

## **REPORT OF THE REVIEW COMMITTEE ON OROFACIAL PAIN EDUCATION TO THE COMMISSION ON DENTAL ACCREDITATION**

Committee Chair: Dr. Joseph Cohen. Committee Members: Dr. Steven Bender, Dr. Reny de Leeuw, and Dr. Robert Windsor. Dr. Bessie Katsilometes attended a portion of the meeting. Guests (Open Session Only, Virtual): Dr. Sheila Brear, chief learning officer, American Dental Education Association (ADEA) attended the policy portion of the meeting. Staff Members: Ms. Peggy Soeldner, manager, Advanced Dental Education; Dr. Yesenia Ruiz, manager, Advanced Dental Education; and Ms. Bridget Blackwood, senior project assistant, Commission on Dental Accreditation (CODA). The meeting of the Review Committee on Orofacial Pain Education (OFP RC) was held on July 8, 2024 via a virtual meeting.

### **CONSIDERATION OF MATTERS RELATED TO OROFACIAL PAIN EDUCATION**

**Informational Report on Frequency of Citings of Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain (p. 1700)**: The Review Committee on Orofacial Pain Education (OFP RC) considered the annual report on the frequency of citings of the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain implemented on July 1, 2017. The OFP RC noted that 11 orofacial pain site visits were conducted during the period of July 1, 2017 through October 31, 2023. At the time of this report, there were no (0) areas of non-compliance cited. The Commission will continue to receive reports annually summarizing the updated data on the frequency of citings of individual Standards.

**Recommendation**: This report is informational in nature and no action is required.

**Consideration of Proposed Revisions to Accreditation Standards for Advanced Dental Education Programs Related to Sponsoring Organization and Authority to Operate (p. 1701)**: At its Winter 2022 meeting, the Commission on Dental Accreditation (CODA) directed the formation of an Ad Hoc Committee of all advanced dental education Commissioners to consider the changing landscape of health care delivery centers that may sponsor advanced dental education programs. The Ad Hoc Committee, which met on December 5, 2022 and January 25, 2023, was charged with two (2) primary considerations: 1) the topic of institutional sponsor, whether a sponsor is an academic institution, hospital, or health care organization, and 2) review of the standard found in some advanced dental education disciplines that requires the sponsor to have proper chartering/licensure to operate and offer instruction leading to a degree, diploma or certificate with recognized education validity. A summary of the work of the Ad Hoc Committee and Summer 2023 Review Committee and Commission review is found in **Policy Report p. 1701**.

At its Summer 2024 meeting, the Review Committee on Orofacial Pain Education (OFP RC) considered the proposed revision to the Accreditation Standards related to the Definition of Terms for Health Care Organization and to chartering and licensure to operate (**Appendix 1**,

**Policy Report p. 1701).** The Review Committee also considered all comments received by the Commission prior to the June 1, 2024 deadline (**Appendices 2 and 3, Policy Report p. 1701**). The Review Committee noted that the Commission received no (0) comments at the virtual hearing in conjunction with the 2023 ADA Annual Meeting. The Commission received one (1) comment at the virtual hearing in conjunction with the 2024 ADEA Annual Session. The Commission office received one (1) written comment prior to the June 1, 2024 deadline.

The Review Committee concluded that the proposed revisions provide further clarification of the types of institutions that may sponsor advanced dental education programs and requirements related to the authority to operate and should have no impact on orofacial pain education programs. The Review Committee also considered potential revisions developed by Commission staff, provided at the meeting, to address the general concerns expressed among all comments received for the advanced dental education Standards. The comments received indicated that additional organizations may fulfill the requirement for an institutional accreditor (e.g. Health Resources and Services Administration Operational Site Visit), and there is a need to further clarify the method by which a program demonstrates its authority to operate and authority to confer a certificate and/or degree.

Following consideration, the Review Committee on Orofacial Pain Education believed that the proposed Standards found in **Appendix 1**, which include additional wording to address the general comments received by CODA, should be implemented January 1, 2025, and all related Commission documents be updated accordingly. The Review Committee did not believe that circulation of the revision was warranted since the additional revisions further clarified the intent of the Standards.

**Recommendation:** It is recommended that the Commission on Dental Accreditation adopt the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain related to the Definition of Terms for Health Care Organization and to chartering and licensure to operate (**Appendix 1**) and direct revision of all related documents, for implementation January 1, 2025.

**Consideration of Proposed Revisions to Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain (p. 1702):** Through New Business at its Winter 2024 meeting, the Review Committee on Orofacial Pain Education (OFP RC) discussed concerns received anecdotally that baseline skills possessed by residents entering orofacial pain programs may be lacking. The OFP RC learned that, upon entering a program, all orofacial pain residents may not be competent in the baseline skills required for adequately and safely treating all orofacial pain conditions, procedures and techniques. Additionally, it is believed these skills are not consistently being taught in CODA-accredited programs. Since orofacial pain is one of the newest dental disciplines accredited by the Commission, the identification of such deficiencies and the need for additional curriculum requirements, and ultimately revision to Accreditation Standards, has been a dynamic process as accredited programs have matured and developed.

The OFP RC believed that an in-depth study of the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain was warranted to identify areas of baseline clinical training that may require modification or addition, to ensure these areas are included in all programs' curricula and that graduates are consistently and sufficiently trained upon completion of the program. Therefore, the OFP RC concluded further study of the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain was warranted. Further, the OFP RC believed the study and consideration of possible Accreditation Standards revisions should be conducted with a report to the Summer 2024 meeting of the Commission.

At its Winter 2024 meeting, the Commission considered the recommendation of the OFP RC and directed the Review Committee on Orofacial Pain Education to meet prior to the Summer 2024 meetings for further discussion and consideration of possible revision to the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain, particularly related to the baseline competencies for the discipline, with a report to the Summer 2024 meeting of the Commission.

At its Summer 2024 meeting, the OFP RC considered the report of the May 13, 2024 meeting of the OFP RC and proposed revisions to Standard 2-11 (Clinical Sciences) of the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain found in (**Policy Report p. 1702**). The OFP RC identified additional areas within the proposed revisions to Standard 2-11 that warrant revision to further clarify and ensure consistency throughout the language of Standard 2-11.

The OFP RC discussed whether the proposed revisions should be circulated to the communities of interest and concluded that circulation to the communities of interest for a period of one (1) year is warranted to allow programs adequate time to provide comment on the proposed changes and ensure compliance with the revisions should the revisions be adopted by CODA at a later date. The OFP RC recommended the revisions to Standard 2-11 (Clinical Sciences) found in **Appendix 2** be circulated to the communities of interest for review and comment for one (1) year, with Hearings conducted in conjunction with the October 2024 American Dental Association (ADA) Annual Meeting, March 2025 American Dental Education Association (ADEA) Annual Session. Additionally, the OFP RC believed it would be important to conduct a virtual Hearing during the 2025 meeting of the American Academy of Orofacial Pain in order to obtain input from program directors. Due to the virtual nature of the Hearings, there would be no budget impact on the Commission. Comments received could be considered by the Review Committee and Commission at its Summer 2025 meetings.

**Recommendation:** It is recommended that the Commission on Dental Accreditation direct circulation of the proposed revisions to Standard 2-11, Clinical Sciences, of the Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain found in **Appendix 2**, to the communities of interest for review and comment for one (1) year, with Hearings conducted in conjunction with the October 2024 American Dental Association (ADA) Annual Meeting, March 2025 American Dental Education Association (ADEA) Annual Session, and 2025 American Academy of Orofacial Pain

(AAOP) Annual Meeting, with comments reviewed by the Review Committee and Commission at the Summer 2025 meetings.

**CONSIDERATION OF MATTERS RELATING TO  
MORE THAN ONE REVIEW COMMITTEE**

Matters related to more than one review committee are included in a separate report.

**CONSIDERATION OF MATTERS RELATED TO ACCREDITATION STATUS**

Matters related to accreditation status of programs are included in a separate report.

Respectfully submitted,

Dr. Joseph Cohen  
Chair, Review Committee on Orofacial Pain Education

# Commission on Dental Accreditation

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At its Summer 2023 meeting, the Commission directed that the proposed revisions to Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain be distributed to the appropriate communities of interest for review and comment, with comment due June 1, 2024, for review at the Summer 2024 Commission meeting.

**This document represents the proposed revisions based upon review of comment received from communities of interest from August 11, 2023 to June 1, 2024.**

**This document will be considered by the Commission in Summer 2024.**

Revisions in RED, circulated August 11, 2023 to June 1, 2024

Revisions in GREEN, additions following consideration by the Review Committee in Summer 2024

Additions are Underlined;  
~~Strikethroughs~~ indicate Deletions

## Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain

**PROPOSED REVISIONS TO ACCREDITATION STANDARDS FOR ADVANCED  
DENTAL EDUCATION PROGRAMS RELATED TO SPONSORING INSTITUTION  
AND AUTHORITY TO OPERATE**

Additions are underlined; Deletions are ~~stricken~~

**PROPOSED REVISIONS FOR ALL ADVANCED DENTAL EDUCATION  
STANDARDS:**

**Definition of Terms:**

**Health Care Organization:** A Federally Qualified Health Center (FQHC), Indian Health Service (IHS), Veterans Health Administration system (VA), or academic health center/medical center/ambulatory care center (both public and private) that is accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS).

**PROPOSED REVISIONS FOR STANDARD 1-1 FOR ADVANCED EDUCATION IN GENERAL DENTISTRY, ORAL MEDICINE, AND OROFACIAL PAIN:**

Each sponsoring or co-sponsoring United States-based educational institution, hospital or health care organization **must** be accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS) or receive regular on-site inspections through the Health Resources and Services Administration Operational Site Visit (HRSA-OSV) process.

United States military programs not sponsored or co-sponsored by military medical treatment facilities, United States-based educational institutions, hospitals or health care organizations accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS) **must** demonstrate successful achievement of Service-specific organizational inspection criteria.

**Examples of evidence to demonstrate compliance may include:**

- Accreditation certificate or current official listing of accredited institutions from a United States Department of Education recognized accreditation organization
- Evidence of successful achievement of Service-specific organizational inspection criteria
- Accreditation certificate or current official listing of accredited institution from an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). For example: Accreditation Association for Ambulatory Health Care (AAAHC); Accreditation Commission for Health Care, Inc. (ACHC); American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF); American Osteopathic Association Healthcare Facilities Accreditation Program (AOA/HFAP); Center for Improvement in Healthcare Quality (CIHQ); Community Health Accreditation Program (CHAP); DNV GL-Healthcare (DNV GL); National Dialysis Accreditation Commission (NDAC); The Compliance Team (TCT); The Joint Commission (JC).

Advanced dental education programs conferring a certificate **must** have state or federal approval to operate and, as applicable, to confer a certificate. Advanced dental education programs conferring a degree **must** have institutional accreditation and authority to confer a degree.

**Intent:** The educational program demonstrates either: a) documentation of receipt of federal aid as evidence to operate, or b) documentation of a state business license as evidence to operate. Additionally, as required by the state, the program demonstrates authority through an appropriate state agency when issuing a certificate of completion. If conferring a degree, the program demonstrates authorization from its institutional accrediting agency.

**Examples of evidence to demonstrate compliance may include:**

- State license or federal authority documenting the institution's approval to operate and confer a credential
- Institutional accreditation indicating approval to confer a degree

# Commission on Dental Accreditation

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Proposed Revisions to Standard 2-11

Additions are Underlined  
~~Strikethroughs~~ indicate Deletions

## Accreditation Standards for Advanced Dental Education Programs in Orofacial Pain



- 1 a) muscle relaxants;
- 2 b) sedative agents for chronic pain and sleep management;
- 3 c) appropriate use of opioids in management of acute and chronic pain;
- 4 d) adjuvant analgesic use of tricyclics and other antidepressants used for
- 5 orofacial pain;
- 6 e) anticonvulsants, including but not limited to the management of neuropathic
- 7 pain and neurovascular pain;
- 8 f) local anesthetics in management of orofacial pain;
- 9 g) anxiolytics for the management of orofacial pain;
- 10 h) analgesics and anti-inflammatories;
- 11 i) topical application of medications for management of orofacial pain
- 12 j) prophylactic and abortive medications for primary headache disorders;
- 13 k) therapeutic use of botulinum toxin injections; and
- 14 l) treatment related medication side effects that alter sleep architecture.

15  
16 ***Intent:*** This should include judicious selection of medications directed at the presumed  
17 pain mechanisms involved, as well as adjustment, monitoring, and reevaluation.

18  
19 ~~*Common medications may include: muscle relaxants; sedative agents for chronic pain*~~  
20 ~~*and sleep management; opioid use in management of chronic pain; the adjuvant*~~  
21 ~~*analgesic use of tricyclics and other antidepressants used for chronic pain;*~~  
22 ~~*anticonvulsants, membrane stabilizers, and sodium channel blockers for neuropathic*~~  
23 ~~*pain; local and systemic anesthetics in management of neuropathic pain; anxiolytics;*~~  
24 ~~*analgesics and anti-inflammatories; prophylactic and abortive medications for primary*~~  
25 ~~*headache disorders; and therapeutic use of botulinum toxin injections.*~~

26  
27 ~~*In the treatment of patients, c*~~*Common issues may include: management of medication*  
28 ~~*overuse headache; medication side effects that alter sleep architecture;*~~ *prescription*  
29 *medication dependency withdrawal; referral and co-management of pain in patients*  
30 *addicted to prescription, non prescription and recreational drugs; familiarity with the*  
31 *role of preemptive anesthesia in neuropathic pain.*