

WatchDog REPORT



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Dental Board of California Meeting in November, 2019

This was a pretty calm Dental Board of California Board Meeting. There was an election of new officers for 2020. The DBC received another application from a foreign dental school for approval for their students to be qualified to apply for a California dental license.

And, there was an interesting discussion on the future of clinical testing as part of the dental license application.

The President of the DBC for 2020 will be Dr. Thomas Stuart. Dr. Stuart is well-known by all of us and was President of CDA in 2010. I look forward to this well-respected general dentist as the new President.

The DBC received an application from the University of Qingdao School of Stomatology-China to have its students approved for applying for a California dental license. You recall that a school in Mexico and a school in Moldova have already been approved by the Board. The application was ruled incomplete and will not be reconsidered because the DBC decided earlier this year to use the CODA international approval program as the qualifier. You should know that a dental school in Saudi Arabia has already passed the CODA international approval process. It is my understanding that California has more pathways to obtain a dental license than any other state. License by credential, license by residency, license by the portfolio examination process, and license by successfully passing the WREB. Now students from CODA approved foreign dental schools can apply for a license without having to complete the two-year foreign graduate process.

Speaking of clinical testing as part of the dental license application process, the DBC had a discussion that

suggests what the future of clinical testing will become. The portfolio process was instituted, in part, to eliminate the use of live patients solely for the benefit of the testee to pass a clinic evaluation. This is considered by many to be unethical. The portfolio process allows students to complete their clinical evaluations while delivering the patient's prescribed course of treatment. This prevents patients having indicated restorative care deferred until a clinical exam solely for the benefit of the student. This also eliminates the practice of patients "selling themselves" to testees at clinical examinations because they have a qualifying lesion for the clinical examination.

Currently, only the Western Regional Examination Board (WREB) is approved for the clinical examination process. The American Board of Dental Examiners (ADEX) was approved last year pending developing regulations. At the time ADEX requested approval by the DBC they had two types of examinations; the conventional central location testing process just like the WREB, and a new process where the ADEX examiners will do the testing on dental students in their school clinics while they are providing regular care to their patients, very much like the portfolio process. The DBC is attempting to craft regulations that would only approve the school-based testing process because it is similar to the portfolio process and avoids the ethical conflicts of live patient testing. The problem is that the WREB process is currently the primary testing process in spite of this ethical conflict. It would not be fair to ADEX to not approve their conventional testing process. The resolution of this conflict will be interesting.

That is all the good stuff. ♦

As always, if you have questions or want to discuss the DBC, contact me at: guyacheson@gmail.com

Pathway
To
Fellowship

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