

Background

The Commission on Dental Accreditation (CODA) Accreditation Standards for Advanced Dental Education Programs in Advanced Education in General Dentistry were adopted on August 5, 2022 with immediate implementation. Since that date, 73 site visits have been conducted by visiting committees of CODA utilizing these standards.

Currently, the Standards include 56 “must” statements addressing 96 required areas of compliance.

This report presents the number of non-compliance areas cited by site visits conducted from August 5, 2022 through October 31, 2025. If special (focused or comprehensive), pre-enrollment or pre-graduation site visits were conducted during this period, citings from those visits are also included.

Analysis

The data in **Appendix 1** reflects a total of 46 citings of non-compliance.

- Standard 1- Institutional Effectiveness: 9 (20%)
- Standard 2- Educational Programs: 31 (67%)
- Standard 3- Faculty and Staff: 2 (4%)
- Standard 4- Educational Support Services: 1 (2%)
- Standard 5- Patient Care Services: 3 (7%)

Analysis of the data indicates that the most frequently cited Standards are:

- Standard 1-9: three (3) citings
- Standard 2-2 a: three (3) citings
- Standard 2-2 g: three (3) citings
- Standard 2-5 a: three (3) citings

Summary

CODA will continue to receive reports annually which summarize the frequency of citings for each individual Standard, and will use the data to propose future revisions.

Recommendation:

This report is informational in nature, no action requested.

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Advanced Education in General Dentistry Frequency of Citings

Total Number of Programs Evaluated: 73

August 5, 2022 through October 31, 2025

Standard 1: Institutional and Program Effectiveness (17 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	1-8 a	general dentistry,
1	1-8 b	resident education,
1	1-8 c	patient care, and
2	1-8 d	community service
3	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 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

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		provide the following at an advanced level of skill and/or case complexity beyond that accomplished in pre-doctoral training:
3	2-2 a	operative dentistry;
1	2-2 b	restoration of the edentulous space;
1	2-2 c	periodontal therapy;
1	2-2 d	endodontic therapy;
1	2-2 e	oral surgery;
1	2-2 f	evaluation and treatment of dental emergencies; and
3	2-2 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	2-4 a	medical emergencies;
1	2-4 b	implants;
1	2-4 c	oral mucosal diseases;
1	2-4 d	temporomandibular disorder; and
1	2-4 e	orofacial pain
	2-5	For each assigned rotation or experience in an affiliated institution or extramural facility, there must be:

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3	2-5 a	objectives that are developed in cooperation with the department chairperson, service chief, or facility director to which the residents are assigned;
2	2-5 b	resident supervision by designated individuals who are familiar with the objectives of the rotation or experience; and
1	2-5 c	evaluations performed by the designated supervisor.
	2-6	The program must provide formal instruction in physical evaluation and medical assessment, including:
1	2-6 a	taking, recording, and interpreting a complete medical history;
1	2-6 b	understanding the indications of and interpretations of laboratory studies and other techniques used in the diagnosis of oral and systemic diseases;
1	2-6 c	understanding the relationship between oral health care and systemic diseases; and
1	2-6 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	2-15 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
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Standard 3: Faculty and Staff (13 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 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:
1	4-5 b	A list of goals and objectives or for resident training, and

Standard 5: Patient Care Services (8 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.
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.