocabulary and converse as a dental professional.

Some dental terms may seem strange and impossible to understand at first, but learning them will be much easier if you remember a simple fact: There are no big words; all big words consist of several small words linked together. Much like working a jigsaw puzzle, you need to be able to understand the individual pieces and then put them together to form a complete picture. As with learning any language, it will take time to master. With dedicated effort and practice, you will find speaking and interpreting dental terminology enjoyable and a rewarding experience (Figure I-1).

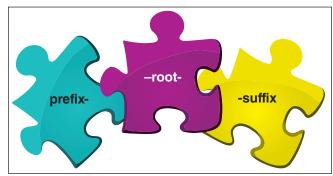


FIGURE I-1

Terminology is like pieces of a jigsaw puzzle fitting together.

Word Parts

Most words have three parts: a **root word**, a **suffix**, and a **prefix**. Some words might consist of only a root; others have several roots, or even several prefixes or suffixes. Learning how to identify roots, suffixes, and prefixes is the first step in mastering terminology in any field.

Root Words

The root is the main body or stem of the word; it is the foundation upon which all terminology is built. All words have a root word. For example, "term" is the root in the word terminology. The dictionary defines "term" as: "limit in time, place, set, or appointed period" and as "a word or group of words designating something, especially in a particular field." Many times you will find more than one definition and use of the term. Some common dental root words are dent, odont, gingiv, mandible, dens, oral, cavity, path, odyn, coron, radic, maxill, and alveoli. (Refer to Table I-1 for their meanings and Table I-2 for how they are pronounced.)

Compound Words A compound word is a word composed of two or more root words. For example, the word *toothbrush* is a compound word made from the words *tooth* and *brush*.

TABLE I-1 Meaning of Root Terms

Root Word	Meaning of Root Term
alveol	1. a little cavity, pit, or cell 2. any of the sockets in which the roots of the teeth are embedded; tooth socket 3. any of the tiny air sacs in the lungs
cavity	a hollow space within the body, an organ, a bone a hollow space or a pit in a tooth, most commonly produced by caries; a cavity may be artificially made to support dental restorations
coron	 a crown part of a tooth above the gum
dent	1. a tooth 2. toothlike part
gingiv	technical name for gum epithelial tissue attached to the bones of the jaw; surrounds and supports the bases of the teeth
maxill	1. upper jaw
mandibl	1. lower jaw
odont	1. tooth 2. having teeth
odyn	 pain painful
or	mouth opening, entrance
path	disease or condition a route, course, or track on which something moves
radic	part of a tooth within the tooth socket the rootlike beginning or appearance
stoma	surgery, an artificial opening anatomy, a mouth or mouthlike part

TABLE 1-2 Pronunciation of Root Words

Dental/Medical Term	Pronunciation of Root Term
alveol	(al- vee -ohl)
cavity	(kav-i-tee)
coron	(kuh- rohn)
dent	(dent)
gingiv	(jin- jahy -v)
maxill	(mak- sil)
mandibl	(man -d <i>uh</i> -b <i>uh</i> l)
odont	(oh- dohnt)
odyn	(oh- din)
or	(ohr)
path	(pahth)
radic	(rad-ik)
stoma	(stoh -m <i>uh</i>)

Affixes

A root word can take on different meanings by adding word attachments to it called **affixes**. Affixes can modify, describe, and change the meaning of root words. They can also give direction and tell what is happening or when it is happening. When a word part is affixed (added) to the end of the word, it is called a suffix. A word part affixed to the beginning of the word is called a prefix.

Combining Forms Sometimes when combining roots and affixes, the word parts have to change to make the term easier to read and pronounce. The new, changed form of the word is called a combining form.

No combining form is needed when combining two words parts in which the second word part begins with a vowel. For example, the word *gingivitis* (meaning inflammation of the gums) is formed by combining the root word *gingiv* (meaning gum) with the suffix *itis* (meaning inflammation). Since the second word part, *itis*, begins in a vowel, no combining form is needed.

When a word part that follows another word part begins with a consonant, you must add a **vowel** (a, e, i, o, u, and y) to make a **combining form**. For example, the word *thermometer* combines the prefix *therm* (meaning heat) with the root word, *meter*, which is an instrument used for measuring. To make the combining form, we add "o" to make "thermometer"—an instrument used to measure a patient's body heat; "o" is the most commonly used combining vowel.

Suffixes

Suffixes are attachments added to the end of the root word to modify, change, or add to the meaning to form another word. Although prefixes are added to the beginnings of words and suffixes are added to the end, we will discuss suffixes first because they show how a word is used in a sentence and what part of speech the word represents. In dental terminology, suffixes are

used to identify diseases, conditions, and diagnostic, operative, and surgical procedures. A dental term will have only one suffix.

Let's see how suffixes change the meaning of words by adding suffixes to the word defined previously: *term*. You learned that the word *term* has two meanings; limit in time, place, set, or period, and a word descriptive in a particular field. The combining form is *termin*. Here are some suffixes that can be attached: -al, -ate, -ology. The new words are the following:

- Terminal: an adjective meaning "leading to an ultimate end, or death." A terminal illness would be an illness that is ultimately fatal. Terminal can also be a noun that means "either end of a transportation line" such as a bus terminal.
- Terminate: a verb meaning "to dismiss from a job, to end, to come to an end of time, or to kill."
- Terminology: a noun meaning "the study of specialized words related to a particular subject."

When a suffix is written alone, it is usually preceded by a hyphen (for example, "-ed") indicating that a word part precedes it to form a complete word. Tables I-3 through Table I-6 define common suffixes indicating parts of speech. Table I-7 and

Table I-8 list some common suffixes used in dental diagnosis and treatment.

Prefixes

Prefixes are attachments added before the root word to make the meaning more precise. Most prefixes can be added to the root word without changing the form of the prefix or the root word. When a prefix is written alone, it is usually followed by a hyphen indicating that a word part is added after the prefix (pre-) to form a complete word. A dental term may have more than one prefix to describe it.

Prefixes Describing Diagnosis Anatomical structures, diseases, and conditions are examined for diagnostic findings. They are often described by color and comparison to what is normal. The most common colors used in dentistry are listed in Table I-9, and Table I-10 describes findings from diagnosis.

Prefixes Describing Location When describing anatomy, diseases, and conditions, the exact location must be recorded.

TABLE I-3 Suffixes Used to Form Nouns

	ì		1
-a = singular ending of noun	-acy = like, state, -cy or quality, pertaining to	-ine = belonging to	-ness = condition
-age = belonging to, related to	-dom = place or state of being	-ist = doer	-on = chemical substance
-ance = state or -ence quality of	-er = a person or thing	-ism = state, belief, condition	-or = a person or thing
-ase = names enzymes	-hood = state or condition of being	-ity = state, quality	-tion = act of -sion
-ation = act of	-ia = condition or quality	-ium = membrane -eum	-ure = action, result
-ax = anatomical structure ending	-ion = action state	-ment = state, act	-y = to form familiar names

TABLE 1-4 Suffixes Used to Form Adjectives

-able = capable of -ble being	-eal = pertaining to	-ible = capable of being	-oid = resembling, like
-ac, -al, -an, -ar, -ary, -eal, -ic, -ive, -tic = pertaining to; having quality of	-en = resembling, made of	-ic = pertaining to; -ical having quality of	-ous = like, full of -ious
-an = belonging to -ian	-ent = full of	-il = pertaining to, -ile capable of	-tic = pertaining to
-ant = full of	-eous = composed of	-ish = like	-y = characterized by
-ar = pertaining to; having quality of	-form = having the shape or form	-ive = having the nature of	
-ary = like, connected with	-ful = characterized	-less = without	

TABLE 1-5 Suffixes Used to Form Adverbs

-ably = capable of	-less = lacking	-ward = indication direction
-acious = full of -icious	-like = similar to	-wide = a given space
-fold = having so many parts	-ly = in a certain manner	-wise = direction, manner
-ily = in a certain manner	-most = quality, order	
-ive = tendency, inclination	-ular = relating to, resembling	

TABLE I-6 Suffixes Used to Form Verbs

-ate = process	-ify = to make, create	
-ed = past action	-ing = action of	
-en = to be, to become	-ise = to become, to agree with	
-fy = to make, cause to be	-ize = to affect, resemble	
-iate = to begin, process	-lyse = loose, dissolve, break into	

TABLE 1-7 Suffixes Used in Diagnosis

-algia = pain	-ology = study of	
-dynia = pain	-oma = tumor	
-edema = swelling	-opsy = view	
-gnosis = able to discern, come to know	-osis = abnormal condition	
-ia = condition	-path = disease	
-iasis = pathological condition	-phylaxis = watching, guarding	
-itis = inflammation	-rrhage = excessive bleeding, hemorrhage -rrhagia	

TABLE 1-8 Suffixes Used in Dental Procedures

-centesis = surgical fixation	-plasty = surgical repair
-ectomy = excision, surgical removal, cutting out	-rrhaphy = suture
-ive = function	-stomy = formation of an opening
-pexy = surgical fixation	-tomy = incision, cutting into

TABLE I-9 Prefixes Describing Color

alb-, albin- = white, referring to lack of pigment	erythr- = red
chlor- = green	leuk- = white
chrom- = color chromat-	melan- = black
cyan- = blue	xantho- = yellow

Common prefixes used to describe specific location, position, and direction are listed in Table I-11.

Prefixes Describing Amounts In describing anatomical structures, diseases, and conditions, the dental professional has to know and explain how many, how much, and what size. Prefixes can describe numbers, quantity, size, and degree of change. See how many of these prefixes you already know in Table I-12.

Strategy for Building Dental Vocabulary

After what you've just read, do you think you would be more or less likely to suffer from *hippopotomonstrosesquipedaliophobia*? You may be thinking, "What does that mean and how do you expect me to answer the question?" Remember, however, there are no big words, just combinations of several smaller word parts. This is the first place to start when determining the meaning of a word.

TABLE I-10 Prefixes Describing Findings

brady- = slow movement	gloss- = tongue (referring to condition)	onc- = tumor, mass swelling
cheil- = lips (referring to condition)	hemo- = blood	pharyn- = throat, windpipe
dia- = thorough, complete knowledge	labi- = lips (referring to location) lingual- = tongue (referring to location)	prog- = probable outcome, course
dys = bad, abnormal, impaired	lymph- = clear fluid that bathes and nourishes tissues of body; lymphatic system	sial- = saliva, salivary gland
eu- = normal	mal- = bad, wrongful, ill mis- = bad, wrong,	tachy- = rapid, accelerated

TABLE I-11 Prefixes Describing Location

ab- = away from abs-	ex- = beyond	post- after, behind
ad- = toward	infra- = beneath, below	pre- = before, in front of
ante- = before, forward anter- = front	inter- = between	proxim- = near, adjacent
dextr- = right side	intra- = within	sub- = under
de- = away from, ending	later- = toward the side	super- = above supra-
dist- = directed away from midline	mes- = middle med-	sy-, syl-, sym-, syn- sys- = together
en- = inside, within, inner end- ent-	peri- = around	trans- = across, through

TABLE I-12 Prefixes Describing Amounts

The fixes beschbing / who dries		
a- = without, not an-	iso- = equal, like	poly- = many, excessive
bi- = two	macro- = large, long, big	quad- = four quadr-
di- = two diplo- = double	meg- = great, large mega- megal-	semi- = half
hemi- = half	micro- = small	tetra- = four
homo- = same	mon- = one	tri- three
hyper- = above, beyond, excessive	multi- = many	uni - one
hypo- = under, deficient	non- = not, lack of	sext- = six

Break the Word into Its Parts

To break the word into its various word parts, first identify any affixes (prefixes and suffixes) as well as any combing vowels, remembering that the most common combining vowel is "o." For example, this word (hippopotomonstrosesquipedaliophobia) contains no prefixes and one suffix (-ia). It also has four combining vowels—three "o's" and one "i." From this information, we can identify five root words: hippopoto-, monstro-, sesqui-, pedalio-, and phob-, as well as the suffix -ia.

Define the Meaning of Each Word Part

Next define the meaning of each root word and affix. If you are not sure of the meaning, look it up in a dictionary:

monstro = monstrous; abnormal, hideous, or unnatural in size, frightful in appearance

sesqui = one and a half; half as much again; many syllables pedalio = relating to foot

phob = an intense, abnormal, or illogical fear of a specified thing;irrational fear of a specific object, activity, or situationthat leads to a compelling desire to avoid it

-ia = disease; pathological, abnormal condition or mental disorderTry to define the word.

Put the Parts Together

Now put the word parts together. Remember that the root word attached to the suffix is the stem upon which the word is built and is therefore the key to its meaning. In this case, the key to

this word is *phobia*, which means a mental disorder caused by an intense fear of something. The rest of the word parts tell what that something is.

You have the meaning of the word parts. Can you define it now?

Assemble the Meaning

The term will not make sense until you put together the meanings of each of the word parts that compose it. Generally, you start with the suffix and key root word, and then you return to the start of the word and define the meanings of the rest of the word parts in order. In this case, that would produce: A mental disorder, caused by irrational fear of something large and monstrous, with many syllables, a foot and a half long. Or, as the dictionary defines hippopotomonstrosesquipedaliophobia: a fear of long words (words a foot and a half long with many syllables).

Use Your Senses

Cognitive research has proven that the best way to learn is to involve as many senses as possible. A popular quote says, "We learn 10% of what we read, 20% of what we hear, 30% of what we see, 50% of what we see and hear, 70% of what we discuss with others, 80% of what we experience, and 95% of what we teach to someone." Try to involve as many senses as possible in learning a new term.

For example, try to make a mental picture of what the word means. Imagine a person's reaction to a phobia: shortness of breath, smothering sensations, pounding heart, shaking, sweating, and nausea. Studying models or diagrams of technical terms, or drawing pictures, can help you commit terminology to memory models or diagrams and you can draw a picture of it.

Saying new words aloud also will help you retain new information. Dictionaries list the phonetic spelling of every word before defining it and usually provide a guide to the less familiar symbols often used in phonetic spellings. There are also online "talking dictionaries" that will pronounce any word aloud for you.

Make It Meaningful

Whenever possible, find the item you are learning and handle it; nothing can substitute for hands-on learning. This kind of "effortful processing" leads to more stable learning. According to the Association for Psychological Science, we encode based on meaning—we remember what is meaningful to us.

Meaningful repetition is the key to long-term memory, so make reviewing terms a part of your daily studies. However, do not simply memorize words; interact with and use them actively. Start a log of vocabulary words and practice using dental language every day. Take advantage of your learning environment and offer to peer-tutor a classmate who is struggling to learn the information. Explain to your friends and family what you are learning. This is good practice for teaching your patients in

the dental office. Remember, we learn 95% of what we teach to someone. Think that might be why your teachers remember so much detail?

Pronunciation

When you look up a word in the dictionary to find its meaning, you will notice that the word's **pronunciation** is also provided. It is important to learn how to say the word correctly (pronounce) to understand and remember what you have read. Your memory improves with the more senses you use. By pronouncing the word, you use your ears and mouth to speak the word. It is also important to pronounce words correctly so other dental professionals will know what you are saying.

Pronunciation is defined as the act of producing sounds of speech within the reference of a standard of correctness or acceptability. There is supposedly a correct manner of pronouncing sounds in any given language. In medical/dental terminology, there is often more than one correct way to pronounce the term. The most accepted pronunciation is generally listed first in the dictionary. However, certain terms do have more than one acceptable pronunciation. This is often due to different parts of the country and even the world. But, there is only one proper spelling of a term. Any change or error in spelling can totally change the meaning of a word; it may have an entirely different meaning that may result in improper diagnosis or treatment.

In this chapter, you will study how to pronounce a word using the **phonetic** transcription of a word. Dental term pronunciations are spelled out within parentheses and are broken into phonetic syllables. A syllable is a basic unit of speech generally containing only one vowel sound. For example, the word base contains one **syllable** and basic contains two syllables. Phonetics is what the term sounds like by an accepted standard of the human speech sounds and stress patterns of a syllable. Each term is broken into "sounds-like" syllables. The word base is phonetically translated as "beys" written as one syllable. Basic is phonetically translated into two syllables "bey-sik." Notice that the syllables are separated by a dash and the first syllable is in bold font. The bold font is used to show stress patterns of the syllables.

Syllables in bold font receive the most stress (emphasis, spoken louder) than the other syllables. If another syllable has intermediate stress (slightly louder), quotation marks follow the syllable. Otherwise, all syllables are equally stressed. Can you pronounce pronunciation (pruh-nuhn'-see-**ey**-shuh n)? Just say it as it is spelled out.

In Table I-2, the root words defined now have the phonetic pronunciation. Practice saying these words.

Some combinations of letters are misleading in figuring out how to pronounce them. These combinations include *ps* (psych—only the s is pronounced); *pn* (pneum—only the n is pronounced); *gn* (gnath—only the n is pronounced); and *ph* (physio—ph sounds like f). Be aware of these misleading pronunciations as you study terms.

Plurals

There are several basic rules for creating the plural forms of words. Add *es* for nouns that end in *s*, *ch*, or *sh*. If the word ends in *y* and has a preceding consonant (such as allergy), change the *y* to *i* and add *es* (allergies). When looking up terms, the plural form is often provided. It will be indicated by the abbreviation *pl* before the plural form. To learn more about the rules for forming more plurals, study Table I-13.

Acronyms/Eponyms/Homonyms

Not all dental language consists of word parts. Some of the terms are composed of letters representing a phrase. Others may be named after a person or place. There are even words that are spelled differently, but sound the same. As a dental professional, you need to know how to interpret all forms of dental terminology.

Acronyms

An **acronym** is a word formed from the initial letter or groups of letters or words in a set phrase or series. In the technology and health industry, there is always some new acronym. In making an acronym, the industry tries to choose a catchy, pronounceable series of letters and make a name out of it. Some of the more common acronyms that are related to dentistry are listed in Table I-14.

Eponyms

Eponyms are terms used in medicine and dentistry that are named after people, places, or things. Because of the nature of medicine, new discoveries are often attached to the people who made the discovery. The names of drugs, diseases, and treatments are named after scientists and doctors who discovered or invented them. Sometimes the name is derived from

TABLE I-13 Rules of Making Plurals

Singular Ending	Plural Ending	Examples
a	ae	gingiva, <i>pl</i> gingivae
ax	aces	thorax, pl thoraces
ex	ices	apex, <i>pl</i> apices
itis	ides	pulpitis, <i>pl</i> pulpitides
ix	ices	cervix, <i>pl</i> cervices
ma	s or mata	stoma, <i>pl</i> stomas stoma, <i>pl</i> stomata
nx	nges	pharynx, <i>pl</i> pharnges
oma	S	odontoma, <i>pl</i> odontomas
on	a	protozoon, <i>pl</i> protozoa
sis	oses	diagnosis, <i>pl</i> diagnoses
um	a	bacterium, <i>pl</i> bacteria
us	i	alveolus, <i>pl</i> alveoli
у	ies	biopsy, <i>pl</i> biopsies

the proper name of a real or mythical person or place. Since eponyms are named after proper names, the term needs to be capitalized.

It usually involves a lot of research and publishing an article in a respected medical journal to have a medical eponym awarded. Down's syndrome is an eponym for the English physician, John Down, who described the syndrome. Down's syndrome is a genetic condition that is characterized by the presence of an extra copy of genetic material on the twenty-first chromosome. The syndrome may have some impairment of cognitive ability and physical growth and specific facial characteristics.

On occasion, an eponymous disease is named after a famous patient. Lou Gehrig's disease was named after Lou Gehrig, who was an American Major League Baseball player nicknamed "The Iron Horse" for his durability. Many eponymic diseases also have a more descriptive name. Lou Gehrig's disease is also called ALS (amyotrophic lateral sclerosis). ALS is a progressive neurodegenerative disease that affects nerve cells in the brain and the spinal cord. This disease's progressive degeneration of the motor neurons eventually leads to paralysis and to the patient's death.

Legionnaires' disease was given the name when an outbreak of pneumonia occurred among people attending an American Legion convention. Some famous medical signs and drugs are eponyms. The sounds heard when checking blood pressure called the Korotkoff sounds were discovered by Nikolai Korotkov, a cardiologist. Charles Mantoux, physician, is the developer of the eponymous serological test for tuberculosis, known as the Mantoux test.

TABLE I-14 Acronyms

Acronym	Translation
ADA	American Dental Association
ADAA	American Dental Assistants Association
ADHA	American Dental Hygiene Association
ALARA	As Low As Reasonably Achievable
CDA	Certified Dental Assistant
CDC	Centers for Disease Control
CODA	Commission on Dental Accreditation
DANB	Dental Assisting National Board
DDS DMD	Doctor of Dental Surgery Doctor of Dental Medicine
BA BS MS MA	Bachelor of Arts Bachelor of Science Master of Science Master of Arts
OSHA	Occupational Safety and Health Administration
PPE	Personal Protection Equipment
RDA EFDA	Registered Dental Assistant Expanded Function Dental Assistant
RDH LDH	Registered Dental Hygienist Licensed Dental Hygienist

Many human anatomical parts are named after people. One of the founders of the science of human anatomy, Bartolomeo Eustachi, gained the reputation of having created the science of human anatomy because of the number of anatomical structures he discovered and wrote about. One of such structures, named after him, is the eustachian tube. The Achilles tendon was named after the Greek mythological character, Achilles.

Homonyms

Homonyms are words that sound the same, but the spelling is different and so is the meaning. These words can cause confusion in understanding the spoken word. Care should be taken to check the spelling and meaning of such words to prevent making this mistake. Some of the more common homonyms are listed in Table I-15.

Word Usage Reflects on the Dentist

Patient records are legal documents and can be the dentist's best defense in court if an incident results in litigation. All office records must be completed in detail using acceptable terminology and proper grammar.

Following is an example of an assistant's documentation of a patient's reaction after anesthetic. See if you can identify where the assistant had problems with homonyms.

The patient had sweet poring down her forehead. When asked if she had ever experienced this before, she said she felt she had a blood sugar problem and ate a very rich, sweat desert before coming for her appointment. The dentist told her she should follow up with her physician and eat well balanced meals especially on daze of her appointment. Unprofessional patient records can be the offense's best evidence.

Have you ever heard that a person's grammar reflects a person's level of education? Mastering dental terminology mirrors the assistant's knowledge of dentistry and reflects on the dentist.

TABLE I-15 Homonyms

Homonyms	Definitions
auxiliary	a person that helps
axillary	near the armpit
bite	a mouthful
byte	8 bits
die	exact replication of a structure; used as pattern to make dental appliance
die dye	cease to live
elicit	to draw
illicit	unlawful
esthetics	concept of beauty; also spelled aesthetics
aesthesia	ability to feel
facial	relating to the face
fascial	a band of tissue supporting internal parts of the body
heal	to cure of disease
heel	hind part of foot
know	to be fully aware of meaning and implications
no	denial or refusal
oral .	pertaining to the mouth
aural	pertaining to the ear
aural	pertaining to an aura; sensation preceding a migraine or epileptic attack two different meanings for same spelling
pain	it hurts
pane	a single panel of glass
palpation	examine by touch
palpitation	abnormally rapid and violent beating of the heart
plural	more than one
pleural	related to lung
pore	minute opening
pore	to read or study carefully
pour	to cause flow of liquid
poor	to have little or no money
right	what is good, proper, and just
right write	side opposite location of the heart form letters with pen, pencil, etc
rite	formal act or ceremony
site	location
cite	to refer
sight	vision
suture	line of junction of two bones
suture	joining edges of open by stitches
week	a period of successive days
weak	not strong

Key Terms: Definitions and Pronunciation

Each chapter will end with a Key Terms feature. New terms introduced in the chapter appear in the first (far-left) column of the Key Terms table. Below each term is the phonetic spelling to help with the pronunciation. The middle column breaks the term into word parts along with the definition of each part. The last column lists the dictionary definition of the term. The terms in the Key

Terms chart appear in blue font within each chapter. Key Terms features and charts help you learn the meanings of the terms in each chapter before you start reading, so you can more easily build your dental and medical terminology.

It will be helpful to learn a few word parts at a time and recognize them when you see them in a term. It is much better to understand the meaning of the word parts and learn how to build words than to try to memorize, look up, or skip over every new word you encounter.

Review Questions

Multiple Choice

- 1. What word part is the foundation and main meaning of the word?
 - a. prefix
 - b. root
 - c. suffix
 - d. combining vowel
- 2. What word part is sub in the word submandibular?
 - a. prefix
 - b. root
 - c. suffix
 - d. combining vowel
- 3. What word part is *ular* in the word *submandibular*?
 - a. prefix
 - b. root
 - c. suffix
 - d. combining vowel
- **4.** Which dental term means "below the lower jaw"?
 - a. alveolectomy
 - b. gingivitis
 - c. submandibular
 - d. supramaxilla
- 5. Which dental term means "inflammation of the gums"?
 - a. alveolectomy
 - b. gingivitis
 - c. periodontitis
 - d. supramaxilla

- A ______ is the basic unit of speech generally having only one vowel sound.
 - a. pronunciation
 - b. phonetic
 - c. syllable
 - d. simple term
- **7.** What is the descriptive word for "sounds like" that is used to help the reader say the word correctly?
 - a. pronunciation
 - b. phonetic
 - c. syllable
 - d. simple term
- 8. Which is the plural for prognosis?
 - a. prognosex
 - b. prognosises
 - c. prognoses
 - d. prognosisies
- 9. Which is the plural for maxilla?
 - a. maxillas
 - b. maxillamata
 - c. maxillae
 - d. maxillaces
- **10.** For what is the following sentence an example?

The dental auxiliary was requested to take the patient's axillary. The patient told the dentist about their heart palpitations during the palpation examination.

- a. acronym
- b. eponym
- c. homonym
- d. compound

Critical Thinking

- 1. Why does the assistant need to know terminology when talking to the patient?
- 2. How will lack of knowledge of dental terminology affect the assistant's ability to communicate?
- 3. Place a slash (/) between the word parts for the following terms. Which term has a combining vowel?
 - a. periodontal
- c. alveolectomy

b. gingivitis

- d. supramaxillary
- **4.** Why is it important to say a word correctly?
- **5.** Referring to the sentence below, what is the acronym and what is the eponym? A patient was diagnosed with Vincent's disease, which is also referred to as ANUG.