REVISIONS TO ACCREDITATION STANDARDS FOR ADVANCED GENERAL DENTISTRY EDUCATION PROGRAMS IN ORAL MEDICINE

Deletions are indicated by ~~strikethrough~~; additions are indicated by underline

Standard 2 – Educational Program

2-10 Formal instruction in the biomedical sciences **must** enable graduates to:

a. Detect and diagnose patients with complex medical problems that affect various organ systems and/or the orofacial region according to symptoms and signs (subjective/objective findings) and appropriate diagnostic tests.

b. Employ suitable preventive and/or management strategies (e.g. pharmacotherapeutics) to resolve oral manifestations of medical conditions or orofacial problems.

~~c. identify patients with complex medical problems that affect various organ systems and impact the oral health of patients and the delivery of dental care;~~

~~b. detect and diagnose patients with chronic and medically-related orofacial diseases; according to physical findings, scientific principles and knowledge of current concepts of etiology, pathogenesis, and patient management;~~

~~c. utilize oral and other bodily fluids and tissues to detect and diagnose patients with chronic and medically-related orofacial diseases and disorders;~~

~~d. identify patients at risk for orofacial diseases associated with chronic and medically-related conditions and employ suitable preventive and/or interceptive treatment;~~

~~e. use pharmacotherapeutics and techniques appropriately to mitigate and resolve chronic and medically-related conditions of the orofacial region; and~~

c. critically evaluate the scientific literature, update their knowledge base and evaluate pertinent scientific, medical and technological issues as they arise.

Examples of evidence to demonstrate compliance may include:
Course outlines
Didactic Schedules
Student/Resident Evaluations

2-11 Formal instruction **must** be provided in each of the following:

a. anatomy, physiology, microbiology, immununology, biochemistry, neuroscience and pathology concepts used to assess patients with complex medical problems that affect various organ systems and/or the orofacial region

b. pathogenesis and epidemiology of orofacial diseases and disorders

c. concepts of molecular biology and molecular basis of genetics

d. aspects of internal medicine and pathology necessary to diagnose and treat orofacial diseases.

e. concepts of pharmacology including the mechanisms, interactions and effects of prescription and over-the-counter drugs in the treatment of general medical conditions and orofacial diseases.

f. principles of nutrition, especially as related to oral health and orofacial diseases

g. principles of research such as biostatistics, research methods, critical evaluation of clinical and basic science research and scientific writing

h. behavioral science, to include communication skills with patients, psychological and behavioral assessment methods, modification of behavior and behavioral therapies.

Example of Evidence to demonstrate compliance may include:
Course outlines
Didactic Schedules
Student/Resident Evaluations

~~a. developmental, gross, surgical, microscopic and ultrastructural anatomy and physiology of tissues of the oral cavity and related structures with special emphasis on the orofacial structures distinct from the teeth and the periodontium;~~

~~b. microbial ecology of the oral flora and the microbiologic aspects of orofacial diseases;~~

~~c. role of local and systemic infectious disease processes in oral disease, and the relationships between oral infections and systemic disease;~~

~~d. immunological processes in oral health and orofacial diseases;~~

~~e. pathogenesis, natural history and histopathology of orofacial diseases and disorders;~~

~~f. epidemiology of diseases and disorders of the mouth and jaws;~~

~~g. mechanisms of inflammation, especially as these relate to the biochemistry and molecular biology of orofacial structures distinct from the teeth and the periodontium;~~

~~h. concepts of molecular biology and the molecular basis of genetics with special emphasis on the relationship of these to the pathogenesis, research and treatment of chronic orofacial diseases and disorders;~~

~~i. aspects of medicine related to the etiology, pathogenesis, diagnosis and management of orofacial diseases and disorders;~~

~~j. aspects of medicine, internal medicine and pathology related to the etiology, pathogenesis, diagnosis and management of systemic diseases and disorders that can impact on the dental management of patients in outpatient and hospital settings;~~

~~k. concepts of pharmacology including the mechanisms, interactions and effects of prescription and over-the-counter drugs with special emphasis on antimicrobials, immunomodulating agents, antimetabolities, antineoplastics, and biological agents useful in the prevention, diagnosis and treatment of chronic and medically-related conditions, diseases and disorders of the orofacial region;~~

~~l. mechanisms, interactions and effects of therapeutic agents used in the management of systemic diseases that may influence oral health and the progression of diseases of the mouth and jaws with special emphasis on those orofacial disorders and diseases that are distinct from the teeth and the periodontium;~~

~~m. principles of nutrition, especially as they relate to patient evaluation, disease processes, health and healing of the orofacial structures with special emphasis on those distinct from the teeth and the periodontium;~~

~~n. principles of biostatistics, research design and research methods;~~

~~o. critical evaluation of clinical and basic research and scientific writing;~~

~~p. biomaterials, bone physiology, biochemistry, neuroscience and histology relevant to orofacial diseases and disorders;~~

~~q. behavioral science, to include communication skills with patients, psychological and behavioral assessment methods, modification of behavior, and behavioral therapies including relaxation training, biofeedback and stress reduction techniques; and~~

~~r. clinical and laboratory assessment of patients to include:~~

~~(1) physical diagnosis, oral diagnosis, oral medicine and oral pathology;~~

~~(2) laboratory medicine as it pertains to the analysis of bodily fluids, tissues and cells; and~~

~~(3) the scope of, and interface with appropriate medical specialties.~~

Clinical Sciences

2-12 The educational program **must** provide training to the level of proficiency for the student/resident to:

a. perform a comprehensive physical evaluation and medical risk assessment on patients ~~outpatients and inpatients~~ who have medically complex conditions and make recommendations for dental treatment plans and modifications;

b. select and provide appropriate diagnostic procedures including bodily fluid studies, cytology, culture and biopsy for outpatients and inpatients to support or rule out diagnoses of underlying diseases and disorders;

c. establish a differential diagnosis and formulate an appropriate working diagnosis, ~~and~~ prognosis, and management plan pertaining but not limited to:

(1) oral mucosal disorders,
(2) medically complex patients,
(3) salivary gland disorders,
(4) acute and chronic orofacial pain, and
(5) orofacial neurosensory disorders.

~~d. develop and implement a comprehensive plan of patient management taking into consideration the systemic health, stability and medical risk status of the patient, as well as current medical therapies and treatment contingencies pertaining to, but not limited to:~~

~~(1) oral mucosal disorders,~~
~~(2) medically complex patients,~~
~~(3) salivary gland disorders,~~
~~(4) acute and chronic orofacial pain, and~~
~~(5) orofacial neurosensory disorders.~~

~~e. be able to discuss the rationale for the indicated therapy;~~

d. ~~f.~~ critically evaluate the results and adverse effects of therapy;

e. ~~g.~~ ameliorate the adverse effects of prescription and over-the-counter products and medical and/or dental therapy;

f. ~~h.~~ communicate effectively with patients and health care professionals regarding the nature, rationale, advantages, disadvantages, risks and benefits of the recommended treatment;

~~i. communicate effectively with dental and other health care professionals to provide the optimum health benefits to the patient;~~

g. ~~j.~~ interpret and document the advice of health care professionals and integrate this information into patient treatment;

~~k. integrate current concepts of medical disciplines into oral medicine; and~~

h. ~~l.~~ organize, develop, implement and evaluate disease control and recall programs for patients.

Examples of Evidence to demonstrate compliance may include:
Proficiency statements organized by areas described above
Course outlines
Records of student/resident clinical activity

Patient records
Student/Resident evaluations

~~**2-16** The educational program **must** ensure that each student/resident maintains an ongoing record of the number and variety of their clinical experiences.~~

Standard 3 – Faculty and Staff

3-1 The program **must** be administered by an appointed ~~one full-time~~ director who is full-time faculty and who is board certified in oral medicine.

Examples of evidence to demonstrate compliance may include:
Program Director's Curriculum vitaé
Copy of board certification certificate
Letter from board attesting to current/active board certification

Standard 5 – Advanced Education Students

5-4 The program's student/resident evaluation system **must** assure that, through the director and faculty, each program:

a. periodically, but at least ~~three~~ two times annually, evaluates and documents the student's/resident's progress toward achieving the program's goals and objectives of student/resident training and competencies and proficiencies using appropriate written criteria and procedures;
b. provides students/residents with an assessment of their performance after each evaluation; and
c. maintains a personal record of evaluation for each student/resident which is accessible to the student/resident and available for review during site visits.

Intent: *The program should employ evaluation methods that measure a student's/ resident's skills or behavior at a given time. It is expected that the program will, in addition, evaluate the degree to which the student/resident is making progress toward achieving the specific goals and objectives of student/resident training or competencies and proficiencies described in response to Standards 2-10, 2-12 and 2-14. Where deficiencies are noted, corrective actions are taken. The final student/resident evaluation or final measurement of educational outcomes may count as one of the three annual evaluations.*

Examples of evidence to demonstrate compliance may include:
Evaluation criteria and process
Student/Resident evaluations
Personal record of evaluation for each student/resident
Evidence that corrective actions have been taken