

ACCREDITATION STANDARDS FOR ADVANCED DENTAL EDUCATION PROGRAMS IN ORAL AND MAXILLOFACIAL SURGERY

Frequency of Citings Based on Required Areas of Compliance

Total Number Programs Evaluated: 81
February 12, 2021 through October 31, 2024

STANDARD 1 – INSTITUTIONAL COMMITMENT/PROGRAM EFFECTIVENESS – 33

Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
1	1	The financial resources must be sufficient to support the program's stated goals and objectives.
1	1-6	All arrangements with major and minor activity sites, not owned by the sponsoring institution, must be formalized by means of current written agreements that clearly define the roles and responsibilities of the parties involved.
1	1-7	Documentary evidence of agreements, for major and minor activity sites not owned by the sponsoring institution, must be available. The following items must be covered in such inter-institutional agreements: a. Designation of a single program director; b. The teaching staff; c. The educational objectives of the program; d. The period of assignment of residents; and e. Each institution's financial commitment.

STANDARD 2 – PROGRAM DIRECTOR & TEACHING STAFF – 21 Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
	2-1	Program Director: The program must be directed by a single responsible individual who is a full time faculty member as defined by the institution. The responsibilities of the program director must include:
4	2-1.3	The responsibilities of the program director must include: Perform periodic, at least annual, written evaluations of the teaching staff.
1	2-1.6	Maintenance of appropriate records of the program, including resident and patient statistics, institutional agreements, and resident records.

2	2-2.2	In addition to the full time program director, the teaching staff must have at least one full time equivalent oral and maxillofacial surgeon as defined by the institution per each authorized senior resident position.
1	2-2.3	Eligible oral and maxillofacial surgery members of the teaching staff, with greater than a .5 FTE commitment appointed after January 1, 2000, who have not previously served as teaching staff, must be diplomates of the American Board of Oral and Maxillofacial Surgery or in the process of becoming board certified. Foreign trained faculty must be comparably qualified.

STANDARD 3 – FACILITIES AND RESOURCES – 13 Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
1	3	All residents, faculty and support staff involved in the direct provision of patient care must be continuously recognized/certified in basic life support procedures, including cardiopulmonary resuscitation.

STANDARD 4 – CURRICULUM AND PROGRAM DURATION – 125 Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
1	4-3	When assigned to a required rotation on another service (surgery, medicine, anesthesiology, and eight weeks of additional off-service elective), the oral and maxillofacial surgery resident must devote full-time to the service and participate fully in all the teaching activities of the service, including regular on-call responsibilities.
2	4-3.1	The combined assignment must be for a minimum of 32 weeks. A minimum of 20 weeks must be on the anesthesia service and should be consecutive.
2	4-3.3	Other Rotations: Eight additional weeks of clinical surgical or medical education must be assigned.
1	4-3.3	Other Rotations: These must be exclusive of all oral and maxillofacial surgery service assignments.
1	4-4	The majority of teaching sessions must be presented by the institutional teaching staff.
1	4-6	Resident competency in physical diagnosis must be documented prior to the completion of the program.

1	4-8.2	The training program must include didactic and clinical experience in the comprehensive management of temporomandibular disorders and facial pain.
3	4-9.1	The cumulative anesthetic experience of each graduating resident must include administration of general anesthesia/deep sedation for a minimum of 300 cases. This experience must involve care for 50 patients younger than 13. A minimum of 150 of the 300 cases must be ambulatory anesthetics for oral and maxillofacial surgery outside of the operating room.
6	4-11	For each authorized final year resident position, residents must perform 175 major oral and maxillofacial surgery procedures on adults and children, documented by at least a formal operative note. For the above 175 procedures there must be at least 20 procedures in each category of surgery. The categories of major surgery are defined as: 1) trauma 2) pathology 3) orthognathic surgery 4) reconstructive and cosmetic surgery. Sufficient variety in each category, as specified below, must be provided.
1	4-11.2	In the pathology category, experience must include management of temporomandibular joint pathology and at least three other types of procedures.
1	4-11.3	In the orthognathic category, procedures must include correction of deformities in the mandible and the middle third of the facial skeleton
3	4-12	Accurate and complete records of the amount and variety of clinical activity of the oral and maxillofacial surgery teaching service must be maintained. These records must include a detailed account of the number and variety of procedures performed by each resident. Records of patients managed by residents must evidence thoroughness of diagnosis, treatment planning and treatment

STANDARD 5 – ADVANCED DENTAL EDUCATION RESIDENTS – 31 Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
	5-4	The program director must provide a final written evaluation of each resident upon completion of the program.
1	5-4	The evaluation must include a review of the resident's performance during the training program, and must state that the resident has demonstrated competency to practice independently.

	5-4	The final evaluation must be a summative assessment demonstrating a progression of formative assessments throughout the residency program.
	5-4	This evaluation must be included as part of the resident's permanent record and must be maintained by the institution.
1	5-4	A copy of the final written evaluation must be provided to each resident upon completion of the residency.

STANDARD 6 – RESEARCH – 4 Required Areas of Compliance

Noncompliance Citings	<u>Accreditation Standard</u>	Required Area of Compliance
2	6-2	The program must provide instruction in research design and analysis