



**Commission on Dental Accreditation (CODA)  
Unofficial Report of Major Actions  
August 7-8, 2025**

1. CODA reviewed accreditation reports and took 416 accreditation actions on dental, advanced dental, and allied dental education programs and recorded four (4) mail ballots on dental assisting and pediatric dentistry education programs.

A total of six (6) new programs were granted accreditation:

<b>Educational Program</b>	<b>Number</b>
Predoctoral Dental Education	1
General Practice Residency	1
Advanced Education in General Dentistry (12 months)	1
Maxillofacial Prosthetics	1
Oral and Maxillofacial Surgery Clinical Fellowship– Oncology	1
Pediatric Dentistry	1

One (1) dental hygiene and one (1) general practice residency (12 month) education program received a formal warning that accreditation will be withdrawn in February 2026 unless the requested information, demonstrating compliance with the accreditation standards or Commission policy, is submitted prior to that time.

CODA affirmed the reported voluntary discontinuance effective date or planned closure date of two (2) general practice residency (12 month), four (4) dental assisting, one (1) dental hygiene, one (1) clinical fellowship training program in craniofacial and special care orthodontics, one (1) oral and maxillofacial surgery clinical fellowship oncology, and one (1) oral and maxillofacial pathology program at the request of their respective sponsoring institutions.

2. CODA adopted revisions to the following Accreditation Standard:
  - Accreditation Standards for Dental Hygiene Education Programs related to Standard 3-6c, related to faculty credentials, with immediate implementation.
3. CODA directed the following proposed revisions to Accreditation Standards be circulated to the communities of interest for comment including, as applicable, hearings conducted in conjunction with the October 2025 American Dental Association (ADA) Annual Meeting (Fall CODA Hearing) and March 2026 American Dental Education Association (ADEA) Annual Session (Spring CODA Hearing):
  - Accreditation Standards for Dental Education Programs, with circulation to the communities of interest for six (6) months for consideration at the Winter 2026 meeting of the Commission.
  - Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery related to the proposed new section for clinical fellowship training programs in Trigeminal Nerve Surgery and Disorders, with circulation to the communities of interest for six (6) months for consideration at the Winter 2026 meeting of the Commission.

- Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry for Standard 4-20 related to patient safety, with circulation to the communities of interest for six (6) months for consideration at the Winter 2026 meeting of the Commission.
  - Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain for Standard 2-11, Clinical Sciences, with circulation to the communities of interest for six (6) months for consideration at the Winter 2026 meeting of the Commission.
  - Accreditation Standards for Dental Laboratory Technology Education Programs, with circulation to the communities of interest for one (1) year for consideration at the Summer 2026 meeting of the Commission.
  - New Accreditation Standards for Advanced Dental Education Programs in Operative Dentistry, Cariology and Biomaterials, with circulation to the communities of interest for one (1) year for consideration at the Summer 2026 meeting of the Commission.
4. In response to the memorandum released by the Attorney General of the United States of America on July 29, 2025, CODA directed that the Accreditation Standards for all disciplines related to diversity of faculty, staff, and students (**Appendix 1**) be suspended indefinitely. Additionally, CODA amended the intent statements and examples of evidence of the following Standards (**Appendix 1**) related to diversity of faculty, staff, and students: Predoctoral Dental Standard 1-3, Dental Hygiene Standard 1-2, Dental Therapy Standard 1-3, and Oral and Maxillofacial Surgery Standard 2-1.7. CODA further directed a communication to educational programs and site visitors to inform these communities of the indefinite suspension of CODA's review and enforcement of Accreditation Standards found in **Appendix 1**. CODA further directed that a program's self-study and the site visit report may include the following statement for each standard that has been suspended: *"On August 8, 2025, the Commission on Dental Accreditation directed that Accreditation Standards related to diversity of faculty, staff, and students be suspended indefinitely"*. CODA further directed that during the period of suspension, CODA will take no action in whole or in part based on the Accreditation Standards set forth in **Appendix 1**, including but not limited to review during a program's site visit, consideration of complaints, and revision of Standards.
5. CODA directed an Ad Hoc Committee of advanced dental education Commissioners to review information obtained related to the Centers for Medicare and Medicaid Services (CMS) recognized accreditation organizations to determine the appropriateness of each CMS-recognized accreditation organization as a sponsoring organization as it relates to educational programs within its purview, with a report to CODA in Winter 2026.
6. CODA reviewed the report of the Standing Committee on Finance and took the following actions:
- Directed that CODA gather information on additional costs CODA will incur in the coming and future years related to the ADA's move and meeting expenses, the ADA study of CODA, and any other factors that may affect CODA's budget, with a report to the Finance Committee and to the Commission at its Winter 2026 meeting.
  - Directed that CODA present the amendments to the ADA-CODA Shared Services Agreement to the ADA-CODA Relationship Workgroup/ADA Board of Trustees, including a request to uncap the CODA's Administrative Fund so that CODA can assume greater fiscal responsibility for operational, technology, and other expenses.
  - Directed that CODA continue its negotiations of the amendments to the ADA-CODA Shared Services Agreement with the ADA-CODA Relationship Workgroup/ADA Board of Trustees in Fall 2025, with a report at the Winter 2026 CODA meeting.

7. CODA reviewed the report of the Standing Committee on Documentation and Policy Review, and took the following actions:
  - Adopted the following revised policies within its Evaluation and Operational Policies and Procedures Manual, with immediate implementation:
    - Reporting Program Changes
    - Policy on Advertising
    - Policy Statement on Reporting and Approval of Sites where Educational Activity Occurs
    - Confidentiality Policy
    - Review Committees and Board of Commissioners Policies
    - Formal Complaints
    - Anonymous Comments/Complaints
    - Program Requirements and Procedures
    - Conflict of Interest Policy
8. CODA reviewed the Report of the Standing Committee on Communication and Technology and took the following actions:
  - Directed that the pamphlet on the Commission's process to revise Accreditation Standards be distributed to the Commission's communities of interest and published on the Commission's website.
  - Directed that the pamphlet on the value of CODA-accredited dental assisting and dental laboratory technology education programs be distributed to the public and academic programs, to emphasize the value of CODA-accredited programs, and published on the Commission's website.
  - Directed that the Survey on the Use of Artificial Intelligence be distributed to all Commission-accredited dental, advanced dental, and allied dental education programs to learn how programs use artificial intelligence in the academic environment and accreditation, and potential future uses, with report at the Winter 2026 CODA meeting.
9. CODA reviewed the Report of the Standing Committee on Site Visit Process and Training and took the following actions:
  - Directed CODA staff to complete the design and production of the micro learnings for consideration at the Winter 2026 CODA meeting.
  - Directed CODA staff to survey CODA site visitors and program directors to gather information on the training needs of both audiences to develop a list of future micro learning topics with a report at the Winter 2026 CODA meeting.
10. CODA considered the Report of the Standing Committee on Nominations, and approved nominations to fill vacancies for discipline specific positions and non-discipline specific positions on its Review Committees and the Commission, beginning Fall 2025.
11. CODA elected Dr. Cataldo Leone as chair of the Commission and Dr. Keith Mays as vice chair of the Commission for 2025-2026.
12. CODA acknowledged the following Commissioners whose terms will expire in October 2025: Dr. Evanthis Anadioti, Dr. Carolyn Brown, Dr. Joseph Cohen, Dr. Scott DeRossi, Dr. Joseph Giovannitti, Dr. George Kushner, Dr. Frank Licari, Dr. Miriam Roberts, Dr. Nancy Rosenthal, Ms. Lonni Thompson, and Mr. Noah Williams.



13. CODA acknowledged the service of two (2) dedicated staff, Ms. Peggy Soeldner, senior manager, and Dr. Sherin Tooks, senior director, who have supported the Commission for 26 and 23 years, respectively.
14. CODA Operations (Limited Attendance): CODA considered the Report of the Ad Hoc Committee to Consider the American Dental Association's Dental Deans' Stakeholder Engagement Process Related to CODA, and directed that CODA Standing and Ad Hoc Committees will further study these recommendations, with future reports to CODA.

Commission Members: Dr. Evanthia Anadioti, Dr. Indraneel Bhattacharyya, Ms. Margaret Bowman-Pensel, Dr. Carolyn Brown, Dr. Ngoc Chu, Dr. Joseph Cohen, Ms. Jill Day, Dr. Scott DeRossi, Dr. Theresa Gonzales, Dr. Joseph Giovannitti, Dr. Catherine Hayes, Ms. LaShun James, Dr. George Kushner, Dr. Jessica Lee, Dr. Cataldo Leone (vice-chair), Dr. Frank Licari (chair), Dr. Paul Luepke, Ms. Lisa Mayer, Dr. Keith Mays, Dr. Renee McCoy-Collins, Dr. Monica Nenad, Dr. Lisa Nowlin, Dr. Cornelius Pitts, Dr. Jeffrey Price, Dr. Kanthasamy Ragunathan, Dr. Miriam Robbins, Dr. Nancy Rosenthal, Dr. Kenneth Sadler, Dr. Glenn Sameshima, Dr. Fabricio Teixeira, Ms. Lonni Thompson, Dr. Deborah Weisfuse, and Mr. Noah Williams.

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**APPENDIX 1**  
**ACCREDITATION STANDARDS FOR ALL DISCIPLINES RELATED TO DIVERSITY**  
**OF FACULTY, STAFF, AND STUDENTS**  
**CODA Action Summer 2025**

***The following Standards have been suspended indefinitely. CODA will take no action regarding these standards while the suspension of diversity-related standards is in effect.***

Discipline	Standard Number	Requirement of the Standard
<b>Predoctoral Dental</b>	Standard 1-4	<p>The dental school <b>must</b> have policies and practices to:</p> <ul style="list-style-type: none"> <li>a. achieve appropriate levels of diversity among its students, faculty and staff;</li> <li>b. engage in ongoing systematic and focused efforts to attract and retain students, faculty and staff from diverse backgrounds; and</li> <li>c. systematically evaluate comprehensive strategies to improve the institutional climate for diversity.</li> </ul> <p><b>Intent:</b>  <i>The dental school should develop strategies to address the dimensions of diversity including, structure, curriculum and institutional climate. The dental school should articulate its expectations regarding diversity across its academic community in the context of local and national responsibilities, and regularly assess how well such expectations are being achieved. Schools could incorporate elements of diversity in their planning that include, but are not limited to, gender, racial, ethnic, cultural and socioeconomic. Schools should establish focused, significant, and sustained programs to recruit and retain suitably diverse students, faculty, and staff.</i></p>
	Standard 4-4	<p>Admission policies and procedures <b>must</b> be designed to include recruitment and admission of a diverse student population.</p> <p><b>Intent 4-1 to 4-4:</b>  <i>The dental education curriculum is a scientifically oriented program which is rigorous and intensive. Admissions criteria and procedures should ensure the selection of a diverse student body with the potential for successfully completing the program. The administration and faculty, in cooperation with appropriate institutional personnel, should establish admissions procedures that are non-discriminatory and ensure the quality of the program.</i></p>

<p><b>Dental Therapy</b></p>	<p>Standard 1-4</p>	<p>The program <b>must</b> have policies and practices to:</p> <ol style="list-style-type: none"> <li>achieve appropriate levels of diversity among its students, faculty and staff;</li> <li>engage in ongoing systematic and focused efforts to attract and retain students, faculty and staff from diverse backgrounds; and</li> <li>systematically evaluate comprehensive strategies to improve the institutional climate for diversity.</li> </ol> <p><b>Intent:</b>  <i>The program should develop strategies to address the dimensions of diversity including, structure, curriculum and institutional climate. The program should articulate its expectations regarding diversity across its academic community in the context of local and national responsibilities, and regularly assess how well such expectations are being achieved. Programs could incorporate elements of diversity in their planning that include, but are not limited to, gender, racial, ethnic, cultural and socioeconomic. Programs should establish focused, significant, and sustained programs to recruit and retain suitably diverse students, faculty, and staff.</i></p>
	<p>Standard 4-2</p>	<p>Admission policies and procedures <b>must</b> be designed to include recruitment and admission of a diverse student population.</p> <p><b>Intent:</b>  <i>Admissions criteria and procedures should ensure the selection of a diverse student body with the potential for successfully completing the program. The administration and faculty, in cooperation with appropriate institutional personnel, should establish admissions procedures that are non-discriminatory and ensure the quality of the program.</i></p>
<p><b>Oral and Maxillofacial Surgery (Residency)</b></p>	<p>Standard 1-11</p>	<p>The program and sponsoring institution’s collaborative responsibilities <b>must</b> include an ongoing effort for recruitment and retention of a diverse and inclusive workforce of faculty, residents and staff.</p> <p><b><u>Examples of evidence to demonstrate compliance may include:</u></b></p> <ul style="list-style-type: none"> <li>Nondiscriminatory policies and practices at all organizational levels.</li> <li>Mission and policy statements which promote diversity and inclusion.</li> <li>Evidence of training in diversity, inclusion, equity, and belonging.</li> </ul>

**CODA amended the intent statements and examples of evidence of the following Standards. Amended content is shown through a ~~strike through~~. Note these Standards' "must" statements remain in effect.**

Discipline	Standard Number	Requirement of the Standard
<p><b>Predoctoral Dental</b></p>	<p>Standard 1-3</p>	<p>The dental education program <b>must</b> have a stated commitment to a humanistic culture and learning environment that is regularly evaluated.</p> <p><b>Intent:</b>  <i>The dental education program should ensure collaboration, mutual respect, cooperation, and harmonious relationships between and among administrators, faculty, students, staff, and alumni. The program should also support and cultivate the development of professionalism and ethical behavior <del>by fostering diversity of faculty, students, and staff, open communication, leadership, and scholarship.</del></i></p> <p><b>Examples of evidence to demonstrate compliance may include:</b></p> <ul style="list-style-type: none"> <li>• Established policies regarding ethical behavior by faculty, staff and students that are regularly reviewed and readily available</li> <li>• Student, faculty, and patient groups involved in promoting <del>diversity</del>, professionalism and/or leadership support for their activities</li> <li>• Focus groups and/or surveys directed towards gathering information on student, faculty, patient, and alumni perceptions of the cultural environment</li> </ul>
<p><b>Dental Hygiene</b></p>	<p>Standard 1-2</p>	<p>The program <b>must</b> have a stated commitment to a humanistic culture and learning environment that is regularly evaluated.</p> <p><b>Intent:</b>  <i>The program should ensure collaboration, mutual respect, cooperation, and harmonious relationships between and among administrators, faculty, students, staff, and alumni. The program should also support and cultivate the development of professionalism and ethical behavior. <del>by fostering diversity of faculty, students, and staff, open communication, leadership, and scholarship.</del></i></p> <p><b>Examples of evidence to demonstrate compliance may include:</b></p>

		<ul style="list-style-type: none"> <li>• Established policies regarding ethical behavior by faculty, staff and students that are regularly reviewed and readily available</li> <li>• Student, faculty, and patient groups involved in promoting diversity, professionalism and/or leadership support for their activities</li> <li>• Focus groups and/or surveys directed towards gathering information on student, faculty, patient, and alumni perceptions of the cultural environment</li> </ul>
<p><b>Dental Therapy</b></p>	<p>Standard 1-3</p>	<p>The dental therapy education program <b>must</b> have a stated commitment to a humanistic culture and learning environment that is regularly evaluated.</p> <p><b>Intent:</b>  <i>The dental therapy education program should ensure collaboration, mutual respect, cooperation, and harmonious relationships between and among administrators, faculty, students, staff, and alumni. The program should also support and cultivate the development of professionalism and ethical behavior. <del>by fostering diversity of faculty, students, and staff, open communication, leadership, and scholarship.</del></i></p> <p><b>Examples of evidence to demonstrate compliance may include:</b></p> <ul style="list-style-type: none"> <li>• Established policies regarding ethical behavior by faculty, staff and students that are regularly reviewed and readily available</li> <li>• Student, faculty, and patient groups involved in promoting diversity, professionalism and/or leadership support for their activities</li> <li>• Focus groups and/or surveys directed towards gathering information on student, faculty, patient, and alumni perceptions of the cultural environment</li> </ul>
<p><b>Oral and Maxillofacial Surgery (Residency)</b></p>	<p>Standard 2-1.7</p>	<p>The program <b>must</b> have a stated commitment to a humanistic culture and learning environment that is regularly evaluated.</p> <p><b>Intent:</b> <i>The program should ensure collaboration, mutual respect, cooperation, and harmonious relationships between and among administrators, faculty, residents, staff, and alumni. The program should also support and cultivate the development of professionalism and ethical behavior <del>by fostering diversity of faculty, students, and staff, open communication, leadership, and scholarship.</del></i></p>

		<p><b><u>Examples of evidence to demonstrate compliance may include:</u></b></p> <ul style="list-style-type: none"> <li>• Established policies regarding ethical behavior by faculty, staff and residents that are regularly reviewed and readily available</li> <li>• Resident, faculty, and patient groups involved in promoting diversity, professionalism and/or leadership support for their activities</li> <li>• Focus groups and/or surveys directed towards gathering information on resident, faculty, patient, and alumni perceptions of the cultural environment</li> </ul>
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The following Standards are proposed standards, which will be circulated to communities of interest for review and comment. Proposed changes are indicated in red. CODA will not take any action regarding these standards while the standards regarding diversity of faculty, staff, and students are suspended; review and comment are being sought for the CODA's consideration at such time that these standards are no longer suspended.

Discipline	Standard Number	Requirement of the Standard
<p><b>Predoctoral Dental</b></p>	<p>Proposed Standard 1-2</p>	<p>The dental education program <b>must</b> <del>have a stated</del> <u>demonstrate a</u> commitment to a humanistic <del>culture and</del> learning environment that <u>includes: is regularly evaluated.</u></p> <ol style="list-style-type: none"> <li><u>a stated commitment and activities to promote a safe learning environment free of intimidation, abuse, and retaliation;</u></li> <li><u>regular evaluation of the learning environment, with input from faculty, staff, and students;</u></li> <li><u>actions aimed at enhancing the learning environment based on the results of regular evaluation.</u></li> </ol> <p><b>Intent:</b></p> <p><del>The dental education program should ensure collaboration, mutual respect, cooperation, and harmonious relationships between and among administrators, faculty, students, staff, and alumni. The program should also support and cultivate the development of professionalism and ethical behavior by fostering diversity of faculty, students, and staff, open communication, leadership, and scholarship.</del></p>

		<p><b>Examples of evidence to demonstrate compliance may include:</b></p> <ul style="list-style-type: none"> <li>• Established policies regarding ethical behavior by faculty, staff and students that are regularly reviewed and readily available</li> <li>• <u>Development of a Code of Conduct</u></li> <li>• <u>Training to recognize and mitigate microaggressions, implicit and explicit bias, racism, hate speech, or other derogatory or harmful behaviors</u></li> <li>• <u>Training to avoid discrimination or bias regarding gender identity and sexual orientation</u></li> <li>• Student, faculty, and <del>patient</del> <u>staff</u> groups involved in <del>promoting diversity</del>, professionalism and/or leadership support for their activities</li> <li>• Focus groups and/or surveys directed towards gathering information on student, faculty, <del>patient, and alumni</del> <u>and staff</u> perceptions of the <del>cultural</del> <u>learning</u> environment</li> </ul>
	<p>Proposed Standard 1-3</p>	<p><u>The dental school <b>must</b> have policies and practices to prevent discrimination related to its efforts to attract and retain students, faculty, and staff.</u></p>