Advisory Opinion 5.I.2. CREDENTIALS IN GENERAL DENTISTRY, to the ADA Principles of Ethics and Code of Professional Conduct (Code), adopted in June 1998 states:

General dentists may announce fellowships or other credentials earned in the area of general dentistry so long as they avoid any communications that express or imply specialization and the announcement includes the disclaimer that the dentist is a general dentist. The use of abbreviations to designate credentials shall be avoided when such use would lead the reasonable person to believe that the designation represents an academic degree, when such is not the case.

In adopting Advisory Opinion 5.I.2, the Council made clear that another, long-standing advisory opinion also applies to the announcement of credentials in general dentistry:

5.F.2. EXAMPLES OF “FALSE AND MISLEADING.” The relevant section of Advisory Opinion 5.F.2 states:

The following examples are set forth to provide insight into the meaning of the term “false or misleading in a material respect.” These examples are not meant to be all-inclusive. Rather, by restating the concept in alternative language and giving general examples, it is hoped that the membership will gain a better understanding of the term. With this in mind, statements shall be avoided which would: . . . d) contain a material, objective representation, whether express or implied, that the advertised services are superior in quality to those of other dentists, if that representation is not subject to reasonable substantiation . . .

The purpose of this report is to provide information that will help ADA members understand their ethical obligations under these advisory opinions and to give guidance to the constituent and component dental societies in interpreting and enforcing the Code.

Scope of Advisory Opinions: Advisory Opinion 5.F.2 sets forth general concepts that apply across the board to professional advertising regulated under the Code. Paragraph (d) applies to any claim of superiority, whether the superiority relates to education, skill, facilities or some other aspect of the dentist’s professional qualifications or practice.

Advisory Opinion 5.I.2 applies to credentials that are earned in the area of general dentistry, such as a fellowship or mastership. It also applies to certificates earned upon completion of general practice residency and advanced general dentistry programs, accredited by the Commission on Dental Accreditation. Advisory Opinion 5.I.2 does not apply to the announcement of specialization (such as orthodontist or prosthodontist) or to announcement of credentials in non-specialty interest areas (such as cosmetic dentistry or the treatment of TMJ). These credentials are covered elsewhere in the Code (see Section 5.H. ANNOUNCEMENT OF SPECIALIZATION AND LIMITATION OF PRACTICE;
Ethical Issues Involved in Advertising Credentials in General Dentistry: Advertising of credentials raises a number of ethical issues. Such advertising may lead patients to believe that the dentist is a specialist when such is not the case. Patients may confuse the credentials, especially when they are abbreviated, with academic degrees. Announcement of credentials may also give patients the impression that the dentist who possesses the credential has superior qualifications to the dentist who does not. Advisory Opinion 5.I.2 addresses the first two issues. Advisory Opinion 5.F.2 addresses the third. The advisory opinions must be read together to understand the ethical issues involved in advertising of credentials in general dentistry.

“False or Misleading” Standard: The touchstone of all advertising under the Code is whether the advertisement is false or misleading in any material respect. This standard was incorporated into the Code in 1984 and has provided the basis for ethical regulation of advertising under the Code ever since. It is important to keep in mind that what is false or misleading must be judged from the patient’s perspective. In analyzing professional advertising, dentists are liable to confuse their own knowledge about dentistry with that of the average patient. The relevant inquiry for purposes of an advertising analysis is how the reasonable patient is likely to interpret a particular claim. The claim may be express or implied. The message that the dentist intends to convey is not the issue. The key consideration is the message the patient is likely to receive.

The average patient’s knowledge of what the credentials after a dentist’s name mean is extremely limited. Beyond “D.D.S.” and “D.M.D.” the average patient is usually at a loss to sort out the initials and designations granted by a growing number of credentialing organizations. As a result, dentists are challenged to be clear and complete in their communications, so the public understands exactly what a given credential does—and does not—represent. The following sections provide guidance to dentists on how to announce credentials in general dentistry without misleading patients. The three ethical aspects of this type of advertising are discussed in turn.

Claims of Specialization: The ADA Code provides that dentists who announce specialization “must have met in each approved specialty for which they announce the existing educational requirements and standards set forth by the American Dental Association” (Section 5.H. ANNOUNCEMENT OF SPECIALIZATION AND LIMITATION OF PRACTICE). General dentists must avoid communications that express or imply specialization (Section 5.I. GENERAL PRACTITIONER ANNOUNCEMENT OF CREDENTIALS). The best and easiest way for a general dentist to avoid the implication that he or she is a specialist is to disclose that the dentist is a general dentist.
Advisory Opinion 5.I.2 states, “General dentists may announce fellowships and other credentials earned in the area of general dentistry so long as they avoid any communications that express or imply specialization and the announcement includes a disclaimer that the dentist is a general dentist.” For example, “John Jones, D.D.S., general dentist, diplomate, Institute of General Dentistry.” The disclaimer must be clear and visible in the context of the ad as a whole. Generally, this means that the disclaimer must be in the same font size, style and color as the announcement of the credential.

Use of Abbreviations: The use of abbreviations to announce non-academic credentials can be misleading if it leads the patient to confuse the credential with an academic degree. Advisory Opinion 5.I.2 states, “The use of abbreviations to designate credentials shall be avoided when such use would lead the reasonable person to believe that the designation represents an academic degree, when such is not the case.”

Implied Claims of Superiority: When a patient sees “fellow,” “master” or other professional designation after a dentist’s name, the patient is likely to interpret this to mean that the dentist has professional qualifications that are superior to those of dentists who do not possess the credential. Hence, the Council believes that the announcement of such credentials represents an implied claim of superiority that is subject to “reasonable substantiation” under Advisory Opinion 5.F.2. EXAMPLES OF “FALSE OR MISLEADING,” part (d), unless the implication is dispelled through the use of a disclaimer.

One possible way to dispel the implied claim of superiority would be with the use of appropriate language such as the following:

John R. Jones, D.D.S.
General Dentist
Fellow, Institute of General Dentistry*

*an award based on continuing education credits

Alternatively, another acceptable option would be to use a disclaimer such as that required by law in the State of Alabama: “no representation is made that the quality of the dental services to be performed is greater than the quality of dental services performed by other dentists.” Such disclaimers must be clear and visible compared to the announcement of the credential. Whether a particular disclaimer is clear and visible will be judged in the context of the advertisement as a whole, but at a minimum, the Council will require the disclaimer to be in the same font, size, style and color as the credential.

A dentist who makes an implied claim of superiority must have a reasonable basis for the claim and be ready to support it with objective evidence. It is impossible to itemize the specific evidence that would satisfy the “reasonable basis” requirement in a particular case; this would depend on the specific credential and the context in which it appeared. However, among the factors the constituents or components should consider in reviewing member advertising are: Is the credential earned or honorary? If the credential is earned,
what are the training, education and testing requirements for the credential? What relevance do they have to the clinical practice of dentistry? How do they compare to any state-mandated continuing education requirements that apply to other licensed dentists? What standards are used to evaluate the educational programs or providers? What standards are used to evaluate any testing required to gain the credential?

**Enforcement of the Code:** Members of the American Dental Association voluntarily agree to conform their professional conduct to the ADA *Principles of Ethics and Code of Professional Conduct*. Dentists who violate the *Code* may be subject to discipline, ranging from censure to expulsion from membership. Under the Association’s tripartite structure, responsibility for enforcing the *Code* is delegated, in the first instance, to the constituent and component dental societies. The ADA Council on Ethics, Bylaws and Judicial Affairs serves as the appellate body to hear member appeals from adverse decisions of the constituent and component societies. In this capacity, the Council serves as the ultimate authority for interpreting the *Code* as it applies to the facts and circumstances of a particular case. The Council will continue to exercise this authority in cases involving alleged violations of the *Code*’s advertising sections. The Council’s appellate decisions, which are reported annually, will provide additional guidance on the meaning of these sections. The constituent and component societies are reminded that, before a member may be disciplined, he or she is entitled to a hearing conducted in accordance with Chapter XII, section 20 of the ADA *Bylaws*.

*Advisory Opinion adopted in 1998;*  
*Report adopted in 1999*