ACCREDITATION STANDARDS FOR ADVANCED DENTAL EDUCATION PROGRAMS IN ADVANCED EDUCATION IN GENERAL DENTISTRY
Frequency of Citings Based on Required Areas of Compliance

Total Number of Programs Evaluated = 55
August 5, 2022 through October 31, 2024

Standard 1 – Institutional and Program Effectiveness (17 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
1	**1-6**	There **must** be opportunities for program faculty to participate in institution-wide committee activities.
	1-8	The program must develop overall program goals and objectives that emphasize:
1		a) general dentistry,
1		b) resident education,
1		c) patient care, and
2		d) community service
2	**1-9**	The program **must** have a formal and ongoing outcomes assessment process that regularly evaluates the degree to which the program's stated goals and objectives are being met and make program improvements based on an analysis of that data.

Standard 2 – Educational Program (47 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
	2-2	The program **must** have goals and objectives or competencies for resident training and provide didactic and clinical training to ensure that upon completion of training the resident is able to provide the following at an advanced level of skill and/or case complexity beyond that accomplished in pre-doctoral training:
2		a) operative dentistry;

1		b) restoration of the edentulous space;
1		c) periodontal therapy;
1		d) endodontic therapy;
1		e) oral surgery;
1		f) evaluation and treatment of dental emergencies; and
2		g) pain and anxiety control utilizing behavioral and/or pharmacological techniques.
2	**2-3**	The program must have a written curriculum plan that includes structured clinical experiences and didactic sessions in dentistry and medicine, designed to achieve the goals and objectives or competencies for resident training.
	2-4	The program **must** provide training to ensure that upon completion of the program, the resident is able to manage the following:
1		a) medical emergencies;
1		b) implants;
1		c) oral mucosal diseases;
1		d) temporomandibular disorder; and
1		e) orofacial pain
	2-5	For each assigned rotation or experience in an affiliated institution or extramural facility, there **must** be:
2		a) objectives that are developed in cooperation with the department chairperson, service chief, or facility director to which the residents are assigned;
1		b) resident supervision by designated individuals who are familiar with the objectives of the rotation or experience; and
1		c) evaluations performed by the designated supervisor.

Non-Compliance Citings	**Accreditation Standard**	**Required Areas of Compliance**
	2-6	The program must provide formal instruction in physical evaluation and medical assessment, including:
1		a) taking, recording, and interpreting a complete medical history;
1		b) understanding the indications of and interpretations of laboratory studies and other techniques used in the diagnosis of oral and systemic diseases;
1		c) understanding the relationship between oral health care and systemic diseases; and
1		d) interpreting the physical evaluation performed by a physician with an understanding of how it impacts on proposed dental treatment.
1	**2-7**	The program **must** provide instruction in the principles of practice management.
1	**2-13**	The program **must** have written goals and objectives or competencies for resident didactic and clinical training in the optional second year of training that are at a higher level than those of the first year of the program.
	2-15	The program's resident evaluation system **must** assure that, through the director and faculty, each program:
1		a) periodically, but at least three times annually, evaluates and documents the resident's progress towards achieving the program's written goals and objectives or competencies for resident training using appropriate written criteria and procedures
		b) provides residents with an assessment of their performance after each evaluation. Where deficiencies are noted, corrective actions **must** be taken; and
		c) maintains a personal record of evaluation for each resident that is accessible to the resident and available for review during site visits.

Standard 3 – Faculty and Staff (13 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
1	**3-1**	The program **must** be administered by a director who has authority and responsibility for all aspects of the program.
1	**3-4**	All sites where educational activity occurs **must** be staffed by faculty who are qualified by education and/or clinical experience in the curriculum areas for which they are responsible and have collective competence in all areas of dentistry included in the program.

Standard 4 – Educational Support Services (11 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
	4-5	The program's description of the educational experience to be provided **must** be available to program applicants and include:
		a) A description of the educational experience to be provided,
1		b) A list of goals and objectives or for resident training, and
		c) A description of the nature of assignments to other departments or institutions.

Standard 5 – Patient Care Services (8 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
2	**5-3**	The program **must** conduct and involve residents in a structured system of continuous quality improvement for patient care.

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
1	**5-5**	The program **must** document its compliance with the institution's policy and applicable regulations of local, state and federal agencies, including, but not limited to, radiation hygiene and protection, ionizing radiation, hazardous materials, and blood-borne and infectious diseases.
	5-5	Polices **must** provide to all residents, faculty and appropriate support staff and continuously monitored for compliance.
	5-5	Additionally, policies on blood-borne and infectious diseases **must** be made available to applicants for admission and patients.