# **DUBLIN DENTAL HOSPITAL**

# in association with Diagnostic Imaging, UCD School of Medicine and Medical Science





# **Certificate in Dental Radiography**

# APPLICATION PROCESS AND COURSE OUTLINE

2024

#### **APPLICATION PROCESS**

#### **CLOSING DATE**

The closing date for receipt of completed applications (online application and supporting documentation) is 4pm on Friday 29th September 2023.

Late submissions will not be accepted.

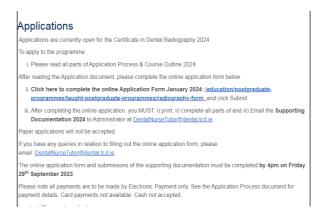
#### **ACCEPTANCES**

Applications are accepted based on i) entry criteria, ii) payment of non-refundable application fee and iii) date of receipt of **complete application**.

#### **APPLICATION FORM**

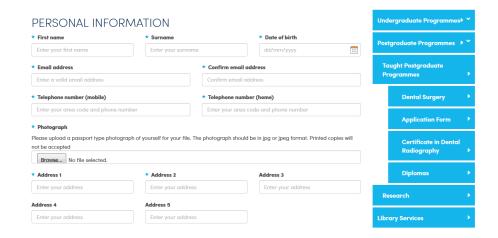
The online Application form for the dental radiography programme must be completed **and** all the required supporting documentation are to be sent by email to: DentalNurseTutor@dental.tcd.ie.

To access the online application form, please go to <a href="https://www.dentalhospital.ie/education/postgraduate-programmes/taught-postgraduate-programmes/certificate-in-dental-radiography">https://www.dentalhospital.ie/education/postgraduate-programmes/taught-postgraduate-programmes/certificate-in-dental-radiography</a> and scroll down to and click on 'Application Form January 2024'



You will be taken to the following page, where you will find information about the programme, and the application form, which needs to be completed online.

# Certificate in Dental Radiography Application Form



After completing the online application form, you MUST i) print, ii) complete <u>all</u> parts of and iii) <u>email</u> the completed document: **Supporting documentation 2024** to <u>DentalNurseTutor@dental.tcd.ie.</u>

Paper applications will not be accepted.

The online application form & the completed supporting documents must be submitted by 4pm on Friday 29<sup>th</sup> September 2023

# To ensure that your application is completed in full:

 i) Complete all parts of the online application form (available on the dental hospital website – please ensure to click Submit). Paper applications will not be accepted.

#### And

ii) Ensure <u>all</u> of the following requirements in the **Checklist Application Items** below are completed and sent by email as pdf/scanned document(s) to <u>DentalNurseTutor@dental.tcd.ie</u>

# <u>Checklist of Application Items</u> to be sent to DentalNurseTutor@dental.tcd.ie:

- Payment of €40.00 non-refundable application fee, paid by Electronic Transfer to Dublin Dental University Hospital (see page 8), with proof of payment (screenshot).
- **2. Original Laboratory Blood Test Results** to show the following *three* blood test results (see page 7 below for details to give to your GP):
  - a) Proof of non-infection with Hepatitis B. Must be dated within 6 months
  - b) Proof of non-infection with Hepatitis C. Must be dated within 6 months
  - c) Proof of Hepatitis B immunity (Titre level). The result must be greater than 10mlU/mL.

- 3. Copy of dental nursing/hygiene qualification
- 4. Copy of proof of current registration with the Dental Council for period up to 31<sup>st</sup> August 2024. If waiting for registration certificate send proof of renewal/new registration from 1<sup>st</sup> September 2023 (receipts of online payment will be accepted until submission of copy of new registration certificate for 1<sup>st</sup> September 2023 onwards) and a copy of the previous Dental Council registration certificate.
- 5. Copy of the all pages of the current license of radiography equipment in your dental surgery (and associated conditions if applicable). Access to all the radiography equipment listed in the application form is required to complete the programme. Should the applicant change employer/dental practice, this may affect the applicant's ability to successfully complete the programme.
- **6. Signed and completed Practitioner Declaration of Support** (see Supporting Documentation).

Do not send photographs of/or multiple pages of the completed supporting documents. <u>PDF documents only</u> will be accepted.

If the non-refundable Application Fee (€40) is not paid, the application is not considered for viewing or processing.

If there are any of the items listed above in the Checklist, missing from the application, it will be deemed incomplete and not eligible to be considered for an offer of a place on the programme.

**Important:** Please note application for this course does NOT guarantee an offer for a place on the course.

When sending emails to **<u>DentalNurseTutor@dental.tcd.ie</u>** please ensure to add these details to the email:

- i. in subject line, a reference to the course: Dental Radiography 2024
- ii. a salutation.
- iii. your name and
- iv. the purpose of the email.

# **Course Outline**

## **Programme Overview**

The Certificate in Radiography is a programme designed for dental professionals currently working in dental surgeries in Ireland who hold a recognised (Dental Council of Ireland) dental nursing or dental hygiene qualification.

This programme is delivered online and supported by face-to-face teaching in your dental surgery and practical sessions in the dental hospital. A computer and internet connection is essential with high speed/broadband connection.

# **Programme Duration**

The programme is 6 months in duration.

## **Entry Requirements**

The following requirements are necessary for entry to the certificate programme:

- 1. Students must hold a recognised dental nursing or dental hygiene qualification that satisfies entry onto the Dental Council of Ireland's voluntary register for dental nurses or register for dental hygienists. Proof of (i) qualification and (ii) Dental Council registration are required.
- All students require ongoing support from their employing dental practitioner to supervise their practical training and fill in their record of experience throughout the programme. This support must be verified by signature of the supervising dentist.

# **Programme Award**

Registered candidates who have successfully completed:

- All required examinations and assessments of the programme,
- The record of clinical experience in the exposure of dental radiographs, verified by your employing practitioner to the satisfaction of the programme tutor,
- Attend all practical sessions as set out by the programme tutor

will be awarded a Certificate in Dental Radiography awarded by the Dublin Dental Hospital in association with Diagnostic Imaging, UCD School of Medicine and Medical Science.

#### **Course Structure**

The candidate must be employed throughout the duration of their study. Dentist support, supervision, access and exposure to specific radiography equipment, and Portfolio of Experience assessment are essential to complete the programme. If for any reason employment ceases, or employer changes, the student must inform their course tutor. A time period appropriate to the situation will be allowed to the student to resume employment.

# **Course delivery**

All academic sessions (lectures, demonstrations, and tutorials) will be delivered using a range of appropriate teaching methodologies.

All course materials will be available through the programme website (except the textbook, which is included when the course fee is paid). Computer and Broadband internet access are essential for undertaking this programme. Students must also have the internet browser: Google Chrome updated to the latest version on their computer as well as PowerPoint or a PowerPoint viewer.

The programme runs in January of each year.

Each student must have a valid email address.

Attendance at all workshops and/or face-to-face meetings are compulsory and no student will be granted permission to be exempted.

#### **Assessment**

The programme is assessed on a continuous basis using a combination of online formative assessments, completion of the necessary practical technique training session, a portfolio of experience and a final examination. Students are required to successfully complete online assessments every two weeks.

Students are required to complete a portfolio of experience, which is a record of their skills, knowledge and clinical experience gained in the workplace over the programme's duration, which must be submitted for assessment to the Dental Hospital. This record is completed under the supervision of the supervising dentist and any time may be requested by the course tutor for review at any time.

# **Programme Fee**

The programme fee is €1,150. This fee is inclusive of the core textbook.

#### **Practical Sessions**

Attendance at all practical sessions is mandatory.

Student are required to attend Practical sessions in the Dublin Dental University Hospital that may be held over four to five Saturdays during the programme.

Students may purchase their own XCP x-ray positioning kit (film holders) at cost of approx. €100.00 and may bring to all practical sessions and for use throughout the duration of the programme.

#### **Vaccinations**

In accordance with the current Dental Council of Ireland Guidelines, vaccination against the Hepatitis B virus (HBV) is strongly recommended for all clinical dental personnel. Vaccination is also advised against tuberculosis, poliomyelitis, diphtheria, and tetanus.

All candidates must provide the following <u>three blood test results</u> (a copy of the original Laboratory results) <u>at the time of application</u> (other blood test results are not required and are not to be submitted):

#### 1. Proof of non-infection with Hepatitis B.

This must be dated within six months of applying for the programme. Candidates should ask their GP to carry out the following tests: **HBsAg** and **HBcAb**. The result should be negative. (In the presence of positive HBsAg or positive HBcAb, a negative HBeAg and negative HBV-DNA viral load result will be required).

#### 2. Proof of non-infection with Hepatitis C.

This must be dated within six months of applying for the programme. Candidates should ask their GP to carry out the following tests: **Hepatitis C antibody test. The result should be negative.** (In the presence of a positive Hepatitis C antibody test result, a negative PCR test for hepatitis C RNA will be required).

#### 3. Proof of Hepatitis B immunity.

Candidates should ask their GP to carry out the following test: **anti-HBs.** The result should be greater than 10mlU/mL. (If the result is less than 10mlU/mL, please contact <a href="DentalNurseTutor@dental.tcd.ie">DentalNurseTutor@dental.tcd.ie</a> for further information).

Candidates should print and/or show the above requirements to their GP to ensure that **all three blood tests** are carried out. Failure to provide any of the above may result in the application being rejected.

A copy of the original Laboratory results is required; a GP surgery printout is not acceptable.

## Payment of fees by Electronic Transfer of Fees.

#### Please carefully read all of the following:

It's important that all parts of the payment process are completed correctly and in full.

#### For successful payment of fees and confirmation of fee received:

- 1. Use **bank transfer** details below for electronic payment of fee(s), via a bank account.
- 2. Complete the NDNTP **Payment Reference** (see below) in the bank narrative (Reference)
- **3.** Send a **Confirmation email with proof of payment** (screenshot) with a transaction or payment reference number to <a href="DentalNurseTutor@dental.tcd.ie">DentalNurseTutor@dental.tcd.ie</a>.

The following are the DDUH bank details for Electronic Transfer of Fees:

1. Payment by bank transfer

\*\*\*Important: Please note the DDUH bank details have recently been updated to a new (AIB) bank account due to the closure of Ulster Bank\*\*\*

The DDUH bank details for Electronic Transfer of Fees are:

**Account name:** Dublin Dental Hospital Board Receipts Account

Address: Grafton Street, Dublin 2

**Account number:** 46383290 **Sort code:** 93-12-33

BIC: AIBK IE 2D

**IBAN:** IE19AIBK93123346383290

#### 2. Payment Reference

Use: "RAD Applicant Surname, Applicant First Name" i.e. RAD Bloggs, Joe.

It is very important to add this Reference in order to identify the payment & to link it to the correct Radiography applicant.

# 3. Send Confirmation and Proof of payment (screenshot) by Email

When the transaction is complete, take a screenshot of the confirmation of payment to include:

- i) the amount paid,
- ii) the date of payment,
- iii) a transaction or payment reference number and
- iv) the name of the person / company who paid the fee.

Include in the confirmation email to DentalNurseTutor@dental.tcd.ie the following details

- i) a reference to the course: RAD 2024 Student First name, Student Surname"
- ii) a salutation
- iii) applicant's name and
- iv) the purpose of the email.

When a payment is made by a third party or on behalf of an applicant it is important that a confirmation email is sent to DentalNurseTutor@dental.tcd.ie with:

- i) "RAD Student Surname, Student First Name"
- ii) the name /company name is stated and the student's name.

#### Important:

It is imperative that applicants give <u>all</u> details as stated above (1-4) as part of their fees payments. This is in order for the payment to be easily identified and recorded correctly as receipted as part of the application.

Only payments with clear details on the bank narrative (payment reference) will be recognised as received within the deadlines advised.

Failure to provide this information at the point of payment could jeopardise the applicant's application and/or place in the programme.