

Background

The Commission on Dental Accreditation (CODA) Accreditation Standards for Dental Assisting adopted in August 2019 and implemented on July 1, 2020. Since that date, 187 site visits have been conducted by visiting committees of CODA utilizing these standards.

Currently, the Standards include 102 **must** statements addressing 234 required areas of compliance.

This report presents the number of non-compliance areas cited by site visits conducted from July 1, 2020 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 **794** citings of non-compliance.

- Standard 1 - Institutional Effectiveness: 83 (10.45%)
- Standard 2 - Educational Program: 528 (66.51%)
- Standard 3 - Administration, Faculty and Staff: 83 (10.45%)
- Standard 4 - Educational Support Services: 63 (7.93%)
- Standard 5 - Health And Safety Provisions: 34 (4.28%)
- Standard 6 - Patient Care Services: 3 (0.38%)

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

- Standard 1-1, e *Planning and Assessment*: 24 citings
- Standard 2-6, b *Curriculum Management*: 22 citings
- Standard 1-7 (part 2) *Community Resources*: 21 citings
- Standard 2-18 *Dental Sciences*: 21 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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Dental Assisting Frequency of Citings

Total Number of Programs Evaluated: 187

July 1, 2020 through October 31, 2025

Standard 1: Institutional Effectiveness (14 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance	
3	1-1	The program must demonstrate its effectiveness through a formal and ongoing planning and outcomes assessment process that is systematically documented and annually evaluated. This process must include the following:	
4		a.	Dental assisting program goals that include, but are not limited to student outcomes that are consistent with the goals of the sponsoring institution and appropriate to dental assisting education
5		b.	Time-table for implementation that indicates roles and responsibilities of all participants;
10		c.	Methods to assess goals and provide outcomes that include, but are not limited to, measures of student achievement
13		d.	Review and analysis of compiled data obtained from assessment methods, and related conclusions
24		e.	Findings and conclusions are used for program improvement, and for revisions to the overall planning and outcomes assessment process.
2	1-2	The institution must demonstrate stable financial resources to ensure support of the dental assisting program's stated mission, goals and objectives on a continuing basis.	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

1		Resources must be sufficient to ensure adequate and qualified faculty and staff, clinical and laboratory facilities, equipment, supplies, reference materials and teaching aids that reflect technological advances and current professional standards.
	1-3	The sponsoring institution must ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.
	1-4	The authority and final responsibility for curriculum development and approval, student selection, faculty selection and administrative matters must rest within the sponsoring institution.
	1-5	Programs must be sponsored by institutions of post-secondary education which are accredited by an agency recognized by the United States Department of Education.
	1-6	All arrangements with co-sponsoring or affiliated institutions must be formalized by means of written agreements which clearly define the roles and responsibilities of each institution involved.
	1-7	There must be an active advisory committee to serve as a liaison between the program, local dental and allied dental professionals and the community.
21		Dentists and dental assistants must be equally represented.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

Standard 2: Educational Program (131 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
5	2-1	Admission of students must be based on specific published criteria, procedures and policies that include a high-school diploma or its equivalent, or post- secondary degree.
3		Previous academic performance or other predictors of scholastic aptitude and ability must be utilized as criteria in selecting students with the potential to successfully complete the program.
5		Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability, scope of practice and employment opportunities for dental assistants.
3	2-2	Admission of students with advanced standing must be based on the same criteria required of all applicants admitted to the program.
3		The program must ensure that advanced standing credit awarded is based on equivalent didactic, laboratory and preclinical content and student achievement.
10	2-3	The program must demonstrate that student enrollment numbers are proportionate to the number of faculty, availability of appropriate classroom, laboratory, and clinical facilities, equipment, instruments, and supplies.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

11	2-4	The curriculum must be structured on the basis of, a minimum of, 900 instructional hours at the postsecondary level that includes 300 clinical practice hours.	
6	2-5	The curriculum must be designed to reflect the interrelationship of its biomedical sciences, dental sciences, clinical and behavioral sciences, preclinical and clinical practice.	
19		Curriculum must be sequenced to allow assimilation of foundational content in oral anatomy; basic chairside skills, medical emergencies, confidentiality and privacy regulations, infection control, sterilization, and occupational safety precautions, procedures and protocols prior to any patient contact or clinical experiences.	
14		Content must be integrated with continued elevation throughout the program.	
13		Curriculum must demonstrate sufficient depth, scope, sequence of instruction, quality and emphasis to ensure achievement of the curriculum's defined competencies and program's goals and objectives.	
	2-6	The dental assisting program must have a formal, written curriculum management plan, which includes:	
19		a.	at minimum, an annual curriculum review and evaluation process with input from faculty, students, administration and other appropriate sources;
22		b.	evaluation of the effectiveness of all courses as they support the program's goals and competencies;
19		c.	a defined mechanism for coordinating instruction among dental assisting program faculty.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

	2-7	Written documentation of each course in the curriculum must be provided to students at the start of each course and include:	
6		a.	The course title, number, description, faculty presenting course and contact information
3		b.	Course objectives including competency statements
1		b.	Course objectives (Effective August 11, 2023)
4		c.	Content outline including topics to be presented
3		c.	Course competencies (Effective August 11, 2023)
7		d.	Course schedule including learning and evaluation mechanisms for didactic, laboratory, and clinical learning experiences
1		d.	Content outline including topics to be presented (Effective August 11, 2023)
12		e.	Specific criteria for final course grade calculation
3		e.	Course schedule including learning and evaluation mechanisms for didactic, laboratory, and clinical learning experiences
4		f.	Specific criteria for final course grade calculation (Effective August 11, 2023)
	2-8	Objective student evaluation methods must be utilized to measure all defined course objectives to include:	
11		a.	Didactic, laboratory, preclinical and clinical content
13		b.	Specific criteria for measuring levels of competence for each component of a given procedure

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

5	2-9	Curriculum content must include didactic and laboratory/preclinical objectives in the following dental assisting skills and functions.	
10		Prior to performing these skills/functions in a clinical setting, students must demonstrate knowledge of, and laboratory/preclinical competence in the program facility.	
6		a.	Take/review and record medical and dental histories
3		b.	Take and record vital signs
5		c.	Assist with and/or perform soft tissue extra/intra oral examinations
1		d.	Assist with and/or perform dental charting
2		e.	Manage infection and hazard control protocol consistent with published professional guidelines
9		f.	Prepare tray set-ups for a variety of procedures and specialty areas
2		g.	Seat and dismiss patients
1		h.	Operate oral evacuation devices and air/water syringe
2		i.	Maintain clear field of vision including isolation techniques
1		j.	Perform a variety of instrument transfers
4		k.	Utilize appropriate chairside assistant ergonomics
8		l.	Provide patient preventive education and oral hygiene instruction
9		m.	Provide pre-and post-operative instructions prescribed by a dentist
3		n.	Maintain accurate patient treatment records
17		o.	Identify and respond to medical and dental emergencies

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

4	2-10	Curriculum content must include didactic and laboratory/preclinical objectives in the following dental assisting skills and functions.
7		Prior to performing these skills/functions in a clinical setting, students must demonstrate knowledge of, and laboratory/preclinical competence in the program facility.
4		a. Assist with and/or apply topical anesthetic and desensitizing agents
2		b. Assist with and/or place and remove rubber dam
5		c. Assist with and/or apply fluoride agents
3		d. Assist with and/or apply bases, liners, and bonding agents
7		e. Assist with and/or place, fabricate, and remove provisional restorations
2		f. Assist with and/or place and remove matrix retainers, matrix bands, and wedges
6		g. Assist with and/or remove excess cement or bonding agents
5		h. Assist with a direct permanent restoration
4		i. Fabricate trays, e.g., bleaching, mouthguard, custom
3		j. Preliminary impressions
9		k. Clean removable dental appliances
3	2-11	Where graduates of a CODA-accredited program are authorized to perform additional functions defined by the program's state-specific dental board or regulatory agency, and the program has chosen to include those functions in the program curriculum, the program must include content at the level, depth, and scope required by the state.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

2		Further, curriculum content must include didactic and laboratory/preclinical objectives for the additional dental assisting skills and functions.	
6		Students must demonstrate laboratory/preclinical competence in performing these skills in the program facility prior to clinical practice.	
1		Students must be informed of the duties for which they are trained in the educational program.	
	2-12	Students must demonstrate competence in the knowledge at the familiarity level in dental practice management:	
1		a.	Computer and dental software
		b.	Business ethics and jurisprudence
		c.	Business oral and written communications
		d.	Inventory systems and supply ordering
		e.	Maintenance and retention of business records
		f.	Management of patient information
		g.	Recall systems
1	2-13	The biomedical science aspect of the curriculum must include content at the in- depth level in bloodborne pathogens and hazard communications standards	
1		and content must be integrated throughout the didactic, preclinical, laboratory and clinical components of the curriculum.	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

	2-14	The dental science aspect of the curriculum must include content at the familiarity level in:	
		a.	Oral pathology
1		b.	General anatomy and physiology
1		c.	Microbiology
		d.	Nutrition
		e.	Pharmacology to include:
4		i.	Drug requirements, agencies, and regulations
3		ii.	Drug prescriptions
1		iii.	Drug actions, side effects, indications and contraindications
1		iv.	Common drugs used in dentistry
1		v.	Properties of anesthetics
1		vi.	Drugs and agents used to treat dental-related infection
5		vii.	Drug addiction including opioids and other substances.
1		f.	Patients with special needs including patients whose medical, physical, psychological, or social conditions make it necessary to modify normal dental routines.
1	2-15	The dental science aspect of the curriculum must include content at the in-depth level in oral anatomy.	
2	2-16	The curriculum must include content at the in-depth level in dental materials.	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

3		Students must demonstrate knowledge of the properties, and competence in the uses and manipulation of, dental materials to include:	
1		a.	Gypsum
3		b.	Restorative materials
1		c.	Dental cements
1		d.	Impression materials
0		e.	Acrylics and or thermoplastics
2		f.	Waxes
3		g.	Fabrication of casts, temporary crown and/or bridge
5		h.	Abrasive agents used to polish coronal surfaces and appliance
2		i.	Study casts/occlusal registrations
	2-17	The curriculum must include content at the in-depth level in dental radiology.	
		Students must demonstrate knowledge and skills to produce diagnostic dental image surveys on manikins.	
		Prior to exposing dental images on patients, students must demonstrate competence in:	
2		a.	Radiation health protection techniques
3		b.	Processing procedures
9		c.	Anatomical landmarks and pathologies
2		d.	Mounting survey of dental images

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

3		e.	Placing and exposing dental images on manikins
21	2-18		Prior to exposing dental images during extramural clinical assignments, students must demonstrate competence, under faculty supervision, in exposing diagnostically acceptable full-mouth dental image surveys on a minimum of two patients in the program, or contracted facility.
	2-19		The curriculum must include didactic content at the indepth level to include:
		a.	General dentistry
2		b.	Dental specialties
		c.	Chairside assisting
		d.	Dental-related environmental hazards
		e.	Preventive dentistry
4		f.	Management of dental and medical emergencies
	2-20		The program must demonstrate effectiveness in creating an academic environment that supports ethical and professional responsibility to include:
1		a.	Psychology of patient management and interpersonal communication
		b.	Legal and ethical aspects of dentistry

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

	2-21	The dental assisting program must provide opportunities and encourage students to engage in service and/or community-based learning experiences.	
3	2-22	Clinical experience assisting a dentist must be an integral part of the educational program designed to perfect students' competence in performing chairside assisting functions, rather than to provide basic instruction.	
4		Students must have a minimum of 300 hours of clinical experience.	
7	2-23	Each student must be assigned to two or more offices or clinics for clinical experience and assisting in general dentistry situations is emphasized.	
3	2-24	The major portion of the students' time in clinical assignments must be spent assisting with, or participating in, patient care.	
2	2-25	The dental assisting faculty must plan, approve, supervise, and evaluate the student's clinical experience,	
		and the following conditions must be met:	
2		a.	A formal agreement exists between the educational institution and the facility providing the experience
1		b.	The program administrator retains authority and responsibility for the student
		c.	Policies and procedures for operation of the facility are consistent with the philosophy and objectives of the dental assisting program

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

		d.	The facility accommodates the scheduling needs of the program
2		e.	Notification for termination of the agreement ensures that instruction will not be interrupted for currently assigned students
5		f.	Expectations and orientation are provided to all parties prior to student assignment
1	2-26		Students must maintain a record of their activities in each clinical assignment.
4	2-27		During the clinical phase of the program, program faculty must conduct seminars periodically with students for discussion of clinical experiences.
4	2-28		When clinical experience is provided in extramural facilities, dental assisting faculty must visit each facility to assess student progress.
2			Budgetary provisions must be made to support faculty travel.
14	2-29		Objective evaluation criteria must be utilized by faculty and office or clinical personnel to evaluate students' competence in performing specified procedures during clinical experience.

Standard 3: Administration, Faculty and Staff (25 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
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300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

	3-1	The program must be a recognized entity within the institution's administrative structure which supports the attainment of program goals.	
2	3-2	The program administrator must have a full-time commitment to the institution and an appointment which provides time for program operation, evaluation and revision.	
		The program administrator must have the authority and responsibilities for:	
3		a.	Budget preparation
3		b.	Fiscal administration
1		c.	Curriculum development and coordination
5		d.	Selection and recommendation of individuals for faculty appointment and promotion
11		e.	Supervision and evaluation of faculty
2		f.	Determining faculty teaching assignments and schedules
2		g.	Determining admissions criteria and procedures
		h.	Scheduling use of program facilities
2		i.	Development and responsibilities to maintain CODA accreditation compliance and documentation
1	3-3	The program administrator must be a Dental Assisting National Board "Certified Dental Assistant" or dentist licensed to practice in the state of the program location, with occupational experience in the application of	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)
CODA Summer 2026

		fourhanded dentistry principles, either as a dental assistant or working with a chairside assistant.
	3-4	The program administrator must have a minimum of a baccalaureate degree or higher.
		The program administrator must have had instruction in educational theory and methodology, e.g., curriculum development, educational psychology, test construction, measurement and evaluation.
15	3-5	Dental assisting faculty must have background in and current knowledge of dental assisting, the specific subjects they are teaching and educational theory and methodology consistent with teaching assignment, e.g., curriculum development, educational psychology, test construction, measurement and evaluation.
1	3-6	Faculty providing didactic instruction must have earned at least a baccalaureate degree.
1	3-6	Faculty providing didactic instruction must have earned at least a baccalaureate degree within three years of the date of initial hire as a didactic faculty. (Effective August 11, 2023)
7	3-7	Laboratory, preclinical and clinical faculty must hold any current dental assisting credential required by the state in addition to a Dental Assisting National Board “Certified Dental Assistant” credential.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

12	3-8	The number of faculty positions must be sufficient to implement the program's goals and objectives.
7		The faculty/student ratio during clinical and radiography (clinical and laboratory) sessions must not exceed one instructor to six students.
1		During laboratory and preclinical instruction in dental materials and chairside assisting procedures, the faculty/student ratio must not exceed one instructor for each twelve students.
1	3-9	Opportunities must be provided for program faculty to continue their professional development.
	3-10	Faculty must be ensured a form of governance that allows participation in the program and institution's decision-making process.
	3-11	A defined evaluation process must exist that ensures objective measurement of the performance of each faculty member.
6	3-12	Institutional support personnel must be assigned to facilitate program operation.

Standard 4: Educational Support Services (46 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
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300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

3	4-1	The program must provide adequate and appropriately maintained facilities to support the purpose/mission of the program and which are in conformance with applicable regulations.	
	4-2	A clinical facility must be available for students to obtain required experience with faculty supervision.	
	4-3	Each treatment area must contain functional equipment including:	
		a.	Power-operated chair(s) for treating patients in a supine position
1		b.	Dental units and mobile stools for the operator and the assistant which are designed for the application of current principles of dental assistant utilization
		c.	Air and water syringe
		d.	Adjustable dental light
1		e.	High and low speed handpieces
		f.	Oral evacuating equipment
		g.	Work surface for the chairside assistant
	4-4	Each treatment area must accommodate an operator and a patient as well as the student and faculty.	
2	4-5	The sterilizing area must include sufficient space for preparing, sterilizing and storing instruments.	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)
CODA Summer 2026

	4-6	Instruments and appropriate models and armamentaria must be provided to accommodate students' needs in learning to identify, exchange, prepare procedural trays and assist in procedures including:	
1		a.	Diagnostic
3		b.	Operative
5		c.	Surgical
5		d.	Periodontal
6		e.	Orthodontic
3		f.	Removable and fixed prosthodontics
6		g.	Endodontic
1	4-7	A radiography facility must accommodate initial instruction and practice required for students to develop competence in exposing and processing dental images with faculty supervision.	
1	4-8	Each radiography area must provide equipment for faculty supervision and effective instruction to accommodate several students simultaneously that include:	
1		a.	Dental radiography units which meet applicable regulations
1		b.	Radiographic teaching manikins
1		c.	Radiographic view boxes and/or monitors

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

2		d.	Processing units with darkroom capacity or digital equipment
		e.	Multiple sets of image receptor holding devices
		f.	Radiation-monitoring devices are provided for students and faculty (according to state regulations)
1		g.	Lead aprons and cervical collars for each unit (according to state regulations)
		h.	Counter with sink
		i.	Dental chair or unit
4	4-9		A sufficient multipurpose laboratory facility must be provided for effective instruction which allows for required laboratory activities and can accommodate all scheduled students simultaneously.
2			There must be an appropriate number of student stations, equipment, supplies, instruments and space for individual student performance of laboratory procedures with faculty supervision.
1	4-10		It is preferable and, therefore recommended, that the educational institution provide physical facilities and equipment which are adequate to permit achievement of the program's objectives. If the institution finds it necessary to contract for use of an existing facility for laboratory, preclinical and/or clinical education, then the following conditions must be met in addition to all existing standards.
1		a.	There is a formal agreement between the educational institution and agency or institution providing the facility
1		b.	The program administrator retains authority and responsibility for instruction

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)
CODA Summer 2026

1		c.	All students receive instruction and practice experience in the facility
1		d.	Policies and procedures for operation of the facility are consistent with the philosophy and objectives of the educational program
1		e.	Availability of the facility accommodates the scheduling needs of the program
1		f.	Notification for termination of the contract ensures that instruction will not be interrupted for currently enrolled students
2		g.	Instruction is provided and evaluated by calibrated dental assisting program faculty.
	4-11		Classroom space must be provided for, and be readily accessible to, the program.
1	4-12		Office space must be provided for the program administrator and faculty.
1	4-13		The program must provide adequate and appropriately maintained learning resources to support the goals and objectives of the program.
1	4-14		There must be specific written due process policies and procedures for adjudication of academic and disciplinary complaints, which parallel those established by the sponsoring institution.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)
CODA Summer 2026

1	4-15	The program must provide a mechanism to facilitate student remediation when indicated.
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Standard 5: Health and Safety Provisions (12 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
3	5-1	The program must document its compliance with institutional policy and applicable local, state and federal regulations and/or guidelines related to health and safety.
		a. Policies must include:
2		i) radiation hygiene and protection,
3		ii) ionizing radiation,
		iii) hazardous materials, and
4		iv) bloodborne and infectious diseases
4		b. Policies must be provided to all students, faculty and appropriate support staff and continuously monitored for compliance.
8		c. Policies on bloodborne and infectious disease(s) must be made available to applicants for admission and patients.
1	5-2	Students, faculty and appropriate support staff must be encouraged to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella, hepatitis B and tuberculosis prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk to patients and dental personnel.

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

3	5-3	The program must establish and enforce preclinical/clinical/laboratory protocols and mechanisms to ensure the management of emergencies;
1		these protocols must be provided to all students, faculty and appropriate staff.
5	5-4	All students, faculty and support staff must be currently certified in basic life support procedures, including cardiopulmonary resuscitation with an Automated External Defibrillator (AED), prior to the direct provision of patient care.

Standard 6: Patient Care Services (6 Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance	
	6-1	The program must conduct a formal system of quality assurance for the patient care program that demonstrates evidence of:	
1		a.	Standards of care that are patient-centered, focused on comprehensive care and written in a format that facilitates assessment with measurable criteria
2		b.	An ongoing review of a representative sample of patients and patient records to assess the appropriateness, necessity and quality of the care provided.
	6-2	The program must develop and distribute to appropriate students, faculty, staff and each patient a written statement of patients' rights.	

300: Informational Report of Frequency of Citings

Appendix 1

Dental Assisting Review Committee (DA RC)

CODA Summer 2026

	6-3	Patients accepted for dental care must be advised of the scope of dental care available at the dental assisting program facilities.
		Patients must also be advised of their treatment needs and appropriately referred for the procedures that cannot be provided by the program.