

# Start Permission Protocol

## Considerations

Giving a student permission to begin a procedure is very much like giving a member of your own staff permission to work under your direct supervision unless the case is then transferred to another instructor. When you give your permission by swiping your ID card, this means that you accept the responsibility for the student's treatment of that patient during that session.

## Start protocol

### TO BE COMPLETED BY THE STUDENT

1. The student should review the patient's health history, update it if necessary, and record the patient's vitals (BP and Pulse). If the BP reading is SBP  $\geq 160$  OR DBP  $\geq 100$  mm Hg, please refer to the High Blood Pressure Protocol document (See attachment).
2. The student would review all the consents and make sure they have been updated.
3. The student must open Mipacs and make sure the radiographs are up to date.
4. The student should inform the instructor of the planned procedure.

### TO BE COMPLETED BY THE FACULTY

1. The instructor should enter the operatory when the patient is seated, the operatory is prepared and the health history is updated.
2. The student should introduce the patient to the instructor. "Doctor, this is Mrs. Smith" then the instructor should introduce him or herself to the patient. "Good morning, my name is Dr. Jones, I am here to supervise "student's name" during today's visit. Do you have any questions or concerns that I can answer for you?"
3. The instructor should scan the room. Is the student prepared?
  - a. Are all surfaces properly wrapped?
  - b. Does the student have the correct equipment and materials for the procedure they plan to do?
  - c. Are the student and patient wearing appropriate protective equipment? This includes safety glasses for the patient and eye protection for the student.
4. The instructor should re-review the patient's health history with the student. It is the responsibility of the instructor in that operatory during that session to be sure that the medical history is up to date (not more than 6 months old), approved, signed by the patient, and when necessary, the medical consult tab is filled out and approved (not more than a year old). Finally, confirm that there are no contraindications for treatment. For example, does the patient require antibiotic premedication, have uncontrolled hypertension, etc. If the BP reading is SBP  $\geq 160$  OR DBP  $\geq 100$  mm Hg, please refer to the High Blood Pressure Protocol document (refer to protocol).
5. Review the planned procedure code (review the "In Progress" tab) to make sure is the correct one, and that the code has not expired. Make sure the procedure has been correctly phased. If you are not sure, ask the practice coordinator. If needed, the student should work with the practice coordinator to either rephase the procedure or determine which procedure should be done at that appointment. Every patient must have a periodic, transfer, or comprehensive exam at least every 6 months.

- a. If the patient is overdue for an exam, ask the practice coordinator if the procedure should continue.
  - b. Radiographs – the student should have MiPacs up and running before you enter the operatory.
  - c. Are the radiographs recent enough per ADA guidelines and of acceptable quality?
  - d. Is there a radiograph that demonstrates the need for the procedure?
6. Check for a signed General Informed Consent form under this student's name that is within 1 year old.
7. Examine the patient.
  - a. Evaluate that the procedure is reasonable (does not need to be the best procedure, only reasonable) for that patient at that time.
  - b. Be certain that the patient knows the procedure that will be done on that day.
  - c. Confirm that the student's and patient's names are correct in axiUm.
8. Swipe your card to allow the student to begin with the procedure. The box on the bottom left of the screen with the student's name in it should turn green.