

# **Application for Recognition of a Dental Specialty**

Council on Dental Education and Licensure  
American Dental Association  
211 East Chicago Avenue  
Chicago, Illinois 60611  
2002



## **Introduction**

This application specifies the information that must be submitted to the American Dental Association's Council on Dental Education and Licensure by sponsoring organizations who are seeking initial recognition as a specialty. A completed application including a \$3,000 application fee must be submitted by the June 1 annual deadline to constitute a formal request for Council review of the proposed specialty. The Council will consider only fully completed applications.

## **Background information**

The *Constitution and Bylaws* of the Association delegate to the Council on Dental Education and Licensure the authority to study and make recommendations on the recognition of specialty areas of dental practice. The Association's House of Delegates makes the final decision to grant or deny specialty recognition. In addition, the House of Delegates approves *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists*. Applicants for specialty recognition must demonstrate compliance with the six requirements for specialty recognition in order to be granted specialty recognition. This application outlines the process by which dental specialties are recognized and identifies the requirements that must be satisfied in order to achieve specialty recognition.

It should be noted that the *Requirements* pertain only to the recognition of dental specialty areas and specialty certifying boards. The Association's policies regarding ethical announcement of specialization and limitation of practice by individual specialists are contained in its *Principles of Ethics and Code of Professional Conduct*.

The *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists*, the ADA's *Principles of Ethics and Code of Professional Conduct* and the ADA definitions of dentistry and each recognized dental specialty are enclosed with the application. Sponsoring organizations are urged to review these documents carefully prior to completing the application for recognition.

In 1983, the ADA House of Delegates directed that the Council on Dental Education and Licensure review each recognized specialty within ten years and, thereafter, at intervals to be determined by the Council on Dental Education and Licensure, to determine whether a specialty continues to meet established requirements for specialty recognition. Between 1985 and 1991, the eight recognized dental specialties were reviewed and granted continued recognition by the ADA House.

In 1992, the ADA House adopted Resolution 144H-1992 (*Trans.* 1992:620). The resolution endorses the concept of the Association maintaining a mechanism for periodic review of specialty education and practice. Further, the resolution directed the Council on Dental Education and Licensure to conduct a comprehensive review of specialty education and practice at ten year intervals beginning in 2001. The 2001 ADA House of Delegates determined that the Council's next comprehensive review of dental specialty education and practice will be presented to the 2011 ADA House of Delegates (*Trans.* 2001:000). This review will be conducted in a format consistent with the one used for the Council's 2001 study (*Supplements* 2001:00).

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### **The Recognition Process**

Upon receipt of an application, Council staff review the application to determine whether all sections have been completed and all appendices referenced in the document have been included. Receipt of a completed application will be acknowledged by letter. Applications that have not been fully completed will be returned to the sponsoring organization with notification about suitable modifications. The review process includes opportunities for comments on the application by the profession, as well as committee review, prior to consideration by the Council. Because of the timetable of these reviews, extensions of the established deadlines cannot be granted.

### **Review Procedures**

Upon receipt of an application for recognition and following staff review for technical compliance, the Council will place a notice in the *ADA News* advising the profession of submission of the application and inviting comment. In addition, the following organizations will be notified in writing of receipt of the application:

- ADA Constituent and Component Dental Societies
- American Dental Education Association
- American Association of Dental Examiners
- Academy of General Dentistry
- Recognized specialty boards and sponsoring organizations

Copies of the application and appendices may be obtained by the communities of interest for a processing fee of \$150. Additionally, review of the application and its documentation may be arranged by appointment through the Council office.

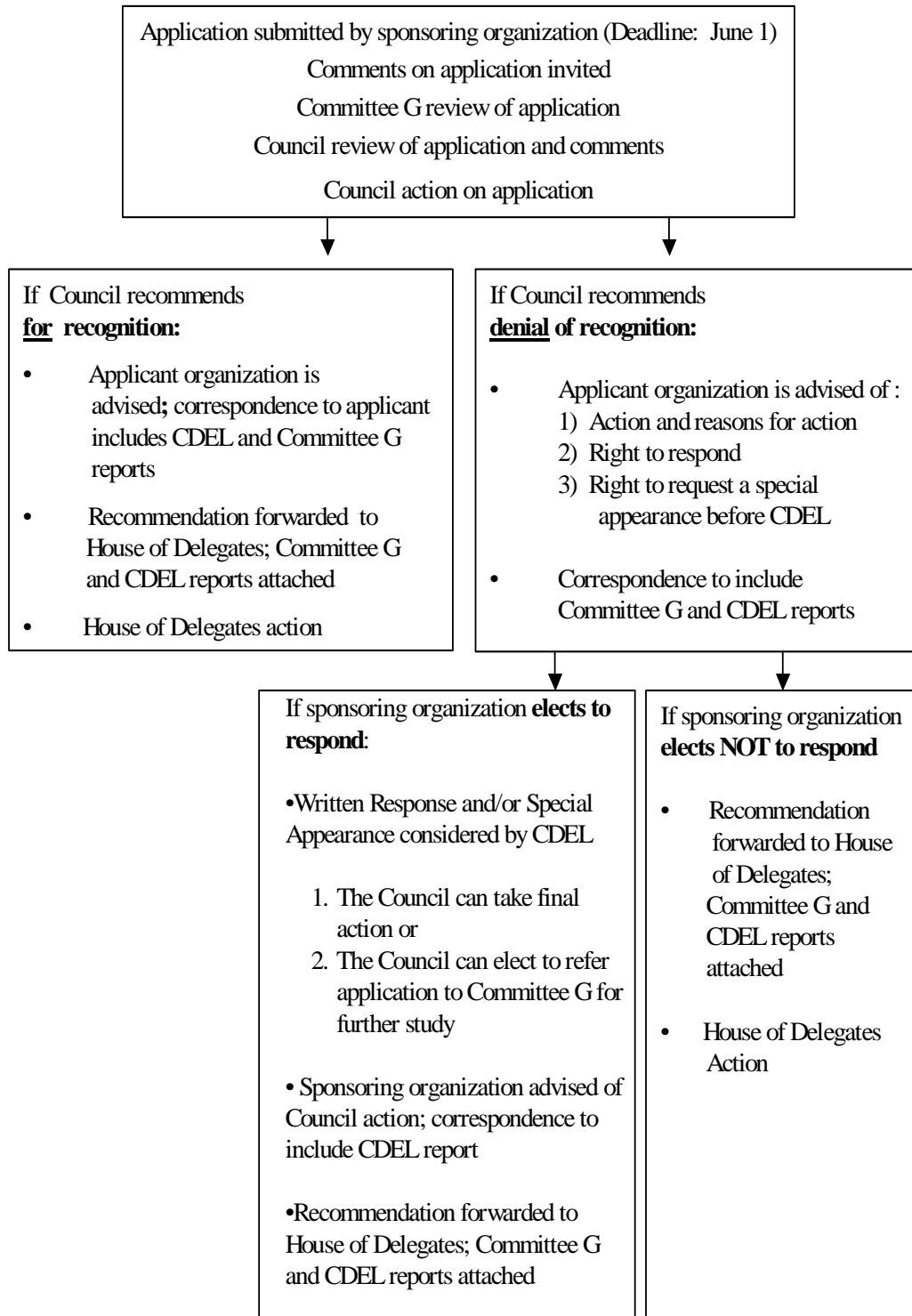
The completed application and comments submitted by the specified deadline will be considered first by the Council's standing committee on specialty recognition (Committee G). Committee G determines its recommendation following in-depth review and discussion of all information provided. Following a comprehensive review of the application, the written comments and the report of Committee G, the Council determines its recommendation to grant or deny specialty recognition. If the Council determines that the applicant has demonstrated compliance with the six requirements for recognition, it will recommend granting recognition to the Association's House of Delegates. In addition, it will advise the sponsoring organization and the House of its recommendation and reasons for its recommendation.

If the Council recommends denying specialty recognition, the sponsoring organization is advised of (1) the recommendation and reasons for the recommendation; (2) the organization's right to submit a response to the Council's report; and (3) the organization's right to a special appearance before the Council to supplement its written response. If the sponsoring organization elects not to respond within the prescribed timeframe, the Council will transmit its detailed report and resolution to the Association's House of Delegates for final action. Resolutions transmitted to the Association's House of Delegates are also considered by the ADA Board of Trustees. In its consideration of a resolution, the House is also advised of the Board's comment and recommendation on the resolution.

If the sponsoring organization elects to respond, the Council will take into consideration the organization's written response, as well as information provided during the special appearance, before making its final decision. If the applicant provides extensive new information in its written response or during the special appearance, the Council can elect to refer the application to Committee G for further study. The Council's recommendation for recognition or denial of recognition will then be transmitted

through the ADA Board of Trustees to the House of Delegates for final action. The following diagram summarizes the steps in the specialty recognition process.

## Dental Specialty Recognition Process



## **Instructions for Completing the Application**

**General:** The *Application for Recognition* is structured to collect specific qualitative and quantitative information that will assist the Council on Dental Education and Licensure in determining the extent to which the sponsoring organization meets the established criteria for recognition.

The application requests information about the specialty related to each of the requirements for recognition identified in the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists*. In each section of the application, the sponsoring organization is provided the opportunity to provide additional information that demonstrates compliance with the pertinent requirement.

**Format:** The completed application should be in a format that follows the outline provided. Each section of the application should be clearly labeled and the heading and numerical designations of each question indicated. A narrative response should be provided in response to each question. The sponsoring organization is encouraged to provide documentation to support the narrative responses. Where such documentation is provided, it should be referenced at the end of the narrative statement, clearly labeled and appended to the application. A sample format is attached to this document. A computerized version of the *Application* is available upon request (Microsoft Word compatible format). Please contact the Council office (extension 2698) to request the application in electronic format. In addition to providing eight (8) paper copies of the application and appendices, it is requested that these materials also be submitted in electronic format.

**Responses:** The sponsoring organization is expected to respond to all specific requests for information. Responses to sections labeled "Other Information" are the option of the sponsoring organization. It is recommended that individuals responsible for completing the application review the entire document carefully before completing any part of it, to avoid undue repetition. It is not necessary to repeat at length information that can be found elsewhere in the document; cross-referencing information is encouraged.

Some sections of the application request quantitative information. The source of any data provided should be indicated. Estimates may be provided in these sections if definitive statistics are not available, but must include a measure of reliability. However, estimates should be clearly identified and the method for arriving at the estimates should be explained.

**Procedures for Reapplication:** If an applicant has been denied recognition as a dental specialty, the following instructions apply:

1. The applicant (sponsoring organization) may reapply for recognition **no sooner than 24 months** following the final disposition of the application.
2. Resubmission of the application must be in its entirety, including the \$3,000 application fee. The applicant is responsible for highlighting new and/or clarifying information since the time of previous submission. Further, the information submitted should address deficiencies noted at the time the application was denied/withdrawn.
3. A revised application will be considered in its entirety as a complete or new application and will include consideration of all sections, not just those sections previously found to be in non-compliance.

**Submission of the Completed Application**

The sponsoring organization should submit the completed application in electronic format along with eight (8) paper copies and a check made out to the American Dental Association in the amount of \$3,000. Additionally, please complete the permission form on page 18 and submit all materials to:

Director  
Council on Dental Education and Licensure  
American Dental Association  
211 E. Chicago Avenue  
Chicago, Illinois 60611

The annual deadline for submission of an application is: **June 1**

Council staff is available to answer questions regarding this application and can be reached on the Association's toll-free number: 1/800-621-8099, ext. 2698.

## SAMPLE FORMAT

### TO BE FOLLOWED WHEN COMPLETING THE APPLICATION

Reference: *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists.*

#### I. Requirement 1:

**In order for an area to be recognized as a specialty, it must be represented by a sponsoring organization: (a) whose membership is reflective of the special area of dental practice; and (b) that demonstrates the ability to establish a certifying board.**

##### 1. Founding Date and Historical Development

Response:

Supporting Documentation: (if cited) - Appendix I-1

##### 2. Officers

a. Response:

##### 3. Membership

a. Response:

Supporting Documentation: (if cited) - Appendix I-3a or cross reference to previously noted appendix

b. Response:

Supporting Documentation: (if cited) - Appendix I-3b

**COVER PAGE SAMPLE**  
APPLICATION FOR RECOGNITION OF

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(specialty)

Application submitted by:

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(organization)

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(address)

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(Signature - organization's president)

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(contact person)

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(phone number)

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(address)

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(date of submission)

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Material provided in the application for specialty recognition contains statements that represent conclusions of the sponsoring organization. Recognition of a specialty by the American Dental Association is based on compliance with established *Requirements* and does not imply concurrence with all of the statements presented in the sponsoring organization's application.

Reference: *Requirements for Recognition of Dental Specialties and National Certifying Board for Dental Specialists.*

## **I. Requirement 1:**

**In order for an area to be recognized as a specialty, it must be represented by a sponsoring organization: (a) whose membership is reflective of the special area of dental practice; and (b) that demonstrates the ability to establish a certifying board.**

### 1. Founding Date and Historical Development

- a. Indicate the year in which the sponsoring organization was founded and briefly summarize its development since that date.
- b. Describe the current mission of the organization.

### 2. Officers

Identify the current officers of the sponsoring organization.

### 3. Membership

- a. Provide an analysis of the trends in membership over the past ten years.
- b. Demonstrate that the organization's membership is representative of the specialty area of practice.

### 4. Other National Dental Organizations

Identify other national dental organizations whose objectives are advancement of this area of dental practice.

### 5. Activities

Describe and assess the sponsoring organization's specific efforts to promote the improvement of quality in the field (i.e., sponsorship of a peer reviewed scientific journal, continuing competence, parameters of care, recertification, continuing education requirements, etc.).

### 6. Describe and assess the sponsoring organization's ability to establish a certifying board that possesses the essential characteristics of a board which grants certification in a recognized dental specialty. (Reference: *Requirements For Recognition of Dental Specialties and National Certifying Boards for Dental Specialists* - page 3.)

### 7. Provide written parameters of care for the specialty.

8. Scientific Advances

- a. Describe and assess how the knowledge gained through research activities in the proposed specialty has transferred to the practice in this field.
- b. Provide an analysis of current scientific challenges central to advancing this field.
- c. Describe how the organization has fostered research training.

9. Other Information

Provide any other information to demonstrate that the sponsoring organization meets this requirement.

**II. Requirement 2:**

**A specialty must be a distinct and well-defined field which requires unique knowledge and skills beyond those commonly possessed by dental school graduates, as defined by the predoctoral accreditation standards.\***

a. Definition

Provide a definition of the specialty.

b.\* Advanced Knowledge

Compare and contrast\*\* the predoctoral accreditation standards with the advanced knowledge required for the practice of the specialty, especially with regard to the level of knowledge required.

c. Advanced Skills

Compare and contrast the advanced skills and levels of competency/proficiency expected of a graduate of the specialty, especially with regard to level of skill required.

d. Other Information

Provide any other information that demonstrates compliance with this requirement.

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\* The Commission on Dental Accreditation's predoctoral accreditation *Standards* are available upon request and on [www.ADA.org](http://www.ADA.org).

\*\* How are they the same; how are they different.

### III. Requirement 3:

**The scope of the specialty requires advanced knowledge and skills that: (a) are separate and distinct from any recognized dental specialty or combination of recognized dental specialties; and (b) cannot be accommodated through minimal modification of a recognized dental specialty or combination of recognized dental specialties.**

NOTE: When completing this section of the application, review the Commission on Dental Accreditation's accreditation standards for advanced specialty education programs and the ADA's approved definition of each recognized specialty and the definition of dentistry. Contact the Commission on Dental Accreditation for the accreditation standards or view them on [www.ADA.org](http://www.ADA.org).

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#### a. Advanced Knowledge

- (1) Compare and contrast the accreditation standards of each of the recognized dental specialties with the advanced knowledge required for the specialty, especially with regard to the level of knowledge required.
- (2) Provide a listing of the unique and distinct body of knowledge for the specialty and contrast this listing with the unique and distinct bodies of knowledge of each recognized specialty.

#### b. Advanced Skills

- (1) Compare and contrast the accreditation standards of each of the recognized dental specialties with the advanced skills required and levels of competency/proficiency expected of a graduate of the specialty.
- (2) Identify the advanced skills (techniques and procedures) required for practice of the specialty that are not included within the scope of other recognized specialties.
- (3) Provide a listing of the unique and distinct skills for the specialty and contrast them to the unique and distinct fields and bodies of knowledge of each recognized specialty.

#### c. Overlap in Scope/Advanced Knowledge

- (1) Could the specialty be readily incorporated within the scope of a recognized dental specialty.

Yes \_\_\_\_\_ No \_\_\_\_\_

Present the rationale for this response.

- (2) Could the specialty be accommodated by a combination of currently recognized specialties?

Yes \_\_\_\_\_ No \_\_\_\_\_

Present the rationale for this response.

- (3) Identify any areas of biomedical and/or behavioral science in which advanced knowledge and advanced skills are required for practice of the specialty that are not included in the scope of other recognized specialties.

d. Other Information

Provide any other information that demonstrates compliance with this requirement.

**IV. Requirement 4 \***

**The specialty must document scientifically, by valid and reliable statistical evidence/studies, that it: (a) actively contributes to new knowledge in the field; (b) actively contributes to professional education; (c) actively contributes to research needs of the profession; and (d) provides oral health services for the public; all of which are currently not being met by general practitioners or dental specialists.**

- a. Cite peer reviewed epidemiological data that establishes the incidence and/or prevalence of conditions diagnosed and/or treated by practitioners in the proposed specialty. Identify the source of the data and provide an estimate of reliability of the data.
- b. Document and assess the need for services by the proposed specialty that are not currently being met by general practitioners or recognized dental specialists. Include documentation regarding referral patterns, including documentation that identifies who normally refers patients to practitioners in the proposed specialty and the frequency of these referrals.
- c. Identify and provide background information on who contributes to the body of knowledge for the proposed specialty (this would include individuals who represent the applicant organization and others including non-dentist scientists, etc).
- d. Identify and analyze new and emerging trends in the field; evaluate findings from surveys, such as the ADA Survey of Dental Practice data regarding services rendered and time spent providing the services.
- e. Indicate the number of individuals who devote the majority (greater than 50%) of time to the practice of the discipline.

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\* The source(s) of any data provided should be referenced. Estimates may be provided if definitive statistics are not available, but must include a measure of reliability. Estimates should be clearly identified and the method for arriving at the estimates should be explained.

- f. Document how the proposed specialty contributes to the educational needs of the profession at the predoctoral, postdoctoral and continuing education levels.
- g. Project the need for practitioners in the specialty over the next five years, taking into account disease trends, demographic changes and other pertinent factors.
- h. Other Information  
  
Provide any other information that demonstrates compliance with this requirement.

NOTE: Suggested guidelines regarding collection of required data are attached as an Appendix to the Application.

**V. Requirement 5:**

**A specialty must directly benefit some aspect of clinical patient care.**

- a. Principal Health Services  
  
Identify the principal health services provided to the public by individuals in this area of practice.
- b. Practice Setting  
  
Identify the practice setting in which these services are customarily provided: e.g., private office, hospital, laboratory, institutional setting, community health setting, etc.
- c. Other Information  
  
Provide any other information that demonstrates compliance with this requirement.

**VI. Requirement 6:**

**Formal advanced education programs of at least two years beyond the predoctoral dental curriculum as defined by the Commission on Dental Accreditation's *Standards for Advanced Specialty Education Programs* must exist to provide the special knowledge and skills required for practice of the specialty.**

a. Operational Advanced Education Programs

List all the currently operational advanced education programs in the specialty, indicating:

- (1) the name of the sponsoring institution;
- (2) the name and educational background of the program director;
- (3) the mandatory length of the program for full-time students; (Refer to Standard 5 of the *CDA's Standards for Advanced Specialty Education Programs*;
- (4) the certificate and/or degree awarded upon completion of the program.

Enclose a letter from each institution's chief executive officer verifying sponsorship of the program.

All information provided should pertain to the most recent academic year for which statistics are available. This time frame should be identified. Do not include continuing education courses in this listing

b. Adequacy of Enrollment

- (1) Indicate the number of dentists currently in practice who have received two or more years of formal advanced education in the specialty. (This must not include continuing education.)
- (2) For each of the past five years list the number of advanced education programs of two years or more in length in operation in the proposed specialty.
- (3) Describe and assess the adequacy of the projected enrollment in these programs to meet the projected needs in the field over the next five years.

c. Minimum Curricular Requirements

Provide a description of the minimum biomedical, behavioral and clinical science requirements for advanced education programs in the specialty. These curricular requirements must provide the advanced knowledge and skills required for the specialty as identified in Requirements 2 and 3 of this application.

d. Sample Curricula

Provide a representative sample of curricula currently used in several existing programs. The examples provided should reflect the various approaches for structuring advanced education in the proposed specialty.

e. Other Information

Provide any other information that demonstrates compliance with this requirement.

**The following data sources should be considered regarding collection of scientific evidence to support the application (see Requirement 4 of the Application).**

- ❖ Epidemiologic Surveys
- ❖ Reviews of the Scientific Literature and Secondary Data Sources
- ❖ Bibliography (Citation Analysis)
- ❖ Clinical Trial Repositories - collection of data
- ❖ Articles in Peer-Reviewed Journals
  1. Original research
  2. Review articles
- ❖ Peer-reviewed studies - such as clinical trials and health services research
- ❖ Third-Party claims data
- ❖ Practitioner and patient surveys
- ❖ Custom surveys
- ❖ Data repositories, e.g., cancer registries
- ❖ ADA Survey Center Data\*
- ❖ Evidence-Based Websites - e.g., The Cochrane Library Site

\*ADA Survey Center – (x2568)

Applicants may contact the ADA Department of Library Services Reference Area for information or questions relating to library data sources (x 2655).

**The following permission to publish form (Appendix 2) should be completed and submitted with application materials.**

**PERMISSION TO PUBLISH SPECIALTY RECOGNITION APPLICATION**  
**ADA COUNCIL ON DENTAL EDUCATION AND LICENSURE**

The American Dental Association (“ADA”), through its Council on Dental Education and Licensure, makes recommendations on the recognition of special areas of dental practice and in that capacity obtains applications for specialty recognition including exhibits and supplemental material (the “Specialty Application”). The undersigned hereby grants its full permission and authorization to ADA to republish, post and otherwise use or make available the Specialty Application in various ADA publications, including but not limited to ADA’s website currently located at [www.ada.org](http://www.ada.org). Furthermore, the undersigned consents to the reproduction, display, transmission and use of the Specialty Application by ADA on a perpetual basis, worldwide, without charge, in any media now existing or hereafter created, including without limitation brochures, periodicals, Internet, Intranet, websites and CD-ROMs, and to receive or otherwise use the Specialty Application in electronic format as well as print or any other media.

The undersigned, for itself and all its agents, assigns and successors, hereby waives all rights to any consideration, whether by payment of money or otherwise, for time and expenses, and for the reproduction, display, transmission and use of the Specialty Application. Further, the undersigned, for itself and all its agents, assigns and successors, hereby releases and forever discharges ADA and its permittees, their respective subsidiaries, affiliates, officers, trustees, directors, employees, agents, insurance carriers, predecessors, successors, heirs and assigns, and any others acting with their permission or under their authority from: (1) any and all claims arising out of the foregoing, including but not limited to any claims for blurring or distortion or for failure to exercise such right to use the Specialty Application; and (2) any and all past and present claims, demands and causes of action of any nature whatsoever that we had, have or may hereafter claim to have, whether directly or indirectly, whether based on statute, tort, contract or otherwise, whether known or unknown, suspected or unsuspected, foreseen or unforeseen, liquidated or unliquidated, asserted or unasserted, arising in connection with the activities described above.

IN WITNESS WHEREOF, the undersigned, through its duly authorized representative, has executed this Agreement on this \_\_\_\_ day of \_\_\_\_\_, 2004.

\_\_\_\_\_  
 Name of Applicant Organization

Signature: \_\_\_\_\_

Title: \_\_\_\_\_