



HIV and Oral Health Program Overview and Goals

▣ The New York State Department of Health Regional Resource Center (RRC) for Oral Health with the New York/New Jersey AIDS Education and Training Center in collaboration with Columbia University and its affiliates offer HIV education and training programs targeting dentists, dental hygienists and dental assistants.



▣ The dental education programs are available throughout New York and New Jersey and are designed to meet specific agency and individual needs. Training is available in a variety of formats, ranging from didactic presentations to standardized patients workshops, clinical training programs, clinical consultations and customized preceptorship.

▣ Educational programs are also available for dental study clubs, dental societies and community health centers throughout New York and New Jersey. We work directly with the organization to design and present programs tailored to practitioner needs. Length of the programs varies, generally ranging from a two-hour presentation to a multi-day training course.

▣ The overall goal of the program is to train dental practitioners to recognize early signs and symptoms of HIV infection and to manage all aspects of patients' oral health needs. This is accomplished by increasing practitioners' competence and comfort in providing quality care to patients with HIV disease.

Contact Information

The New York/New Jersey AIDS Education & Training Center
HIV and Oral Health Program

Howard Lavigne

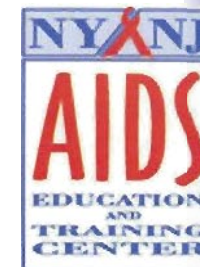
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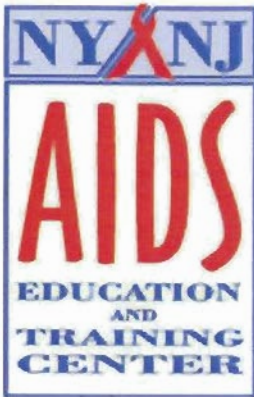
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**NY/NJ AETC
HIV Center**

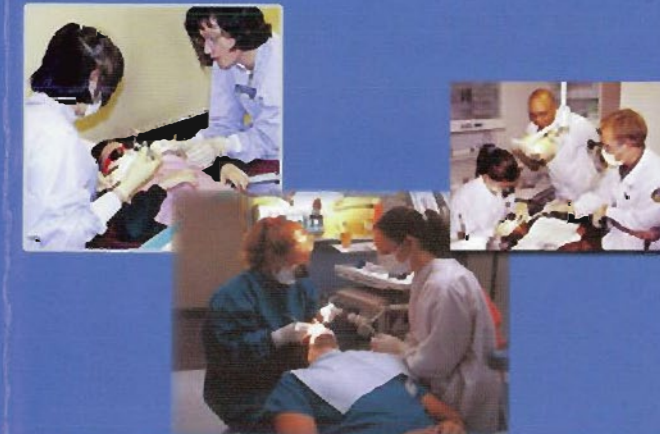
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New York, NY 10032



www.nynjaetc.org



**HIV Trainings
and
Preceptorships
for
Oral Health
Practitioners**



Objectives of Dental Clinical Training

NY/NJ AETC Oral Health programs assist dental practitioners in the development of these important skills for the care of patients with HIV disease:

- ▣ Conducting a medical history
- ▣ Discussing health maintenance with patients
- ▣ Recognizing and treating oral conditions associated with HIV infection
- ▣ Maintaining appropriate infection control policies
- ▣ Maintaining patient confidentiality
- ▣ Serving as a resource to other health practitioners



HIV and Oral Health Topics and Trainings

Programs include didactic presentations, interactive workshops, on-site consultations and clinical trainings. Topics include

- ▣ Medical Overview and Update on HIV Disease
- ▣ HIV Co-morbidities and the Impact on Oral Health Care Delivery
- ▣ Infection Control in the Dental Settings
- ▣ Oral Manifestations of HIV Disease
- ▣ Treatment Planning for the Patient with HIV Disease
- ▣ HIV Risk Assessment
- ▣ Legal Issues and HIV
- ▣ Other topics of interest...



Oral Health Preceptorship

Providers can attend full or multi-day programs at dental schools and hospitals where they will observe faculty provide direct oral health care services to patients in clinic settings. Management of specific cases is discussed in detail.

Continuing Education

The New York/New Jersey AETC provides continuing education credits for select courses. The NYSDF is approved to sponsor continuing education programs for Dentists through the American Dental Association and for Dental Hygienists through the Dental Hygiene Association of State of New York.

Cost

The majority of the training and educational materials are supported through a federal grant from the Health Resources and Services Administration. Modest fees may be charged to cover materials, food, parking and incidentals.

AIDS Education & Training Centers: A National Network

The New York/New Jersey AIDS Education and Training Center (AETC) is part of a larger nationwide network of AETCs, which collectively serve the entire United States and Puerto Rico, the Virgin Islands and the Pacific jurisdictions. The AIDS Education and Training Centers are funded by grants from the US Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau under the Ryan White CARE Act.

APPLICATION FORM

Please fax or mail this completed form along with a copy of your professional license to:

Name (first/last) _____

Specify discipline: Dentist _____ Dental Hygienist _____

Affiliation _____

Street Address _____

City/State _____ Zip _____

Daytime Phone () _____ Fax () _____

Email _____

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