

Guidance Document: Temporary Flexibility in Accreditation Standards to Address Interruption of Education Reporting Requirements Resulting From COVID-19 for the Class of 2020

Below is the *temporary flexibility* guidance on select Accreditation Standards. Only those Accreditation Standards which include *temporary flexibility* are included, all others have been retained as written in the current published Accreditation Standards document.

Advanced Dental Education in Pediatric Dentistry

Alternative Assessment Methods (for example, patient vs simulation)

For the Class of 2020, alternative assessment methods, including simulation, may be used by the program as long as the program ensures that students/residents are competent upon graduation.

Modification/Reduction of Curriculum Content or Curriculum Requirements (for example, modification/reduction of program-dictated requirements, CODA competency requirements, and/or CODA quantitative numbers-based requirements)

For the Class of 2020, programs have flexibility to modify program-dictated requirements, beyond CODA's Accreditation Standards as long as the program continues to confirm competence of its graduates. For example, if a program includes completion of the pediatric dentistry qualifying examination as a graduation requirement, and the examination is delayed or not offered due to COVID-19, the program could waive this program-dictated requirement since it is not required by CODA's Accreditation Standards.

Program Length or Program Component Length (for example, rotations, services, etc.)

The program length requirement will be maintained as a minimum of 24 months of full-time formal training. The option of using alternative educational methods, such as distance education technology, provides programs the flexibility in delivering the required educational experiences.

Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry

PED Standard 4-2

The duration of an advanced dental education program in pediatric dentistry must be a minimum of 24 months of full-time formal training.

Temporary Guidance: For the Class of 2020, no flexibility is allowed in terms of completion of 24 months of full-time formal training since programs have the option of using alternative educational methods such as distance education technology. Programs should document modifications to the program (the academic schedule, for example) from the time of disruption (around March 15, in most cases) until completion of the program.

PED Standard 4-6

Clinical Experiences: Clinical experiences in behavior guidance must enable students/residents to achieve competency in patient management using behavior guidance:

- b. Students/Residents must perform adequate patient encounters to achieve competency:**
 - 1. Students/Residents must complete 20 nitrous oxide analgesia patient encounters as primary operator; and**
 - 2. Students/Residents must complete a minimum of 50 patient encounters in which sedative agents other than nitrous oxide (but may include nitrous oxide in combination with other agents) are used. The agents may be administered by any route.**
 - a. Of the 50 patient encounters, each student/resident must act as sole primary operator in a minimum of 25 sedation cases.**
 - b. Of the remaining sedation cases (those not performed as the sole primary operator), each student/resident must gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring and human simulation.**

Temporary Guidance: For the Class of 2020, temporary flexibility is provided such that other means of attaining these requirements to achieve competence may be used, including simulation experiences. The remaining procedures do not all need to be patient-based; however, the required numbers of procedures must be achieved. The program should be aware of applicable licensure requirements and ensure alterations do not impede the graduate's ability to become licensed.

PED Standard 4-21

Clinical Experiences: Clinical experiences must enable students/residents to acquire knowledge and skills to function as health care providers within the hospital setting.

The program must provide the following clinical experiences:

- a. Dental treatment in the Operating Room Setting:**
 - 1. Each student/resident participates in the treatment of pediatric patients under general anesthesia in the operating room.**
 - a. Each student/resident participates in a minimum of twenty (20) operating room cases; and these are documented in the RCL (Resident Clinical Log). In ten (10) of the operating room cases above, each student/resident provides the pre-operative workup and assessment, conducting medical risk assessment, admitting procedures, informed consent, and intra-operative management including completion of the dental procedures, post-operative care, discharge and follow up and completion of the medical records.**

Temporary Guidance: For the Class of 2020, temporary flexibility is provided such that other means of attaining these requirements to achieve competence may be used, including simulation experiences. The remaining procedures do not all need to be patient-based; however, the required numbers of procedures must be achieved. The program should be aware of applicable licensure requirements and ensure alterations do not impede the graduate's ability to become licensed.

c. Anesthesiology Rotation:

- 1. Students/residents must complete a rotation under the supervision of an anesthesiologist in a facility approved to provide general anesthesia;**
- 2. This rotation must be at least four weeks in length and is the principal activity of the student/resident during this scheduled time;**
- 3. The anesthesiology rotation in pediatric dentistry must be structured to provide the advanced dental education student/resident with knowledge and experience in the management of infants, children and adolescents and adolescents undergoing general anesthesia; and**
- 4. The rotation must provide and document experiences in : (1) pre-operative evaluation, (2) risk assessment, (3) assessing the effects of pharmacologic agents, (4) venipuncture techniques, (5) airway management, (6) general anesthetic induction and intubation, (7) administration of anesthetic agents, (8) patient monitoring, (9) prevention and management of anesthetic emergencies, (10)recovery room management, and (11) postoperative appraisal and follow up.**

Temporary Guidance: For the Class of 2020, temporary flexibility is provided such that the required rotation length (4 weeks) in anesthesiology may be reduced if the program can demonstrate that the student/resident is competent and has experience in all of the 11 required areas in PED Standard 4-21c.4.

PED Standard 4-25

Clinical Experiences: Clinical experiences must expose students/residents to pediatric medicine:

- a. Advanced education students/residents in pediatric dentistry must participate in a pediatric medicine rotation of at least two (2) weeks duration which is the student's/resident's principal activity during this scheduled period**

1. **This rotation may occur in a variety of settings i.e., Emergency Department, subspecialty clinics, multi-disciplinary team clinics and general pediatrics; and**
2. **The rotation must include exposure to obtaining and evaluating complete medical histories, parental interviews, system-oriented physical examinations, clinical assessments of healthy and ill patients, selection of laboratory tests and evaluation of data, evaluation of physical, motor and sensory development, genetic implications of childhood diseases, the use of drug therapy in the management of diseases, and parental management through discussions and explanation.**

Temporary Guidance: For the Class of 2020, temporary flexibility is provided such that the required rotation length (2 weeks) in pediatric medicine may be reduced if the program can demonstrate that the student/resident is competent and has experience in PED Standard 4-25a 1 and 2.