

ADA COUNCIL ON ETHICS, BYLAWS, AND JUDICIAL AFFAIRS

Minutes of July 24, 2020 Meeting

The regular meeting of the Council on Ethics, Bylaws, and Judicial Affairs (CEBJA or the Council) was called to order at 9:01 a.m. on July 24, 2020. Council Chair Dr. Michael A. Kurkowski presided at the meeting which took place via the Zoom videoconference platform.

Roll call: Council members in attendance for the meeting: Dr. Michael A. Kurkowski, Dr. Larry F. Browder, Dr. Donald F. Cohen, Dr. Seth W. Griffin, Dr. Kristi M. Soileau, Dr. Jill M. Burns, Dr. Guenter J. Jonke, Dr. Onika R. Patel, Dr. Robert J. Wilson, Jr., Dr. Meredith A. Bailey, Dr. Alma J. Clark, Dr. William D. Cranford, Dr. Jay A. Johnson, Dr. Bruce A. Burton, Dr. Gary S. Davis, Dr. Ansley H. Depp, Dr. Renee P. Pappas and Dr. Daniel W. Hall (New Dentist member).

Following the call of the roll, a quorum was announced to be present.

Liaisons in attendance for the meeting: Dr. Linda K. Himmelberger, Board of Trustees liaison; Dr. Anisha Pandya, American Student Dental Association liaison.

CEBJA staff present for all or a portion of the meeting: Thomas C. Elliott, Jr. Esq., deputy general counsel and council director; Nanette Elster, Esq., manager, ethics outreach programs; Mr. Earl Sewell, council coordinator.

ADA personnel present for all or a portion of the meeting: Dr. Kathleen T. O'Loughlin, executive director; Scott W. Fowkes, Esq., general counsel; Cathryn E. Albrecht, Esq., senior associate general counsel; Wendy Wils, Esq., deputy general counsel; Mr. Jerry Bowman, chief of governance and strategy management; Ms. Gabrielle O'Connor, Legal Affairs Division coordinator; Ms. Kerry Kamsiuk, Legal Affairs Division coordinator.

Participant Disclosures: The ADA Disclosure Policy was referenced. No disclosures were made.

Adoption of the Agenda: By voice vote, the Council adopted a resolution approving the meeting agenda as follows.

Resolved, that the printed agenda of the July 24-25, 2020, meeting of the Council of Ethics, Bylaws and Judicial Affairs be adopted as the official order of business with the stipulation that the chair is authorized to change the order of items for discussion to expedite the business of the Council and to accommodate scheduling issues and special presentations.

Adoption of Consent Agenda: By voice vote, the Council adopted a resolution approving the consent agenda for the meeting.

Resolved, that the items of business marked on the agenda as being on consent for the July 24-25, 2020 meeting of the Council of Ethics, Bylaws and Judicial Affairs and listed below be approved, the reports thereon filed and any resolutions therein adopted.

Items on Consent:

Item 3.5 Future Meeting Dates

Item 5.8 Reports of the ADA Trustee Districts.

Approval of March 2020 Minutes: By voice vote, the Council approved the minutes of the March 2020 Council meeting.

SPECIAL PRESENTATIONS AND REPORTS

Executive Director's Presentation: Dr. O'Loughlin reported on the impact of COVID-19 on the Association and the profession, COVID-related risks and mitigation, and ADA's Common Ground 2025 strategic plan. Following her report, Dr. O'Loughlin responded to questions from Council members.

General Counsel Introduction and Report: The chair introduced ADA General Counsel, Scott Fowkes. Mr. Fowkes reported on the legal division's involvement in supporting the Association during the pandemic including involvement in the COVID-response team, the business continuity planning team, business interruption issues, and by supporting the Board's Budget and Finance Committee. He also provided non-privileged summaries of the status of pending fluoridation litigation in California and the class action lawsuit pending in the Northern District of Illinois against Delta Dental to which the ADA is a party.

COUCIL REPORTS

Report of the Council Chair: Dr. Kurkowski welcomed Council members to meeting and thanked members for their work for the Council.

Report of the Vice Chair: Dr. Wilson welcomed Council members to the meeting.

Report of the Board of Trustees Liaison: Dr. Himmelberger thanked the Council for their work and providing guidance to the Association membership.

Report of the New Dentist Committee Member: Dr. Hall reported on New Dentist Committee's commitment to showing ADA as a home for new dentists with the added challenge of COVID-19.

Report of the ASDA Liaison: Dr. Pandya reported on cancellation of National Leadership Conference due to state guidelines of Illinois.

Report of the Council Director: Mr. Elliott reminded Council members about the pending ballot for Vice Chair.

Report of the Council Manager: Ms. Elster reported on the status of the Council's continuing education efforts and the authoring of Ethical Moment articles by Council members.

COMMITTEE REPORTS

Administrative and Policy Review Subcommittee Summary Report:

Amendment of ADA Member Conduct Policy: Dr. Griffin reported on subcommittee's amendments to the ADA Member Conduct Policy and recommended the Council vote supporting the changes. The

Council engaged in discussion and made edits to the resolution provided. By voice votes, the amendments to the resolution were accepted and the resolution was adopted.

Resolved, that the Member Conduct Policy (*Trans.2011:530*) be amended as follows (additions underscored, deletions stricken through):

ADA Member Conduct Policy

- Members' should communicate respectfully in all discussions, social media activities, communications and interactions with other dentists, dentist members, Association officers, trustees and staff should be respectful and free of demeaning, derogatory, offensive or defamatory language.
- 2. <u>Discussions and communications relating to modes of practicing dentistry should be courteous and professional, and members should be tolerant and respectful of the practice choices of their fellow dentists.</u>
- 23. Members should <u>abide by and respect the decisions and policies of the Association and must not engage in disruptive behavior in actions with other members, Association officers, trustees and staff. Any criticism or challenges to existing Association policies or decisions shall be undertaken in a professional manner.</u>
- <u>34</u>. Members have an obligation to be informed about and use Association policies for communication and dispute resolution.
- 4<u>5</u>. Members are expected to comply with all applicable laws and regulations, including but not limited to antitrust laws and regulations and statutory and common law fiduciary obligations.
- 56. Members must respect and protect the intellectual property rights of the Association, including any trademarks, logos, and copyrights.
- 67. Members must not use Association membership directories, on-line member listings, or attendee records from Association-sponsored conferences or CE courses for personal or commercial gain, such as selling products or services, prospecting, or creating directories or databases for these purposes.
- 78. Members must treat all confidential information furnished by the Association as such and must not reproduce materials without the Association's written approval.
- 89. Members must not violate the attorney-client privilege or the confidentiality of executive sessions conducted at any level within the Association.
- <u>910</u>. Members must fully disclose conflicts, or potential conflicts, of interest and make every effort to avoid the appearance of conflicts of interest.

Revision of the CEBJA Statement entitled Ethical Considerations When Using Patients in the Examination Process: Dr. Griffin reported on the proposal from CDEL for substantial revisions to the statement, following which the proposed amendments were discussed by the Council. Following that discussion Dr. Griffin on behalf of the subcommittee, moved the adoption of the following resolution. By voice vote, the resolution was approved.

Resolved, that the statement of the Council on Ethics, Bylaws and Judicial Affairs entitled Ethical Considerations When Using Patients in the Examination Process be revised to read as shown in **Appendix 1** appended hereto.

Bylaws Subcommittee Reports: Dr. Robert J. Wilson, vice chair and subcommittee chair, summarized the work of the subcommittee since the March 2020 meeting relating to proposed amendment to the *Bylaws* and *Governance Manual* as presented in the House of Delegates worksheets listed below. The Council was requested to review each of the listed House Delegates worksheets after which Dr. Wilson, on behalf of the Bylaws subcommittee, moved that each worksheet be approved by adoption of the following resolutions:

Worksheet entitled Amendment and Simplification of Bylaws Chapter I., Section 20.B. (Agenda Item 6.2.2):

Resolved, that the Council approves the House Worksheet entitled Amendment and Simplification of Bylaws Chapter I., Section 20.B. and forwards the Worksheet to the House of Delegates with a recommendation to adopt.

The proposed amendment set forth in the worksheet is as follows:

Resolved, that Chapter I, Section B. of the ADA *Bylaws* be amended as follows (additions underscored, deletions stricken through):

B. LIFE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be a life member of this Association if he or she meets the following qualifications:

- a. Association Membership. The member has been:
 - Has been An active and/or retired member in good standing of this
 Association for at least thirty (30) consecutive years or a total of at least forty (40) non-consecutive years; or
 - Was a member of the National Dental Association for twenty-five (25) years and has been an active and/or retired member in good standing of this Association for at least ten (10) years;
- b. Reached the age of at least sixty-five (65) during the previous calendar year; and
- c. Maintains membership in good standing in a constituent and component, if such exists, and in this Association.

A member may also qualify for life member status by having been a member of the National Dental Association for twenty-five (25) years and subsequently holding membership in this Association for at least ten (10) years and having reached the age of at least sixty-five (65) during the previous calendar year.

Following moving the resolution by Dr. Wilson on behalf of the subcommittee and Council discussion of the amendments presented, the recited resolution was adopted by voice vote of the Council.

Worksheet entitled Amendment of Chapter III., Section 120 of the ADA Bylaws (Agenda Item 6.2.3):

Resolved, that the Council approves the House Worksheet entitled Amendment of Chapter III., Section 120 of the ADA Bylaws and forwards the Worksheet to the House of Delegates with a recommendation to adopt.

The proposed amendment set forth in the worksheet is as follows:

Resolved, that Chapter III., Section 120. of the ADA *Bylaws* be amended as shown below (additions <u>underscored</u>, deletions <u>stricken through</u>):

Section 120. METHOD OF ELECTION: Elective officers and members of councils and committees shall be elected by ballot, except that when there is only one candidate, such candidate may be declared elected by the Speaker of the House of Delegates. The Secretary shall provide facilities for voting.

- 1. When one is to be elected, and more than one has been nominated, the majority of the ballots cast shall elect. In the event no candidate receives a majority on the first ballot, the candidate with the fewest votes shall be removed from the ballot and the remaining candidates shall be balloted upon again. This process shall be repeated until one (1) candidate receives a majority of the votes cast.
- 2. When more than one is to be elected, and the nominees exceed the number to be elected, the votes cast shall be non-cumulative, each voting member shall cast votes equal to or less than the number to be elected but shall not cast multiple votes for a single nominee, and the candidates receiving the greatest number of votes shall be elected.

Following moving the resolution by Dr. Wilson on behalf of the subcommittee and Council discussion of the amendments presented, the recited resolution was adopted by voice vote of the Council.

Worksheet entitled Amendment of Chapter XII., Section A. of the Governance and Organizational Manual of the American Dental Association (Agenda Item 6.2.4):

Resolved, that the Council approves the House Worksheet entitled Amendment of Chapter XII., Section A. of the Governance and Organizational Manual of the American Dental Association and forwards the Worksheet to the House of Delegates with a recommendation to adopt.

The proposed amendment set forth in the worksheet is as follows:

Resolved, that Chapter XII., Section A. of the *Governance and Organizational Manual of the American Dental Association* be amended as shown below (additions <u>underscored</u>, deletions <u>stricken through</u>):

CHAPTER XII. FINANCIAL MATTERS

A. <u>Installment Payments of Dues and Special Assessments</u>. Any constituent or component may establish a plan for the installment payment of dues and special assessments for active, life, <u>retired</u> and provisional members. This Association may establish a plan for the installment payment of dues and special assessments for active, <u>and</u>-life <u>and retired</u> members who are direct members of the Association. Any

such installment plan shall require:

- 1. Monthly installment payments that conclude with the current dues and any special assessment amount being paid by December 15.
- The expeditious transfer of installments of member dues and any special assessments collected to this Association and any applicable constituent or component.
- Any installment plan adopted under this provision of the Governance Manual
 may impose a reasonable transaction fee upon the member. Transaction fees
 collected shall be prorated between this Association and the constituent and
 component, if any, based on the amount of dues and special assessment
 collected on each organization's behalf.

Following moving the resolution by Dr. Wilson on behalf of the subcommittee and Council discussion of the amendments presented, the recited resolution was adopted by voice vote of the Council.

Amendment of Governance Material Relating to Declaring an Extraordinary Emergency: The Committee proposed an amendment to Chapter III., Section 60 of the ADA *Bylaws* and Chapter III., Section A. of the *Governance Manual* relating to the procedures for the declaration of an extraordinary emergency. The Council engaged in a discussion of the proposal, resulting in additional revisions being proposed. Following the Council's discussion, the Chair called for a motion to refer the matter of amending *Bylaws* Chapter III., Section 60 and Governance Manual Chapter III., Section A. back to the Bylaws subcommittee for further review in light of the Council's discussion and the proposed additional revisions. That motion was made, duly seconded and adopted by voice vote of the Council.

Ethics Subcommittee Reports: Dr. Cohen, subcommittee chair, reported on the status of Ethical Moment article development and publication. Dr. Jonke reported on Subcommittee's work on an advisory opinion regarding government mandates during a pandemic as they relate to the principles of ethics. Council engaged in an open discussion on the subject following which it was agreed that the subcommittee will work on the preparation of the advisory opinion on the subject to presented at a later meeting of the Council.

Amendment to ADA *Principles of Ethics & Code of Professional Conduct*, Section 3.A., Community Service: Ms. Elster introduced the report of the subcommittee's review of the language in the Section 3.A. of the *Code*. The Council engaged in a discussion of the provision, following which a motion to amend Code Section 3.A. by deletion of the word "dental" was made. After further discussion, a secondary amendment to revise Section 3.A. by changing the word "dental" to "overall" was made and duly seconded, but failed on voice vote of the Council. Another secondary amendment of Section 3.A. of the *Code* was then proposed, seeking to remove the words "maintain or" from that section of the *Code*. That motion was made and duly seconded. Following discussion, by voice vote, the secondary amendment failed. Returning to the original resolution calling for the deletion of "dental" from Section 3.A. of the *Code*, by voice vote, the following resolution was adopted:

Resolved, that Section 3.A. of the ADA *Principles of Ethics & Code of Professional Conduct* be amended by deletion as follows (deletion stricken through):

3.A. COMMUNITY SERVICE.

Since dentists have an obligation to use their skills, knowledge and experience for the improvement of the dental health of the public and dare encouraged to be leaders in their community, dentists in such service shall conduct themselves in such a manner as to maintain or elevate the esteem of the profession.

Status Report on the Preparation of a Vaccination White Paper: Ms. Elster reported on the status of the vaccination white paper and reported that with the emergence of the pandemic, the Ethics subcommittee had determined that a shift in focus to the administration of vaccines by dentists from the refusal of individuals to get vaccinated, was deemed advisable. Following discussion by the Council, the chair, determining the sentiment of the Council, directed the subcommittee to decide on the focus of the vaccination white paper and to proceed with the preparation of the document.

Status Report on the Student Ethics Video Contest: Mr. Sewell, in an oral report to the Council, reported that communications about the video contest had been halted due to the COVID-19 pandemic and the unknown impact that the pandemic would have on dental students. The Council was asked to consider whether the student ethics video contest should move forward or if the contest should be suspended during the pandemic. A discussion concerning the video contest ensued, with a consensus emerging that the contest should proceed despite the pandemic. Mr. Sewell responded that Council staff would edit the contest guidelines accordingly and proceed with the rollout of the contest for 2020.

<u>Continuing Education Committee</u>: Ms. Elster reported on the committee's efforts regarding webinars with the American College of Dentists and Dentsply Sirona concerning reentry into the workforce.

Status Report of the Council's 2020 continuing education offering on Ethical Considerations in Disaster Planning and Preparedness: Ms. Elster reported on the cancellation of the continuing education presentation on disaster preparedness that was planned for ADA 2020, explaining that the cancellation was the result of ADA 2020 becoming a virtual event.

Status Report on the submission of continuing education topic(s) for the 2021 annual meeting: Ms. Elster reported on the continuing education submission on bias for the ADA 2021 meeting in Las Vegas.

OTHER COUNCIL BUSINESS

Presentation of Plaques to Outgoing Council Members and Dr. Pandya: Dr. Kurkowski presented plaques to retiring members and the retiring ASDA liaison of the Council, with the physical plaques being shipped to the retiring individuals following the meeting.

Standing Committee on Constitution and Bylaws: Dr. Kurkowski reported on the role of the Standing Committee and that Council members selected for service would be contacted as soon as those selections were announced.

Selection of the 2020 – 2021 Chair: Per Council policy on leadership succession, it was moved that Dr. Wilson, Council vice chair become the incoming chair of the Council. By voice vote, the following resolution was adopted:

Resolved, that the Council selects Dr. Robert J. Wilson, Jr. as chair of the Council on Ethics, Bylaws and Judicial Affairs for the 2020-2021 term, and it is further

Resolved, that staff is directed to notify the Board of Trustees of the Chair selection.

Election of the Vice Chair: It was reported that, in light of the pandemic and the conduct of the Council meeting via videoconference, Council members had received information in advance of the meeting regarding the submission of nominations for vice chair of the Council via email. Council members were requested to submit nominations for vice chair by July 20, 2020. Nominations for vice chair were announced to be closed and that nominations for Dr. Bailey, Dr. Clark and Dr. Cranford had been received. Each of the candidates were allotted three minutes to address the Council out of the presence of the other candidates before voting occurred. Following the candidate presentations, the Council members were emailed ballots listing the three nominees for vice chair and were directed to send their ballots indicating their vote to Mr. Sewell by email. Following tabulation of the votes received, Dr. Kurkowski announced Dr. Meredith Bailey as the next vice chair of the Council for the 2020-2021 term.

NEW BUSINESS

Request of the Board of Trustees Governance Committee to Consider Proposed Emergency Bylaws: The Council was requested to consider draft proposed emergency bylaws, make revisions, amendments and additions as the Council considers necessary to arrive at proposed emergency bylaws to be submitted to the House of Delegates for its consideration during the October 2020 annual session. Jerome Bowman, Esq. and Wendy Wils, Esq. reported to the Council on the on the proposal forwarded by the Governance Committee of the Board of Trustees. Mr. Bowman and Ms. Wils then responded to questions from Council members on the proposal, following which the Council discussed the proposal and how to most efficiently consider it. That discussion culminated in a motion to refer the Emergency Bylaws proposal to the Bylaws subcommittee for discussion and developing a recommendation for consideration by the Council in advance of the Board of Trustees meeting in August 2020. The motion was duly seconded and adopted by the Council via voice vote

CDEL CE Committee Liaison Report: Dr. Clark presented an oral summary of her written liaison report.

FOR THE GOOD OF THE COUNCIL

The members of the Council, Dr. Himmelberger, Dr. Pandya, and Council staff participated in the traditional For the Good of the Council closing of the meeting.

ADJOURNMENT

On motion duly seconded, there being no remaining business on the Council's meeting agenda, the chair declared the meeting adjourned at approximately 5:59pm on July 24, 2020.

Ethical Considerations When Using Patients in the Examination Process

The following information is intended to assist dental licensure candidates, as well as examiners and educators involved in the testing process, in recognizing ethical considerations when patients are part of the clinical licensure process.

Background: Dental licensure is intended to ensure that only qualified individuals are licensed to provide dental treatment to the public. Most licensing jurisdictions have three general requirements: a D.D.S. or D.M.D. degree from a dental education program accredited by the Commission on Dental Accreditation; successful passage of the National Board Dental Examination to determine whether the applicant has achieved the cognitive bases at a level of competence that protects the health, welfare and safety of the public; and a determination of clinical competency in which a candidate demonstrates the clinical knowledge, skills and abilities necessary to safely practice dentistry.

Information and experiences reported in the literature have raised ethical considerations when the use of single encounter, procedure-based examinations on patients are part of the licensure examination process. ¹⁻⁶-While others disagree, it is recognized that the profession must ensure that the welfare of patients is safeguarded in every step of the clinical licensure examination process. ¹⁻⁹

The licensure examination process is evolving. Examination agencies continue to monitor developments for applicability and affordability of alternatives to patients in providing valid and reliable assessment of clinical competence.

The ADA has voiced its position regarding the use of patients in clinical examinations through the adoption of the 2018 Comprehensive Policy on Dental Licensure. This policy reaffirms ADA support for the elimination of patients in the clinical licensure examination process and cites alternatives to the use of single encounter, patient-based exams such as, for example, the Dental Licensure Objective Structured Clinical Examination (DLOSCE).

Given that implementation and acceptance by states of non-patient based licensure examinations will take time, the ADA Council on Ethics, Bylaws and Judicial Affairs (CEBJA)¹² called on major stakeholders, including the ADA's Council on Dental Education and Licensure (CDEL)¹³, to provide input for the development of a statement that would identify key ethical considerations and provide guidance to help ensure the welfare of the patient remains paramount.

Ethical Considerations When Using Patients in the Examination Process

- 1. <u>Soliciting and Selecting Patients</u>: The ADA Principles of Ethics and Code of Professional Conduct¹⁴ (ADA Code), Section 3, Principle: Beneficence states that the "dentist's primary obligation is service to the patient" and to provide "competent and timely delivery of dental care within the bounds of clinical circumstances presented by the patient, with due consideration given to the needs, desires and values of the patient." The current single-encounter examination processes require candidates to perform restorative and periodontal treatments on patients. In light of the principle stated above, this may create an ethical dilemma for the candidate when seeking patients to sit for the exam. Candidates should refrain from the following:
 - Reimbursements between candidates and patients in excess of that which would be considered reasonable (remuneration for travel, lodging and meals).
 - 2. Remuneration for acquiring patients between licensure applicants.
 - 3. Utilizing patient brokering companies.
 - 4. Delaying treatment beyond that which would be considered acceptable in a typical treatment plan (e.g. delaying treatment of a carious lesion for 24 months).
- 2. Patient Involvement and Consent: The ADA Code, Section 1, Principle: Patient Autonomy states that "the dentist's primary obligations include involving patients in treatment decisions in a meaningful way, with due consideration being given to the patient's needs, desires and abilities." Candidates and dental examiners support patient involvement in the clinical examination process by having a written consent form that minimally contains the following basic elements:
 - 1. A statement that the patient is a participant in a clinical licensure examination, that the candidate is not a licensed dentist, a description of the procedures to be followed and an explanation that the care received might not be complete.
 - 2. A description of any reasonably foreseeable risks or discomforts to the patient.
 - 3. A description of any benefits to the patient or to others which may reasonably be expected as a result of participation.

- 4. A disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the patient.
- 5. An explanation of whom to contact for answers to pertinent questions about the care received.
- 6. A statement that participation is voluntary and that the patient may discontinue participation at any time without penalty or loss of benefits to which the patient is otherwise entitled.
- 3. Patient Care: The ADA Code, Section 3, Principle: Beneficence states that the dentist has a "duty to promote the patient's welfare." Candidates can do this by ensuring that the interests of their patient are of primary importance while preparing for and taking the exam. Examiners contribute to this by ensuring that candidates are adequately monitored throughout the exam process such that the following treatment does not occur:
 - 1. Unnecessary treatment of incipient caries.
 - 2. Unnecessary patient discomfort.
 - 3. Unnecessarily delaying examination and treatment during the test.
- 4. <u>Follow-Up Treatment</u>: The ADA Code, Section 2, Principle:
 Nonmaleficence states that "professionals have a duty to protect the patient from harm." To ensure that the patient's oral health is not jeopardized in the event that he/she requires follow-up care, candidates and dental examiners should make certain that the patient receives the following:
 - 1. A clear explanation of what treatment was performed as well as what follow-up care may be necessary.
 - 2. Contact information for pain management.
 - 3. Complete referral information for patients in need of additional dental care.
 - 4. Complete follow-up care ensured by the mechanism established by the testing agency to address care given during the examination that may need additional attention.

Sources:

- Tien-Min Gabriel Chu, DDS, PhD, Theresa S. Gonzales, DMD, MS, MSS et al.., "Should Live Patient Licensing Examinations in Dentistry be Discontinued? Two Viewpoints," Journal of Dental Education, March 2018
- Eric A. Mills, DMD, "Non-Patient Based Clinical Licensure Examinations for Dentistry in Minnesota: Significance of Decision and Description of Process," Journal of Dental Education, June 2016
- 3. Joseph E. Gambacorta, DDS, et al., "The Buffalo Model: Shifting the Focus of Clinical Licensure Exams in Dentistry to Address Ethical Concerns Regarding Patient Care," Journal of Dental Education, June 2016
- A. Roddy Scarbrough, DMD, FAGD, "Ethical Moment Ethics of Using Live Patients for Licensing Board Examinations," The Journal of the American Dental Association, February 2018
- 5. Bruce Donoff, DMD, MD, Massachusetts Needs a PGY-1 Option for Licensure, Summer 2012
- 6. Robert J. Gherardi, DMD and Arthur A. Dugoni, DDS, MDS, FACD, Letters to the editor, Journal of the American College of Dentistry, 2012, 79(1):5
- 7. David W Chambers, PhD, "Lessons in Shifting the Burden #2 Competence to Practice," Journal of the American College of Dentistry, 2011, 78(4):2-3
- 8. ASDA White Paper: Use of Human Subjects in Clinical Licensure Examinations, October 31, 2016
- Report of the Task Force on Assessment of Readiness for Practice, ADA, ADEA and ASDA, September 2018
- 10. ADA HOD Resolution 26H-2018, Comprehensive Policy on Dental Licensure
- 11. Joint Commission on National Dental Examinations, Dental Licensure Objective Structured Clinical Examination, FAQ at ada.org/jcnde
- 12. CEBJA is the ADA agency responsible for providing guidance and advice and for formulating and disseminating materials on ethical and professional conduct in the practice and promotion of dentistry.
- 13. CDEL is the ADA agency responsible for matters related to dental licensure.
- 14. The ADA *Principles of Ethics and Code of Professional Conduct* can be found on the ADA website at www.ada.org.