

Background

At its Winter 2015 meeting, CODA directed that each Review Committee (RC) review a draft of its discipline-specific Annual Survey Curriculum Section during the Winter meeting in the year the survey will be distributed. CODA further suggested that each RC review aggregate data of its discipline-specific Annual Survey Curriculum Section (ASCS), as an informational report, when the materials are available following data collection and analysis. CODA noted that all survey data is considered confidential at the programmatic level.

The Curriculum Section of CODA's Annual Survey is conducted for oral and maxillofacial pathology programs in alternate years. The next Curriculum Section will be conducted in August/September 2026. The draft Curriculum Section is provided in **Appendix 1**.

Summary

The RC on Oral and Maxillofacial Pathology Education is requested to review the draft Curriculum Section of its specific discipline (**Appendix 1**).

Recommendation:

Prepared by: Taylor Weast, manager, Advanced Dental Education

Part II - Oral and Maxillofacial Pathology Curriculum Section

Part II of the survey is confidential. Any reports from this section will not identify individual programs by name.

21. Instruction in advanced oral and maxillofacial pathology programs can be provided in a variety of settings. Please indicate the total number of clock hours each student/resident spends in formal courses, lectures or seminars, and on rotation to other services receiving instruction in the following subject areas during the entire program.

	Formal Courses	Lectures & Seminars	Rotations
a. Pathology	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Anatomy	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Microbiology	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Physiology	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Biochemistry	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Clinical oral and maxillofacial pathology	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Other, please specify <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

22. What is the average number of hours devoted by students/residents to each of the following areas during the entire program?

	Hours
a. Surgical oral pathology	<input type="text"/>
b. Oral exfoliative cytology	<input type="text"/>
c. Patient evaluation and management	<input type="text"/>
d. Anatomic pathology	<input type="text"/>
e. Laboratory medicine	<input type="text"/>
f. Radiology	<input type="text"/>
g. Research/scholarly activity	<input type="text"/>

Use this space to enter comments or clarifications for your answers for Questions 21-22.

Part II - Oral and Maxillofacial Pathology Curriculum Section (continued)

Part II of the survey is confidential. Any reports from this section will not identify individual programs by name.

23. How many autopsies were performed by all students/residents enrolled in the program during the 2023-24 academic year?

24. How many oral pathology specimens were accessioned for histopathologic diagnosis during the 2023-24 academic year?

25. How many patients were seen and managed in the clinical oral and maxillofacial pathology practice during the 2023-24 academic year?

26. How many oral exfoliative cytology specimens were accessioned by the oral pathology diagnostic services during the 2023-24 academic year?

27. How often are conferences/seminars with the oral pathology diagnostic laboratory service conducted?

- ☐ Daily
- ☐ Weekly
- ☐ Biweekly (i.e., every other week)
- ☐ Monthly
- ☐ Bimonthly (i.e., every other month)
- ☐ Quarterly
- ☐ Other, please specify

Use this space to enter comments or clarifications for your answers for Questions 23-27.

Part II - Oral and Maxillofacial Pathology Curriculum Section (continued)

Part II of the survey is confidential. Any reports from this section will not identify individual programs by name.

28. Below are hospital service rotations. Please indicate whether the rotation is required, elective, or a combined assignment (including both

required and elective components). Also, identify the total length of the rotation (in weeks) and the number of hours per week spent by students/ residents on the rotation.

If Type of assignment is Not applicable, leave the Length of rotation and Hours per week columns blank.

	Type of assignment				Length of rotation	Hours
	Required	Elective	Combined	Not applicable	(in weeks)	per week
a. General anatomic pathology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
b. Clinical laboratory	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
c. Radiology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
d. Autopsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
e. Dermatology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
f. Dermatopathology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
g. Microbiology / infectious diseases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
h. Immunopathology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
	Required	Elective	Combined	Not applicable	(in weeks)	per week
i. Oncology: surgical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
j. Oncology: medical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
k. Oncology: radiation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
l. Cyopathology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
m. Hematopathology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
n. Otorhinolaryngology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
o. Medicine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
	Required	Elective	Combined	Not applicable	(in weeks)	per week

28 (continued). Please identify hospital rotations not listed in lines a-o above and indicate whether the rotation is required, elective, or a combined assignment (including both required and elective components). Also, identify the total length of the rotation (in weeks) and the number of hours per week spent by students/residents on the rotation.
If any lines do not apply, leave the entire row(s) blank.

	Other rotation (please specify)	Type of assignment			Length of rotation (in weeks)	Hours per week
		Required	Elective	Combined		
p.	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
q.	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
r.	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>

29. Is the director of the diagnostic laboratory services board certified by the American Board of Oral and Maxillofacial Pathology?

- ☐ Yes
☐ No

30. How many formal documented student/resident evaluations are completed per year by the program director and/or his or her designee?

Use this space to enter comments or clarifications for your answers for Questions 28-30.

Background

Summer 2025 Review Committee (RC) and Commission on Dental Accreditation (CODA) Meetings: At its Summer 2025 meeting, the Review Committee for Oral and Maxillofacial Pathology Education Programs (OMP RC) discussed new business related to potential revisions to the Accreditation Standards for Advanced Dental Education Programs for Oral and Maxillofacial Pathology Education related to digital pathology in oral and maxillofacial pathology training programs and related to Standard 3-5 (active clinical facility supervision). Following discussion, the OMP RC recommended formation of an Ad Hoc Committee of OMP RC members to further review the Standards for potential revisions.

At its Summer 2025 meeting, CODA concurred with the recommendation of the OMP RC and directed the formation of an Ad Hoc Committee of OMP RC members to review the Accreditation Standards for Advanced Dental Education Programs for Oral and Maxillofacial Pathology Education for potential revision(s), with a report to the OMP RC and CODA in Winter 2026.

October 2025 Meeting of the Ad Hoc Committee: In accordance with the prior directives of CODA, an Ad Hoc Committee was established. The Ad Hoc Committee met on October 23, 2025. The following OMP RC members attended the Ad Hoc Committee meeting: Dr. Indraneel Bhattacharyya (chair), Dr. Leticia Ferreira Cabido, Dr. Robert Kelsch, and Dr. Dara Rogers. Ms. Taylor Weast, manager, Advanced Dental Education, Ms. Michele Kendall, senior project assistant, and Dr. Kathleen Hinshaw, senior director, CODA attended the meeting.

The Ad Hoc Committee first discussed the need for inclusion of digital pathology in oral and maxillofacial training programs. The oral and maxillofacial pathology board/certifying examinations currently have a digital component, and the Ad Hoc Committee agreed that the Accreditation Standards should reflect this. The Committee further discussed whether exposure to digital pathology was sufficient, or if additional experience is necessary. Concerns about institutional access to digital scanners were raised, and the Committee discussed ways that a student/resident could gain exposure to digital pathology without access to a digital scanner. After further discussion, the Committee agreed that a revision to Standard 4-2.3 to add “digital/virtual pathology” would be appropriate. The proposed revision to Oral and Maxillofacial Pathology Standard 4-2.3 is found in **Appendix 1**.

The Ad Hoc Committee also discussed Standard 3-5 (active clinical supervision), as the Ad Hoc Committee believed that the language of the Standard may not clearly communicate the intention related to “adequate supervision”. The word “adequate” is subject to interpretation, and the Ad Hoc Committee discussed concerns about the student/resident clinical experience if the supervision is not performed by an oral and maxillofacial pathologist. The Ad Hoc Committee also discussed concerns that institutions may not have access to an oral and maxillofacial pathologist to serve as a supervisor at a facility, however the Ad Hoc Committee believes it is important for clinical experiences to be supervised by an oral and maxillofacial pathologist to ensure appropriate supervision of students/residents. After further discussion, the Committee agreed that a revision to Standard 3-5 to add the language “oral and maxillofacial pathologist” would be sufficient to clarify the requirement of the standard. The proposed revision to Oral and Maxillofacial Pathology Standard 3-5 is found in **Appendix 1**.

Summary

At this meeting, the OMP RC and CODA are asked to consider the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Pathology (**Appendix 1**). If

revisions to the Accreditation Standards are proposed, CODA may wish to circulate the revisions to the communities of interest for review and comment.

Recommendation:

Prepared by: Taylor Weast, manager, Advanced Dental Education

Commission on Dental Accreditation

Proposed Revisions to Standards 3-5 and 4-2.3, Submitted by the Ad Hoc Committee for consideration by the Review Committee on Oral and Maxillofacial Pathology Education and Commission on Dental Accreditation at the Winter 2026 Commission meetings.

Additions are Underlined;
~~Strikethroughs~~ indicate Deletions

Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Pathology

STANDARD 3 - FACILITIES AND RESOURCES

Institutional facilities and resources **must** be adequate to provide the educational experiences and opportunities required to fulfill the needs of the educational program as specified in these Standards. Equipment and supplies for use in managing medical emergencies **must** be readily accessible and functional.

Intent: *The facilities and resources (e.g.; support/secretarial staff, allied personnel and/or technical staff) should permit the attainment of program goals and objectives. To ensure health and safety for patients, students/residents, faculty and staff, the physical facilities and equipment should effectively accommodate the clinic and/or laboratory schedule.*

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 bloodborne and infectious diseases. Policies **must** be provided to all students/residents, faculty and appropriate support staff and continuously monitored for compliance. Additionally, policies on bloodborne and infectious diseases **must** be made available to applicants for admission and patients.

Intent: *The program may document compliance by including the applicable program policies. The program demonstrates how the policies are provided to the students/residents, faculty and appropriate support staff and who is responsible for monitoring compliance. Applicable policy states how it is made available to applicants for admission and patients should a request to review the policy be made.*

Students/Residents, faculty and appropriate support staff **must** be encouraged to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella and hepatitis B, prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk to patients and dental personnel.

Intent: *The program should have written policy that encourages (e.g., delineates the advantages of) immunization of students/residents, faculty and appropriate support staff.*

All students/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.

Intent: *Continuously recognized/certified in basic life support procedures means the appropriate individuals are currently recognized/certified.*

The use of private office facilities as a means of providing clinical experiences in advanced dental education is only approved when the discipline has included language that defines the use of such facilities in its discipline-specific standards.

Intent: *Required clinical experiences do not occur in private office facilities. Practice management and elective experiences may be undertaken in private office facilities.*

- 3-1** An advanced oral and maxillofacial pathology training program **must** provide access for the student/resident to an active and well-organized radiographic imaging facility.
- 3-2** An advanced oral and maxillofacial pathology training program **must** provide access to a licensed, active and well-organized diagnostic biopsy service.
- 3-2.1** The director of the diagnostic biopsy service **must** be board certified and registered by the American Board of Oral and Maxillofacial Pathology.
- 3-2.2** The oral and maxillofacial pathology training program **must** maintain adequate files, reports and an index system of diagnosed materials so that cases may be retrieved and studied.
- 3-3** The oral and maxillofacial pathology biopsy service **must** have sufficient space and equipment, adequate desk space, a microscope and some degree of privacy for the student/resident.
- 3-4** There **must** be sufficient technical and support personnel so that the service will function efficiently.
- 3-5** An advanced oral and maxillofacial pathology training program **must** have an active clinical facility. The student/resident **must** have access to the facility with adequate supervision by an oral and maxillofacial pathologist for the comprehensive examination and management of patients.

Intent: *The facility should not be a traditional screening clinic for predoctoral dental patients, but a specialized clinic which focuses on the evaluation and management of patients with diseases affecting the oral and maxillofacial region.*

STANDARD 4 – CURRICULUM AND PROGRAM DURATION

The advanced dental education program **must** be designed to provide special knowledge and skills beyond the D.D.S. or D.M.D. training and be oriented to the accepted standards of the discipline's practice as set forth in specific standards contained in this document.

Intent: *The intent is to ensure that the didactic rigor and extent of clinical experience exceeds pre-doctoral, entry level dental training or continuing education requirements and the material and experience satisfies standards for the discipline.*

Advanced dental education programs **must** include instruction or learning experiences in evidence-based practice. Evidence-based dentistry is an approach to oral health care that requires the judicious integration of systematic assessments of clinically relevant scientific evidence, relating to the patient's oral and medical condition and history, with the dentist's clinical expertise and the patient's treatment needs and preferences.

Examples of Evidence to demonstrate compliance may include:

- Formal instruction (a module/lecture materials or course syllabi) in evidence-based practice
- Didactic Program course syllabi, course content outlines, or lecture materials that integrate aspects of evidence-based practice
- Literature review seminar(s)
- Multidisciplinary Grand Rounds to illustrate evidence-based practice
- Projects/portfolios that include critical reviews of the literature using evidence-based practice principles (or "searching publication databases and appraisal of the evidence")
- Assignments that include publication database searches and literature appraisal for best evidence to answer patient-focused clinical questions.

The level of discipline-specific instruction in certificate and degree-granting programs **must** be comparable.

Intent: *The intent is to ensure that the students/residents of these programs receive the same educational requirements as set forth in these Standards.*

Documentation of all program activities **must** be ensured by the program director and available for review.

If an institution and/or program enrolls part-time students/residents, the institution/program **must** have guidelines regarding enrollment of part-time students/residents. Part-time students/residents **must** start and complete the program within a single institution, except when the program is discontinued. The director of an accredited program who enrolls students/residents on a part-time basis **must** ensure that: (1) the educational experiences, including the clinical experiences and responsibilities, are the same as required by full-time students/residents; and (2) there are an equivalent number of months spent in the program.

4-1 The program must provide training in application to the medical sciences.

Examples of evidence to demonstrate compliance may include:

- Formal courses taken for University credit; and
- Courses, seminars, conferences, reading assignments, hospital rounds and assignment in the laboratories which are carefully organized; the objectives and content should be carefully planned or reviewed by the program director to avoid deficiencies and unnecessary repetition.

- 4-1.1** Instruction must provide comprehensive understanding of pathology as well as understanding and application of the biomedical and clinical sciences, as these relate to patient care.

Intent: Instruction in other areas such as research and teaching methodologies, experimental design, quality assurance, and laboratory information systems is also important.

- 4-1.2** A program must not contain a preponderance of didactic course work.

Intent: The amount of time devoted to didactic course work should be carefully evaluated in relation to the total program.

4-2 SURGICAL ORAL PATHOLOGY

- 4-2.1** Students/Residents must study and assume initial major responsibility for reports and diagnosis on an adequate volume of surgical specimens of sufficient variety to obtain competence in surgical oral and maxillofacial pathology.

Intent: Surgical oral and maxillofacial pathology comprises an essential and important aspect of an advanced dental education program in oral and maxillofacial pathology. Competence in this area can be accomplished in only an active, professional, licensed and quality-oriented laboratory service that processes a volume of human material that assures student/resident exposure to the spectrum of diseases encountered in the oral regions.

- 4-2.2** Although quality of education is stressed, the laboratory must receive at least 2000 oral and maxillofacial pathology accessions of adequate variety annually.

- 4-2.3** Students/residents must have adequate exposure to sufficient seminar materials, special collections, exchange slides, digital/virtual pathology, and file materials to gain experience with diagnosis of unusual and difficult lesions.

- 4-2.4** Surgical oral and maxillofacial pathology case conferences must be held at least weekly, but daily conferences are recommended.

- 4-2.5** Students/residents **must** become familiar with administrative and licensing procedures associated with directorship of laboratories.