

Council on Dental Practice

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The Council's 2022-23 liaisons are Dr. Susan B. Doroshow (Board of Trustees, Eighth District) and Mr. Aaron Buban (American Student Dental Association).

Areas of Responsibility as Set Forth in the *Bylaws or Governance and Organizational Manual of the American Dental Association*

As listed in Chapter VIII., K.5., of the *ADA Governance and Organizational Manual*, the areas of subject matter responsibility of the Council are:

- a. Dental Practice, including:
 - i. Dental practice management;
 - ii. Practice models and economics;
 - iii. Scope of practice;
 - iv. Impact of and compliance with regulatory mandates; and
 - v. Assessment of initiatives directed to the public and the profession;
- b. Allied Dental Personnel, including:
 - i. Utilization, management and employment practices; and
 - ii. Liaison relationships with organizations representing allied dental personnel;
- c. Dental Health and Wellness, including:
 - i. Dental professional well-being, wellness and ergonomics;
 - ii. Patient safety and wellness; and
 - iii. Liaison relationships with state well-being programs and related national organizations;
- d. Dental informatics and standards for electronic technologies; and
- e. Activities and resources directed to the success of the dental practice and the member.

*New Dentist member

Advancing ADA Strategic Goals and Objectives: Agency Programs, Projects, Results and Success Measures

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Dental Team Health, Wellness and Wellbeing

Success Measure: Increase awareness of access to mental health help by establishing a network of ambassadors across the nation by December 31, 2022.

Target: Identify and train ten individuals to serve as Health and Wellness Ambassadors to promote suicide prevention awareness and continue to provide peer support to the dental community by December 31, 2022. By March 31, 2023, each ambassador will conduct at least two outreach projects for a total of 20 events throughout the country addressing suicide prevention and mental health.

Range: Eight to 12 ambassadors trained by December 31, 2022. By March 31, 2023, each ambassador will conduct at least one to three outreach projects. By August 25, 2023, 70–90% of state leadership report being aware of available resources. The target measure is 80% of state leadership will report being aware of available ADA and/or state dental society wellness resources.

Outcome: Two resilience webinars were conducted on achieving resiliency as resources. As of this writing, several individuals have been identified to participate in the training events. A half-day Zoom meeting is planned in September 2022 for introducing ADA staff, resources available, time commitment, and expectations. A full-day training meeting will occur by December 31, 2022, for suicide prevention and wellness content. Ambassador project outcomes will be reported to the Dentist Wellness Advisory Committee (DWAC) annual meeting in March 2023. These ambassadors will participate in the 2023 ADA Dentist Health and Well-being Conference on August 25. This entire process intends to improve state dental association leadership awareness of suicide prevention resources to help dentists, students and dental team members. CDPP staff will partner with Client Services staff on the development and deployment of a pulse survey in 2023 to assess state leadership awareness with ADA and/or state dental society wellness resources. Dentists who volunteer for the first cohort of wellness ambassadors will have their awareness of wellness resources assessed before and after participating in the late 2022 training.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Opioid Stewardship

Success Measure: Position the ADA as a trusted collaborator for the dental profession and source of opioid content for proper prescribing by developing chair-side discussion guide and checklist and conducting educational sessions.

Target: At least 900 downloads combined of a chair-side discussion guide and checklist and at least 1,000 participants in three webinars to address the topic of opioid prescribing by December 31, 2022. The chair-side tools and webinars will be promoted in a full communications plan utilizing as many ADA channels as appropriate.

Range: 800-1,000 downloads of a chair-side discussion guide and checklist combined and 800-1,200 participants for live webinars by December 31, 2022.

Outcome: Members will have access to three webinars (live and on demand) and two downloadable companion provider/patient resources. The two downloadable chair-side tools may be found on ADA.org:

1. [Chair-side discussion guide](#)
2. [Chair-side pain management checklist](#)

- A new collaboration with the Drug Enforcement Agency (DEA) has resulted in three webinars (one of which will focus on opioids). ADA has provided feedback on the 2022 Centers for Disease Control and Prevention (CDC) *Clinical Practice Guideline for Prescribing Opioids*. CDC offered to assist with a webinar dedicated to screening patients for opioid misuse and the referral process once identified.
- The National Institutes of Health (NIH) National Institute on Drug Abuse (NIDAMED) has pending sponsorship of promotion efforts for the ADA “Patient-Dentist Acute Pain Management Checklist” and “Chairside Pain Management Discussion” by video or podcast. The dental team will further gain knowledge of communication techniques to reduce stigma and negative bias when discussing addiction, referencing NIH content, “Words Matter.”
- Opioid Misuse Prevention Webinars and Dentist-Patient Resources will meet the requirements of the Providers Clinical Support System (PCSS) grant program funded by the Substance Abuse and Mental Health Services Administration.

These collaborative efforts are in addition to activity that the council will engage in to promote content from the ADA’s new guideline for the pharmacological management of acute dental pain.

Objective 1: Increase membership market share of lagging demographics by 2% per year.

Initiative/Program: Dentist Career Transitions

Success Measure: Support dentists transitioning to various career paths modalities of practice by curating content on ADA.org and the ADA’s mobile app to guide dentists on selection of dental career options.

Target: Curate quality accurate relevant content in the [Careers section](#) and on the ADA mobile app by October 1, 2022.

Range: N/A - qualitative

Outcome: Dentists’ professional satisfaction is strongly influenced by their ability to find the best fitting practice environment at each phase of their career lifecycles. Resources must provide unbiased and up-to-date content that is inclusive to all practice modalities. Dentists also need resources for employment options outside of clinical treatment. As of this report, the career pathway webpage, is being updated and the app is being enhanced to reflect this new content.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: ADA Standards Program

Success Measure: Administrative simplification: Dental Data Exchange

Target: Implementation of ANSI/ADA 1084 with HL7 messaging by the Department of Defense’s readiness program for reservists and active duty personnel so that the data is interoperable and useable by multiple providers including medical systems by December 2021.

Range: N/A

Outcome: An HL7 Fast Healthcare Interoperability Resources (FHIR) implementation guide and a Consolidated-Clinical Document Architecture (C-CDA) guide for implementing Standard No. 1084’s data content were completed, balloted, and published by December 2021. These guides will form the

foundation for a HL7 Connectathon in September 2022 to demonstrate the implementation of these standards in vendor software. This will pave the way for implementation of these interoperability standards in dental and medical software allowing the exchange of standardized data.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: ADA Standards Program

Success Measure: Administrative simplification: Eligibility Verification

Target: Dentists and administrative staff use ADA Standard No. 1102 and Fast Healthcare Interoperability Resources (FHIR) through their dental vendor system to make informed decisions and meet the requirements of the patient's dental benefit plan by December 2022.

Range: N/A

Outcome: Major progress has been made in the development of ADA Standard No. 1102. The draft has been completed and is going through the review and approval process. Approval is expected by December 2022.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: ADA Standards Program

Success Measure: University Outreach Standards Program

Target: Raise awareness and implement campaign to promote availability of dental standards for dental university programs to improve utilization of standards as a teaching and practice tool by December 2022.

Range: N/A

Outcome: The University Outreach Standards Program has been established and standards are now available to dental school faculty, without cost. A communications program to inform dental school faculty and administration about the program has begun.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: ADA Standards Program

Success Measure: Portfolio of standards available by subject matter

Target: Create collections of standards and technical reports that address common topics, such as digital imaging and oral hygiene, to be sold as a group in the E-Catalog so the dental team can implement the information in their practice to facilitate interoperability, make informed purchases, and assure product quality by December 2022.

Range: N/A

Outcome: Four collections have been assembled and are now in the production phase for publication; a communications plan to inform members is in development.

Emerging Issues and Trends

Augmented Intelligence (AI)

The ADA Standards Program is currently developing an AI in Imaging whitepaper. The whitepaper will be distributed for public comment soon. This initial whitepaper will provide dental professionals with unbiased technical information on how to implement and understand the uses of AI for imaging in their daily practice and will lead to other reports dealing with the broader use of AI in dentistry.

Teledentistry

The Standards Committee on Dental Informatics (SCDI) Working Group 11.11 Teledentistry, is reviewing various aspects of teledentistry in detail. A final report is expected in first quarter 2023. This report is designed to provide an overview and a broader understanding of the technical use of teledentistry in practice. This initial overview report will lead to focused reports dealing with the details of specific technical areas of teledentistry.

COVID-19 Update

The ADA Emerging Issues Taskforce continues to respond to and engage in COVID-19 issues impacting dentistry. On February 25, the CDC released [COVID-19 Community Levels](#). ADA provided supporting [member content](#) on mask guidance and resources for the dental setting.

Proposed Family and Medical Leave Policy

The Council on Government Affairs (CGA) proposed a family and medical leave policy. CDP did not support the need for policy. CDP directed staff to research the federal and state legislation and provide this information to members to investigate best practices, obstacles, cost, and other issues regarding Paid Family Leave. In collaboration with the CGA, a website page is under development on ADA.org to assist States and members in their lobbying efforts.

ADA Standards Program

Twenty-eight new or revised standards and technical reports were approved in 2021, a record number. These standards address new or emerging issues of special interest. For products, the FDA recognizes and uses conformance with these standards as criteria to demonstrate safety and efficacy for clearance to market products in dentistry. In addition, informatics technical reports and standards lead the path to interoperable and secure exchange of data among dentists and between dental and medical providers. An example of a few is as follows:

- [ADA Technical Report No. 142, CAD/CAM Guided Surgical Devices and Maxillofacial Prosthetics](#)
- [ADA Technical Report No. 1088, Identification of Human Remains by Dental Means](#)
- [ADA Technical Report No. 1092, Implementation Guide to Utilization of Diagnostic Codes in Dental Records](#)
- ANSI/ADA Standard No. 201, Magnetic Attachments

Emerging Issues

Several new projects are in development that address emerging issues of special interest:

- Proposed SCDI White Paper for Potential Impacts on Clinical Practice of Augmented Intelligence Tools Used to Analyze Dental Images (See discussion above.)
- Proposed ISAE/ADA Standard for Eye Safety, Bottom Gap Protection. This will provide the dental team criteria to evaluate various eye protection products used clinically and in the laboratory.
- Proposed AAMI/ADA Standard for a Guide to Steam Sterilization in Outpatient Dental Settings. This standard will provide dentists with a streamlined document defining the steam sterilization criteria that are specific to the dental practice versus large hospital settings.
- Proposed ADA Technical Report for a Guide to Radio-Protective Barrier Devices for Patients. This report will provide information on the various radio-protective barrier devices enabling the dental team to make informed choices on their use in the dental environment.
- Proposed ADA Technical Report for Teledentistry (See discussion above.)

- Proposed ADA Technical Report for a Guide to Photobiomodulation in Oral Health Care. This report will provide informative guidance on the use of photobiomodulation in oral health care as well as the ability to make informed unbiased purchasing decisions.

Participation in Other Standards Organizations

National Fire Protection Agency (NFPA)

The Center for Informatics and Standards continues to maintain the ADA liaison to National Fire Protection Association. NFPA's purpose, specifically Healthcare Facilities code, is to establish criteria for levels of health care services or systems based on risk to the patients, staff, or visitors in health care facilities to minimize the hazards of fire, explosion, and electricity.

Association for the Advancement of Medical Instrumentation (AAMI)

The Center for Informatics and Standards continues to maintain the ADA liaison to the Association for the Advancement of Medical Instrumentation, an ANSI accredited standards developer that is the primary source of standards for the medical device industry. There are AAMI working groups that address sterilization of medical devices, and reprocessing instructions and validation methods of medical devices that are pertinent to dentistry.

American Society of Heating, Refrigeration and Air Conditioning Engineers (ASHRAE)

The Center for Informatics and Standards continues to maintain the ADA liaison to the American Society of Heating, Refrigeration, and Air Conditioning Engineers. ASHRAE is an ANSI-accredited standards developer in areas such as ventilation, indoor air quality and water treatment, and infection control and diseases, in healthcare and dental facilities.

Digital Imaging and Communications in Medicine (DICOM)

The Center for Informatics and Standards carries forward the ADA's support of the Digital Imaging and Communications in Medicine standards for the secure exchange of digital dental radiographs and images. DICOM is approved by the International Organization for Standardization (ISO) for use in practice management systems to transmit, store, retrieve, print, process, and display medical imaging information.

Health Level Seven International (HL7)

The ADA's ongoing partnership with HL7 has allowed for the creation of HL7 standards utilizing standard dental data content specifications named in ADA Standard No. 1079, Standard Content of Electronic Attachments for Dental Claims and ADA Standard No. 1084, Reference Core Data Set for Communication Among Dental and other Health Information Systems, which are expected to aid greatly in interoperability between dental information systems and other forms of health information exchange.

Responses to House of Delegates Resolutions

Resolution: 81H-2021—Elder Care Strategies for Continuing Education

81H-2021. Resolved, that in order to prepare the profession for the increased demographic shift to an older population, the appropriate ADA agencies should consider integrating the following elder care strategies on both the oral-systemic connection and the dental management of the medically complex older adult as priority projects, and be it further

Resolved, elevate the importance of both the oral-systemic connection and the dental management of the medically complex older adult, to both the dental and medical communities, as appropriate, by:

1. developing and delivering dental continuing education on both the oral-systemic connection and the dental management of the medically complex older adult through ADA online CE, ADA conferences and meetings, publications and programming as appropriate,

2. developing presentations on both the oral-systemic connection and the dental management of the medically complex older adult for use by member state or local dental societies, and to be shared with other Associations and other Health Care Professionals with an increased emphasis on the need for a more active collaboration and consultation between dental and medical providers when managing medically complex older adults, and
3. the development of continuing education for the delivery of preventive and quality of life dental care for institutional, long-term care and home-bound individuals to allow for greater access in their respective environments.

Dr. Mehran Mehrabi will lead a webinar on June 8, titled “Special Considerations of Pain Management and Opioid Use in Older Adults.” This webinar will be made available on ADA CE Online and on the PCSS [website](#) for dentists, administrative staff, physicians, social workers, students and educators, and interprofessional teams.

The National Elder Care Advisory Committee is scheduled to host the 2022 Elder Care Symposium, “From Policy to Chairside: Improving Oral Healthcare of the Aging Population,” on August 26 with both in-person and live-stream options. The Symposium’s target audience is dental professionals, dental team members, and other non-dentist healthcare clinicians. Attendees may earn six continuing education credits with a focus on the learning objectives that follow:

- Discuss and inform healthcare colleagues how the dental profession is preparing to treat the growing population of older adults.
- Identify the correlation between oral health and systemic disease.
- Describe how various issues create barriers to access to dental care for older Americans.

Presentations will include the following:

- “Aging Successfully: Preparing Dentists to Provide Oral Health for Prime of Life Patients” by Linda Niessen, D.M.D., M.P.H., M.P.P., keynote speaker.
- “Oral Health In America: Advances and Challenges for Older Adults” by Renee Joskow, D.D.S., M.P.H., F.A.G.D., from the National Institute of Dental and Craniofacial Research.
- “Oral Health – An Essential Element of Healthy Aging” by Stephen Shuman, D.D.S., M.S., F.G.S.A., chair of the Oral Health Workgroup, Gerontological Society of America; and “Using Quality Tactics to Advance Value-based Oral Healthcare” by Eric Walhstrom, MPH from Discern Health.
- Results from the *Oral Health Care Practice Patterns for Geriatric Patients: An American Dental Association Clinical Evaluators Panel Survey* by Satheesh Elangovan B.D.S., D.Sc, D.M.Sc Professor of Periodontics, University of Iowa College of Dentistry and Pharmacy, and Olivia Urquhart, MPH, ADA Science and Research Institute
- “The Role of Oral Medicine Practitioners in the Oral Healthcare Team” by Joel Napenas, D.D.S.
- “Delivery of Care in Non-Traditional Settings” panel by Richard Dest, D.D.S.; Michael Reed, D.D.S.; and Lyubov Slashcheva, D.D.S., M.S., F.A.B.S.C.D., D.A.B.D.P.H., F.I.C.D.
- “Treatment Planning, Interdisciplinary Communication, and Ethical Considerations” panel with Carlos Smith, D.D.S., M.Div.; Susan Hyde, D.D.S., M.P.H., Ph.D.; and Christie-Michelle Hogue, D.D.S, and Karen Raju, BDS, MPH, DPH-C Associate Specialist, Division of Oral Epidemiology and Dental Public Health, Department of Preventive and Restorative Dental Sciences, UCSF.

The Council will develop and deliver a post-symposium summary for members across the tripartite. With these activities and explanations, the directives from 81H-2021 have been satisfied or answered.

Resolution: 85H-2021—Addressing the Dental Team Workforce Shortage

85H-2021. Resolved, that the appropriate ADA agency distribute existing print and social media communications materials to state and local dental societies to use to promote and encourage middle and high school students to consider careers in dentistry, dental hygiene and dental assisting, and be it further

Resolved, that the appropriate ADA agency study the issue of dental hygienist and dental assistant employment tenure to determine variables that lead to attrition and high employee turnover, as well as variables that encourage long term employees. The research will be used to develop a toolkit that dentists can use to help increase the tenure of dental team members, and be it further

Resolved, that the appropriate ADA agency request ADEA to collaborate in conducting a study of accredited dental hygiene and assisting programs and formulate ideal enrollment recommendations by state and or region and make this information available to state and local dental societies, as well as dentistry, hygiene and assisting education administrators, and be it further

Resolved, that the appropriate ADA agency investigate financial incentives, such as possible tax abatements and grants, to motivate educational institutions to create, or expand existing, dental hygiene and dental assisting programs in order to expedite the resolution of the workforce issue.

Center for Dental Practice Policy (CDPP) staff and CDP members have developed and promoted two educational flyers (for example, [Choosing a Career in the Dental Profession](#)) and curated additional content, [Promoting Careers as a Dental Team Professional](#), to increase interest in allied dental careers. This was in addition to the already existing resource for [dental team careers](#).

CDPP staff compiled a comprehensive audit of all dental team resources currently available through ADA. With the support of the Council, *ADA News* launched a five-article series, titled “Focus on Workforce,” which recognized a nationwide dental team shortage and guided them to the refreshed web page, [Managing Dental Staff](#). Considerable effort was made to help dentists navigate challenges associated with dental team shortages by communicating to members the ADA resources available.

The American Dental Hygienists’ Association (ADHA), ADA Health Policy Institute (HPI), and the ADA Science and Research Institute (ADASRI) [published joint research](#) on the impact of the pandemic on the dental hygiene workforce in *The Journal of Dental Hygiene*. CDPP joined as a panelist to discuss the research during a [webinar](#) and two [podcast](#) episodes hosted by ADHA.

The Council provided HPI with survey questions to better understand dental hygienist and assistant employment patterns. HPI engaged multiple partners—including ADHA, American Dental Assistants Association, Dental Assisting National Board, and IgniteDA to conduct this research. The findings will be available prior to the 2022 ADA House of Delegates.

It is beyond the scope and expertise of ADA to formulate ideal enrollment recommendations by state and or region for accredited dental hygiene and assisting programs. The Commission on Dental Accreditation (CODA) sponsored the [2020-2021 Survey of Accredited Dental Assisting, Dental Hygiene, and Dental Laboratory Technology Education Programs](#), which was released in December 2021, and is expected to be updated by December 2022. CODA granted accreditation to four additional [dental hygiene programs](#) in February 2021, bringing the total number of accredited hygiene programs to 330 and Assisting programs to 239. The American Dental Education Association (ADEA) published a report, [Allied Dental 2020: An Analysis of the Results of the 2020 ADEA Survey of Allied Dental Program Directors in the United States](#), in 2021. According to the U.S. Bureau of Labor Statistics, the 2030 job growth outlook for both dental assistants and hygienists exceeds that of the national average across all occupations: [Occupational Outlook Handbook \(Dental Assistants, Dental Hygienists\)](#).

The ADA Council on Government Affairs (CGA) and Department of State Government Affairs (DSGA) are assisting states with securing additional funding for new educational programs, implementing changes in scope and duties for existing auxiliaries, and increasing opportunities for Expanded Functions Dental Assistants (EFDAs) or similar auxiliaries to further bolster the dental team. States focusing on non-dental therapy workforce initiatives are adopting a variety of methods, due to the vast differences in state practice acts. Staff from DSGA continue to lobby at the Federal level.

Additionally, the U.S. Department of Defense is providing funding to the Council of State Governments (CSG) to assist in the development of new model interstate compacts for occupational licensure portability. With support from the ADA and many dental communities of interest, the Department of Defense selected the professions of dentistry and dental hygiene to receive technical assistance from CSG.

With these activities and explanations, the directives from 85H-2021 have been satisfied or answered.

Resolution: 95H-2021—Prioritizing the Mental Health of Dentists

95H-2021. Resolved, that the appropriate agency of the ADA, in conjunction with mental health consultants, analyze the availability of resources to support the mental health of dentists, and collect information regarding existing health and wellness programs from across the tripartite and other professional organizations including, but not limited to the American Medical Association, the American Student Dental Association, and the New Dentist Committee and be it further

Resolved, that the ADA then use the collected information to:

- Explore partnering with third-party mental health providers for our membership;
- Analyze the existing well-being conference for potential enhancement;
- Create a toolkit to help prevent dentist suicide, including a guide for responding to a suicide or unexpected death; and recommendations for practice coverage for short-term and long-term absences due to mental illness and permanent absence due to suicide or unexpected death; and
- Identify best practices, then consider the creation of an effective mental health and wellness campaign for our members

and be it further

Resolved, that ADA explore safeguarding dentists from punitive action by state dental boards as well as third party credentialing; with regard to mental health issues and report back to the 2022 House of Delegates with an actionable plan.

In response to Resolution 95H, the Council on Dental Practice did an extensive analysis of ADA resources available to dentists in support of mental health and wellness. A separate report outlining these activities has been submitted to the 2022 House of Delegates (*CDP Report 3*).

Resolution: 104H-2021—Financial Literacy among New Dentists and Dental Students

104H-2021. Resolved, that the appropriate ADA agencies inventory all ADA course and program offerings related to debt management, practice management, financial advisor services, and financial literacy for new dentists and students, and be it further

Resolved, that a determination be made as to whether there are any gaps in the current offerings, along with estimated costs to close those gaps, and be it further

Resolved, that a determination be made on the feasibility and costs of developing an easily accessible electronic catalog, with a report on the findings to the 2022 House of Delegates.

The Center for Dental Practice Policy staff audited all available financial-related courses and programs created or overseen by multiple ADA agencies. These comprehensive offerings were guided by member requests and feedback. ADA staff determined that any identified content gaps can be closed within the next year, with no significant financial impact via ongoing collaborations with the appropriate ADA agencies.

The ADA Digital Member Experience team launched a redesigned ADA website in November 2021 and continues to improve the search feature. The ADA member mobile app is scheduled to include this data in a future upgrade. The Practice Management Subcommittee determined that an additional “electronic catalog” is not necessary. The Council will send a report to the 2022 House of Delegates.

With these activities and explanations, the directives from 104H-2021 have been satisfied or answered.

Resolution: 107H-2021—Standard Form for Consolidating Dental Implant and Implant Restoration Data

107H-2021. Resolved, that the appropriate ADA agency create a form for patients and dental records that consolidates the data on placed implants and implant restorations to include the date of placement, implant manufacturer, type, size and intraoral location as well as abutment manufacturer, type, size and dental laboratory, and be it further

Resolved, that the ADA urge dentists to use the form for patient records and provide a copy to the patient.

The ADA Dental Implant Card was approved by the Council in May 2022. A communications plan will be implemented in third quarter 2022 to socialize the card to dentists. With these activities and explanations, the directives from 107H-2021 have been satisfied or answered.

Self-Assessment

The Council is next scheduled to conduct a self-assessment in 2024.

Policy Review

In accordance with Resolution 170H-2012, Regular Comprehensive Policy Review (*Trans.*2012:370), the Council on Dental Practice reviewed the following policies and determined they should be maintained:

- Professional Dental Care (*Trans.*1996:689)
- Primary Dental Care Provider (*Trans.*1994:668; 2010:548)
- Active and Inactive Dental Patients of Record (*Trans.*1991:621; 2012:441)
- Oral Diagnosis (*Trans.*1978:499)
- Treatment Plan (*Trans.*1978:499)
- Cosmetic Dentistry (*Trans.*1976:850)
- Primary Dental Care (*Trans.*1994:668; 2010:562; 2012:441; 2014:506)
- Do-It-Yourself Teeth Straightening (*Trans.*2017:266)
- Statement on Dental Health and Wellness (*Trans.*2005:321; 2017:264)
- Guiding Principles for Dentist Well-Being Activities at the State Level (*Trans.*2005:330; 2012:442)
- Statement on Substance Use among Dental Students (*Trans.*2005:329)
- Statement on Substance Abuse among Dentists (*Trans.*2005:328)
- Dental Radiographs for Victim Identification (*Trans.*2003:364; 2012:442)
- Dental Identification Teams (*Trans.*1994:654; 2012:441)
- Dental Identification Efforts (*Trans.*1985:588)
- Uniform Procedure for Permanent Marking of Dental Prostheses (*Trans.*1979:637; 2012:448)
- Status of General Practice (*Trans.*1973:725)
- “Denturist” and “Denturism” (*Trans.*1976:868; 2001:436)

Dental Society Activities against Illegal Dentistry (*Trans.*1977:934; 2001:435)
Opposition to “Denturist Movement” (*Trans.*2001:436)
Statement on Provision of Dental Treatment for Patients with Substance Abuse Disorders
(*Trans.*2005:329)
Insurance Coverage for Chemical Dependency Treatment (*Trans.*1986:519; 2012:442)
Statement on Alcohol and Other Substance Use by Pregnant and Postpartum Patients
(*Trans.*2005:330)
Statement on Alcoholism and Other Substance Use Disorders (*Trans.*2005:328; 2018:309)

Council Minutes

For more information on recent activities, see the Council’s [minutes](#) on ADA.org.