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# American Dental Association

## Principles of Ethics and Code of Professional Conduct

With official advisory opinions revised to January 1983

### Council on Bylaws and Judicial Affairs

**T**he maintenance and enrichment of professional status place on everyone who practices dentistry an obligation which should be willingly accepted and willingly fulfilled. While the basic obligation is constant, its fulfillment may vary with the changing needs of a society composed of the human beings that a profession is dedicated to serve. The spirit of the obligation, therefore, must be the guide of conduct for professionals. This obligation has been summarized for all time in the golden rule which asks only that "whatsoever ye would that men should do to you, do ye even so to them."

The practice of dentistry first achieved the stature of a profession in the United States when, through the heritage bestowed by the efforts of many generations of dentists, it acquired the three unailing characteristics of a profession: the primary duty of service to the public, education beyond the usual level, and the responsibility for self-government.

#### PRINCIPLE — SECTION 1

**SERVICE TO THE PUBLIC AND QUALITY OF CARE.** The dentist's primary obligation of service to the public shall include the delivery of quality care, competently and timely, within the bounds of the clinical circumstances presented by the patient. Quality of care shall be a primary consideration of the dental practitioner.

#### CODE OF PROFESSIONAL CONDUCT

**1-A. PATIENT SELECTION.** While dentists, in serving the public, may exercise reasonable discretion in selecting patients for their practices, dentists shall not refuse to accept patients into their practice or deny dental service to patients because of the patient's race, creed, color, sex or national origin.

**1-B. PATIENT RECORDS.** Dentists are obliged to safeguard the confidentiality of patient records. Dentists shall maintain patient records in a manner consistent with the protection of the welfare of the patient. Upon request of a patient or another dental practitioner, dentists shall provide any information that will be beneficial for the future treatment of that patient.

#### Advisory opinion

1. A dentist has the ethical obligation on request of either the patient or the patient's new dentist to furnish, either gratuitously or for nominal cost, such dental records or copies or summaries of them, including dental x-rays or copies of them, as will be beneficial for the future treatment of that patient.

**1-C. COMMUNITY SERVICE.** Since dentists have an

obligation to use their skills, knowledge and experience for the improvement of the dental health of the public and are encouraged to be leaders in their community, dentists in such service shall conduct themselves in such a manner as to maintain or elevate the esteem of the profession.

**1-D. EMERGENCY SERVICE.** Dentists shall be obliged to make reasonable arrangements for the emergency care of their patients of record.

Dentists shall be obliged when consulted in an emergency by patients not of record to make reasonable arrangements for emergency care. If treatment is provided, the dentist, upon completion of such treatment, is obliged to return the patient to his or her regular dentist unless the patient expressly reveals a different preference.

**1-E. CONSULTATION AND REFERRAL.** Dentists shall be obliged to seek consultation, if possible, whenever the welfare of patients will be safeguarded or advanced by utilizing those who have special skills, knowledge and experience. When patients visit or are referred to specialists or consulting dentists for consultation:

1. The specialists or consulting dentists upon completion of their care shall return the patient, unless the patient expressly reveals a different preference, to the referring dentist, or if none, to the dentist of record for future care.

2. The specialists shall be obliged when there is no referring dentist and upon a completion of their treatment to inform patients when there is a need for further dental care.

**1-F. USE OF AUXILIARY PERSONNEL.** Dentists shall be obliged to protect the health of their patient by only assigning to qualified auxiliaries those duties which can be legally delegated. Dentists shall be further obliged to prescribe and supervise the work of all auxiliary personnel working under their direction and control.

**1-G. JUSTIFIABLE CRITICISM.** Dentists shall be obliged to report to the appropriate reviewing agency as determined by the local component or constituent society instances of gross and continual faulty treatment by other dentists. Patients should be informed of their present oral health status without disparaging comment about prior services.

**1-H. EXPERT TESTIMONY.** Dentists may provide expert testimony when that testimony is essential to a just and fair disposition of a judicial or administrative action.

**1-I. REBATE AND SPLIT FEES.** Dentists shall not accept or tender "rebates" or "split fees."

**1-J. REPRESENTATION OF CARE AND FEES.** Dentists

shall not represent the care being rendered to their patients or the fees being charged for providing such care in a false or misleading manner.

#### Advisory opinions

1. A dentist who accepts a third party\* payment under a copayment plan as payment in full without disclosing to the third party\* payer that the patient's payment portion will not be collected, is engaged in overbilling. The essence of this ethical impropriety is deception and misrepresentation; an overbilling dentist makes it appear to the third party\* payer that the charge to the patient for services rendered is higher than it actually is.

2. It is unethical for a dentist to increase a fee to a patient solely because the patient has insurance.

3. Payments accepted by a dentist under a governmentally funded program, a component or constituent dental society sponsored access program or a participating agreement entered into under a program of a third party\* shall not be considered as evidence of overbilling in determining whether a charge to a patient, or to another third party\* in behalf of a patient not covered under any of the aforementioned programs constitutes overbilling under this section of the Code.

4. A dentist who submits a claim form to a third party\* reporting incorrect treatment dates for the purpose of assisting a patient in obtaining benefits under a dental plan, which benefits would otherwise be disallowed, is engaged in making an unethical, false and misleading representation to such third party.\*

5. A dentist who incorrectly describes on a third party\* claim form a dental procedure in order to receive a greater payment or reimbursement or incorrectly makes a noncovered procedure appear to be a covered procedure on such a claim form is engaged in making an unethical, false and misleading representation to such third party.\*

6. A dentist who recommends and performs unnecessary dental services or procedures is engaged in unethical conduct.

\*A third party is any party to a dental prepayment contract that may collect premiums, assume financial risks, pay claims, and/or provide administrative services.

#### PRINCIPLE — SECTION 2

**EDUCATION.** The privilege of dentists to be accorded professional status rests primarily in the knowledge, skill and experience with which they serve their patients and society. All dentists, therefore, have the obligation of keeping their knowledge and skill current.

**PRINCIPLE — SECTION 3**

**GOVERNMENT OF A PROFESSION.** Every profession owes society the responsibility to regulate itself. Such regulation is achieved largely through the influence of the professional societies. All dentists, therefore, have the dual obligation of making themselves a part of a professional society and of observing its rules of ethics.

**PRINCIPLE — SECTION 4**

**RESEARCH AND DEVELOPMENT.** Dentists have the obligation of making the results and benefits of their investigative efforts available to all when they are useful in safeguarding or promoting the health of the public.

**CODE OF PROFESSIONAL CONDUCT**

**4-A. DEVICES AND THERAPEUTIC METHODS.** Except for formal investigative studies, dentists shall be obliged to prescribe, dispense or promote only those devices, drugs and other agents whose complete formulae are available to the dental profession. Dentists shall have the further obligation of not holding out as exclusive any device, agent, method or technique.

**4-B. PATENTS AND COPYRIGHTS.** Patents and copyrights may be secured by dentists provided that such patents and copyrights shall not be used to restrict research or practice.

**PRINCIPLE — SECTION 5**

**PROFESSIONAL ANNOUNCEMENT.** In order to properly serve the public, dentists should represent themselves in a manner that contributes to the esteem of the profession. Dentists should not misrepresent their training and competence in any way that would be false or misleading in any material respect.\*

**CODE OF PROFESSIONAL CONDUCT**

**5-A. ADVERTISING.** Although any dentist may advertise, no dentist shall advertise or solicit patients in any form of communication in a manner that is false or misleading in any material respect.\*

**Advisory opinion**

1. If a dental health article, message, or newsletter is published under a dentist's byline to the public without making truthful disclosure of the source and authorship or is designed to give rise to questionable expectations for the purpose of inducing the public to utilize the services of the sponsoring dentist, the dentist is engaged in making a false or misleading representation to the public in a material respect.

**5-B. NAME OF PRACTICE.** Since the name under which a dentist conducts his practice may be a factor in the selection process of the patient, the use of a trade name or an assumed name that is false or misleading in any material respect is unethical.

Use of the name of a dentist no longer actively associated with the practice may be continued for a period not to exceed one year.\*

**5-C. ANNOUNCEMENT OF SPECIALIZATION AND LIMITATION OF PRACTICE.** This section and Section 5-D are designed to help the public make an informed selection between the practitioner who has completed an accredited program beyond the dental degree and a practitioner who has not completed such a program.

The special areas of dental practice approved by the American Dental Association and the designation for ethical specialty announcement and limitation of practice are: dental public health, endodontics, oral pathology, oral and maxillofacial surgery, orthodontics, pedodontics (dentistry for children), periodontics and prosthodontics.

Dentists who choose to announce specialization should use "specialist in" or "practice limited to" and shall limit their practice exclusively to the announced special area(s) of dental practice, provided at the time of the announcement such dentists have met in each approved specialty for which they announce the existing educational requirements and standards set forth by the American Dental Association.

Dentists who use their eligibility to announce as specialists to make the public believe that specialty services rendered in the dental office are being rendered by qualified specialists when such is not the case are engaged in unethical conduct. The burden of responsibility is on specialists to avoid any inference that general practitioners who are associated with specialists are qualified to announce themselves as specialists.

**GENERAL STANDARDS.** The following are included within the standards of the American Dental Association for determining the education, experience and other appropriate requirements for announcing specialization and limitation of practice:

1. The special area(s) of dental practice and an appropriate certifying board must be approved by the American Dental Association.

2. Dentists who announce as specialists must have successfully completed an educational program accredited by the Commission on Dental Accreditation, two or more years in length, as specified by the Council on Dental Education or be diplomates of an American Dental Association recognized certifying board. The scope of the individual specialist's practice shall be governed by the educational standards for the specialty in which the specialist is announcing.

3. The practice carried on by dentists who announce as specialists shall be limited exclusively to the special area(s) of dental practices announced by the dentist.

**STANDARDS FOR MULTIPLE-SPECIALTY ANNOUNCEMENTS.** Educational criteria for announcement by dentists in additional recognized specialty areas are the successful completion of an educational program accredited by the Commission on Dental Accreditation in each area for which the dentist wishes to announce.

Dentists who completed their advanced education in programs listed by the Council on Dental Education prior to the initiation of the accreditation process in 1967 and who are currently ethically announcing as specialists in a recognized area may announce in additional areas provided they are educationally qualified or are certified diplomates in each area for which they wish to announce. Documentation

of successful completion of the educational program(s) must be submitted to the appropriate constituent society. The documentation must assure that the duration of the program(s) is a minimum of two years except for oral and maxillofacial surgery which must have been a minimum of three years in duration.\*

**5-D. GENERAL PRACTITIONER ANNOUNCEMENT OF SERVICES.** General dentists who wish to announce the services available in their practices are permitted to announce the availability of those services so long as they avoid any communications that express or imply specialization. General dentists shall also state that the services are being provided by general dentists. No dentist shall announce available services in any way that would be false or misleading in any material respect.\*

\*Advertising, solicitation of patients or business, or other promotional activities by dentists or dental care delivery organizations shall not be considered unethical or improper, except for those promotional activities which are false or misleading in any material respect. Notwithstanding any ADA Principles of Ethics and Code of Professional Conduct or other standards of dentist conduct which may be differently worded, this shall be the sole standard for determining the ethical propriety of such promotional activities. Any provision of an ADA constituent or component society's code of ethics or other standard of dentist conduct relating to dentists' or dental care delivery organizations' advertising, solicitation, or other promotional activities which is worded differently from the above standard shall be deemed to be in conflict with the ADA Principles of Ethics and Code of Professional Conduct.

**INTERPRETATION AND APPLICATION OF "PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT"**

The preceding statements constitute the Principles of Ethics and Code of Professional Conduct of the American Dental Association. The purpose of the Principles and Code is to uphold and strengthen dentistry as a member of the learned professions. The constituent and component societies may adopt additional provisions or interpretations not in conflict with these Principles of Ethics and Code of Professional Conduct which would enable them to serve more faithfully the traditions, customs and desires of the members of these societies.

Problems involving questions of ethics should be solved at the local level within the broad boundaries established in these Principles of Ethics and Code of Professional Conduct and within the interpretation by the component and/or constituent society of their respective codes of ethics. If a satisfactory decision cannot be reached, the question should be referred on appeal to the constituent society and the Council on Bylaws and Judicial Affairs of the American Dental Association, as provided in Chapter XI of the Bylaws of the American Dental Association. Members found guilty of unethical conduct as prescribed in the American Dental Association Code of Professional Conduct or codes of ethics of the constituent and component societies are subject to the penalties set forth in Chapter XI of the American Dental Association Bylaws. **JADA**

This report was prepared by the Council in February 1983.