The Council met at the ADA Headquarters Building on Thursday and Friday, March 4-5, 2013. The Council considered and discussed the following matters and took the following major actions:

1. In response to the referral of Resolution 165 as amended by the 2012 House of Delegates (The Employee Dentist's Bill of Rights), the Council approved a substitute statement regarding employment of a dentist and voted to transmit the approved substitute statement to the Council on Dental Practice and to seek that Council's support for the adoption of the substituted statement by the 2013 House of Delegates (see Appendix 1).

2. The Council conducted a judicial hearing in response to a disciplinary appeal (Docket Number 2012-01).

3. The Council received and accepted a report from its Bylaws and Policy Review subcommittee and approved forwarding the following resolutions to amend Bylaws Chapter VIII Sections 30.B. and C., 50 and 80.A. relating to the tenures of the Speaker of the House of Delegates and Treasurer to the 2013 House of Delegates (see Appendix 2).

4. The Council received and accepted a report from the Bylaws and Policy Review subcommittee concerning the proposed amendment of Bylaws Chapter V., Section 80, but declined to take action on the amendment proposed in the report.

5. The Council received and accepted reports from the Bylaws and Policy Review subcommittee concerning the review of policies listed below pursuant to 170H-2012 and made the recommendations indicated:

   a. Dentist's Prayer (Trans.1991:643): The Council questioned whether the Dentist's Prayer is true policy of the Association, but believed it should remain available for use and for its historical significance. The Council voted to recommend rescission of the Dentist's Prayer as policy and to move the Dentist's Prayer to the ADA archives as a historical document of importance to the ADA, and requested that the Diversity Committee of the Board of Trustees review the Council's recommendation because of the potential ramifications that the Council's recommendations may have on diverse membership segments. The Dentist's Prayer (Trans.1991:643) is reproduced in Appendix 3.


6. The Council received and accepted informational reports from the following workgroups: Large Group Practice, Continuing Education Ethics Course, Publications, Ethics Hotline, Student Ethics Video.

7. The Council received an informational report concerning the Golden Apple Award for Outstanding Achievement in the Promotion of Dental Ethics.
8. The Council received a presentation from David T. Ozar, Ph.D., FACD, on the current state of dental ethics.

9. The Council received and accepted a report from the Clinical Licensure workgroup concerning the referral of Resolution 29 from the 2012 House of Delegates, approved an amended Resolution 29 (Appendix 7) and voted to forward the amended resolution to the Council on Dental Education and Licensure for its consideration.

10. The Council received and accepted an informational report from the Clinical Licensure workgroup concerning its review of the ethics associated with single sitting licensure examinations.

11. The Council nominated Dr. Richard J. Rosato as the Council’s chair for the 2013-2014 term, and directed that the nomination be forwarded to the Board of Trustees.

12. The Council elected Dr. Linda K. Himmelberger as the Council’s vice chair for the 2013-2014 term.

13. The Council nominated Dr. Jeffrey C. Esterburg to be a consultant to represent the Council on the Interagency Taskforce on Large Group Practice of the American Dental Association.

14. The Council directed that the ADA President be notified that the following Council members are available to serve on the Standing Committee on Constitution and Bylaws at the 2012 Annual Session in San Francisco, California:

<table>
<thead>
<tr>
<th>Name</th>
<th>Chair</th>
<th>Vice Chair</th>
<th>Consultant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Kevin A. Henner</td>
<td>Dr. Dwyte E. Brooks</td>
<td>Dr. Ethan A. Pansick</td>
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<tr>
<td>Richard J. Rosato</td>
<td>Dr. Walter I. Chinoy</td>
<td>Dr. A. Roddy Scarbrough</td>
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<tr>
<td>chair</td>
<td>Dr. Barry D. Curry</td>
<td>Dr. Charlotte L. Senseny</td>
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<td>Dr. Douglas A. Auld</td>
<td>Dr. Thomas E. Raimann</td>
<td>Dr. Laura Williams</td>
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<td>Dr. Darryl L. Beard</td>
<td>Dr. Elizabeth C. Reynolds</td>
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15. Under new business, the Council approved an amendment to Bylaws Chapter X., Section 120.G.i. (Appendix 8).

16. Under new business and pursuant to Chapter X., Section 120.G.i. of the Bylaws, the Council unanimously approved editorial amendments to Sections 30.B. and 30.C. of Bylaws (Appendix 9).

17. Under new business and pursuant to Chapter X., Section 120.G.i. of the Bylaws, the Council unanimously approved editorial amendments to Chapter X., Section 120.G.i. of the Bylaws (Appendix 10).

18. Under new business, the Council received a request from the First Trustee District to review and comment upon revised Bylaws. The request was referred to the Bylaws and Policy Review subcommittee.

19. The Council approved by consent the minutes of its November 16-17, 2012 meeting.

20. The Council recognized the Board of Trustees liaison to the Council, Dr. Joseph F. Hagenbruch, and thanked him for his valuable thoughts, insights and representation of the Council to the Board of Trustees over the past year.

21. The Council recognized retiring Council members Dr. Dwyte E. Brooks, Dr. Walter I. Chinoy, Dr. Jeffrey C. Esterburg and Dr. Kevin A. Henner for their outstanding contributions to the Council during their tenure.

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* The editorial nature of the amendments was previously confirmed by the Speaker of the House of Delegates.
CEBJA Members:

Dr. Kevin A. Henner, chair, New York
Dr. Richard J. Rosato, vice chair, New Hampshire
Dr. Douglas A. Auld, Oklahoma
Dr. Darryl L. Beard, Illinois
Dr. Dwyte E. Brooks, Nevada
Dr. Walter I. Chinoy, New Jersey
Dr. Barry D. Curry, Kentucky
Dr. Jeffery C. Esterburg, Ohio
Dr. Linda K. Himmelberger, Pennsylvania
Dr. George J. "Jack" Muller II, South Dakota
Dr. Ethan A. Pansick, Florida
Dr. Thomas E. Raimann, Wisconsin
Dr. Elizabeth C. Reynolds, Virginia
Dr. A. Roddy Scarbrough, Mississippi
Dr. Charlotte L. Senseny, California
Dr. William M. Walton, Texas
Dr. Laura Williams, Washington
Dr. Chris Salierno, NDC ex-officio, New York

CEBJA Board of Trustees Liaison: Dr. Joseph F. Hagenbruch, trustee, Eighth District

ASDA Consultant: Ms. Christine Tiller, Midwestern University College of Dental Medicine, Arizona
Referral of Resolution 165 from the 2012 House of Delegates

Statement Regarding Employment of a Dentist

Resolved, that the American Dental Association adopts the following as a statement of fair practices in employing a dentist:

These guidelines provide guidance for practice owners or management companies (collectively “employers”) in their working relationships with dentists associated with their practices, either as employees or independent contractors (collectively “employees”). The purpose of these guidelines is to protect the public in the provision of safe, high-quality and cost-effective patient care. Employers and employees should recognize and honor each of the guidelines set forth in this policy statement.

I. As described in the ADA Principles of Ethics and Code of Professional Conduct, dentists’ paramount responsibility is to their patients. An employee dentist should not be disciplined or retaliated against for exercising independent professional judgment in patient assessment, diagnosis, treatment and comprehensive management, including with respect to but not limited to:

a. The use of any materials, or the delivery of a prosthetic device, that represents an acceptable standard of care or the refusal to use materials or deliver a prosthetic device that does not represent an acceptable standard of care;

b. The use of techniques that are reasonably believed to be within the standard of care and are in the patient’s best interest or the refusal to use techniques that are not within the standard of care and are not in the patient’s best interests (recognizing the patient’s right to select among treatment options);

c. The mandated provision of treatment that the employee dentist feels unqualified to deliver; and

d. The provision of treatment that is not justified by the employee dentist’s personal diagnosis for their specific patient.

II. Because all employers and employee dentists must conform to applicable federal, state, and local laws, rules and regulations, an employed dentist should not be disciplined or retaliated against for 1) adherence to legal standards and 2) for reporting to appropriate legal authorities suspected illegal behavior by employers. Employers should make certain that, for example:

a. Appropriate business practices, including by not limited to billing practices, are followed;

b. Facilities and equipment are maintained to accepted standards;

c. Employment contractual obligations are adhered to.

III. Because a dentist is functioning within a professional domain, anyone employing a dentist should, for example:

a. Guard against lay interference in the exercise of a dentist’s independent professional judgment in patient assessment, diagnosis, treatment and comprehensive management;

* Dentists are advised that employment contracts may have provisions that conflict with these guidelines and the ADA recommends that dentists seek legal counsel when considering how contracts affect their professional rights and responsibilities.
b. To the extent permitted by law, promptly provide the dentist access to all relevant patient records in the event of peer review, board complaint or lawsuit, both during and subsequent to the dentist’s employment; and

c. Recognize and honor the dentist’s commitment, as an ADA member, to comply with the *ADA Principles of Ethics and Code of Professional Conduct*.

and be it further

**Resolved,** that the Association publish and promote this statement to dentist employers and employees, and be it further

**Resolved,** that the Association encourage constituent societies to utilize this statement to facilitate legislative and regulatory measures to ensure the fair and ethical treatment of dentist employees and the patients that they treat.
Resolved, that CHAPTER VIII, ELECTIVE OFFICERS, Section 30. NOMINATIONS, Subsection B of the ADA Bylaws be amended as follows (additions underscored, deletions stricken through):

CHAPTER VIII ELECTIVE OFFICERS

Section 30. NOMINATIONS:

B. Nominations for the office of Treasurer shall be made in accordance with the order of business. The search for Treasurer shall be announced in an official publication of the Association in November of the final year of the incumbent Treasurer’s term, together with the recommended qualifications for that position as provided in Chapter VII, Section 100G of these Bylaws. Candidates for the office of Treasurer shall apply by submitting a standardized Treasurer Curriculum Vitae form to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. Each candidate’s application shall be reviewed by the Board of Trustees. The Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of the House of Delegates, with each candidate’s standardized Treasurer Curriculum Vitae and the determination of the Board of Trustees as to whether the candidate meets the recommended qualifications for the office of Treasurer. Only those candidates shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted. No further nominations for the office of Treasurer shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Treasurer when the House of Delegates meets, the term of the incumbent Treasurer shall be extended by one (1) year. Should the incumbent Treasurer be unwilling or unable to serve an additional one (1) year term, the office of Treasurer shall be filled in the same manner as provided in Chapter VIII, Section 80 of these Bylaws. Under these circumstances, former Treasurers of this Association not otherwise eligible to serve as Treasurer would be eligible to serve as Treasurer pro tem for one (1) additional year until the House of Delegates can elect a Treasurer.

and be it further

Resolved, that CHAPTER VIII, Section 30. NOMINATIONS, Subsection C of the ADA Bylaws be amended as follows (additions underscored, deletions stricken through):

C. Nominations for the office of Speaker of the House shall be made in accordance with the order of business. The search for Speaker of the House shall be announced in an official publication of the Association in January–November of the final year of the incumbent Speaker of the House’s term. Candidates for the office of Speaker of the House shall apply by submitting curriculum vitae along with a statement supporting their qualifications to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. The Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of the House of Delegates, with each candidate’s curriculum vitae and statement of qualifications for the office of Speaker of the House. If no candidate has applied, or if there is no remaining eligible candidate for election, then the Association shall inform all delegates of this circumstance and the period to apply shall be extended to thirty (30) days prior to the convening of the House of Delegates. If thirty (30) days prior to the convening of the House of Delegates there is no remaining candidate for election then the Association shall inform all delegates of this circumstance and also inform them that nominations shall be permitted from the floor of the House of Delegates. Only those candidates shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Election Commission. Seconding a nomination is not permitted. No further nominations for the office of Speaker of the House shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Speaker of the House when the
House of Delegates meets, the term of the incumbent Speaker of the House shall be extended by one (1) year. Should the incumbent Speaker of the House be unwilling or unable to serve an additional one (1) year term, the office of Speaker of the House shall be filled in the same manner as provided in Chapter VIII, Section 80 of these Bylaws. Under these circumstances, former Speakers of the House of this Association not otherwise eligible to serve as Speaker of the House would be eligible to serve as Speaker of the House pro tem until the House of Delegates can elect a Speaker of the House of Delegates.

and be it further

Resolved, that CHAPTER VIII ELECTIVE OFFICERS, Section 50. TERM OF OFFICE of the ADA Bylaws be amended as follows (additions underscored, deletions stricken through):

Section 50. TERM OF OFFICE: The President, President-elect, First Vice President and Second Vice President shall serve for a term of one (1) year, except as otherwise provided in this chapter of the Bylaws, or until their successors are elected and installed. The Speaker of the House of Delegates shall be limited to two (2) terms of three (3) years each in total, consecutive or otherwise, excepting the case of a former Speaker of the House who has been elected Speaker of the House pro tem as provided in Chapter VIII, Section 30 of these Bylaws, who may serve until the House of Delegates can elect a Speaker of the House of Delegates. Serving any portion of a three (3) year term shall be considered service of a full three (3) year term. The term of office of the Treasurer shall be three (3) years, or until a successor is elected and installed. The Treasurer shall be limited to two (2) consecutive terms of three (3) years each, excepting the case of a former Treasurer who has been elected Treasurer pro tem as provided in Chapter VIII, Section 30 of these Bylaws, who may serve one (1) additional year until the House of Delegates can elect a Treasurer. Serving any portion of a three (3) year term shall be considered service of a full three (3) year term.

and be it further

Resolved, that CHAPTER VIII, ELECTIVE OFFICERS, Section 80. VACANCIES, Subsection A. VACANCY OF ELECTIVE OFFICE of the ADA Bylaws be amended as follows (additions underscored):

Section 80. VACANCIES:
A. VACANCY OF ELECTIVE OFFICE: In the event the office of President becomes vacant, the President-elect shall become President for the unexpired portion of the term. In the event the office of President becomes vacant for the second time in the same term or at a time when the office of President-elect is also vacant, the First Vice President shall become President for the unexpired portion of the term. In the event the office of First Vice President becomes vacant, the Second Vice President shall become the First Vice President for the unexpired portion of the term. A vacancy in the office of the Second Vice President shall be filled by a majority vote of the Board of Trustees. In the event of a vacancy in the office of Speaker of the House of Delegates, the President, with approval of the Board of Trustees, shall appoint a Speaker pro tem who shall serve until the House of Delegates can elect a Speaker of the House of Delegates for a three (3) year term. Service as a Speaker pro tem shall not count toward the term of office limitation for Speaker of the House as set forth in Section 50 of this Chapter. In the event the office of President-elect becomes vacant by reason other than the President-elect succeeding to the office of the President earlier than the next annual session, the office of President for the ensuing year shall be filled at the next annual session of the House of Delegates in the same manner as that provided for the nomination and election of elective officers, except that the ballot shall read “President for the Ensuing Year.” A vacancy in the office of Treasurer shall be filled by a majority vote of the Board of Trustees until the process of inviting applications, screening and nominating candidates and electing a new Treasurer has been completed by the Board of Trustees and the House of Delegates. The Treasurer pro tem shall be eligible for election to a new consecutive three (3) year term. Service as a Treasurer pro tem shall not count toward the term of office limitation for Treasurer as set forth in Section 50 of this Chapter. The newly elected Treasurer shall be limited to two (2) consecutive terms of three (3) years each, excepting the case of a former Treasurer who has been elected Treasurer pro tem as provided in Chapter VIII, Section 30 of these Bylaws who may serve one (1) additional year.
Appendix 3

**Dentist’s Prayer (Trans.1991:643)**

Resolved, that the American Dental Association express its belief on quality assurance by accepting this first general Parameter of Care:

The Dentist’s Prayer

Thank you, O Lord, for the privilege of being a dentist,
For letting me serve as your instrument in ministering to the sick and afflicted,
May I always treat with reverence the human life which you have brought into being and which I serve,
Deepen my love for people so that I will always give myself gladly and generously to those stricken with illness and pain,
Help me to listen patiently, diagnose carefully, prescribe conscientiously, and treat gently,
Teach me to blend gentleness with skill,
To be a dentist with a heart as well as a mind.

Joseph G. Kalil, D.D.S.
Resolved, that the following definition of Freedom of Choice be accepted as policy of the American Dental Association:

*Freedom of Choice.* The concept that a patient has the right to choose any licensed dentist to deliver his or her oral health care without any type of coercion.
Appendix 5

Definition of Committees (Trans.2001:447)

Resolved, that the ADA policy on Definitions of Committees (Trans.2001:447) be amended so that the amended policy reads as follows (additions are underscored; deletions are stricken through):

Resolved, that the American Dental Association accepts the following definitions for the terms standing committee, special committee, task force, and subcommittee, and ad hoc advisory committee:

Standing committee—A standing committee is ongoing and performs any group of members whose work, assignments, or tasks are ongoing and that performs any work within its particular field either assigned to it by the Bylaws or referred to it by the House of Delegates or Board of Trustees. The councils and commissions of the Association are standing committees of the House of Delegates. The Board of Trustees has standing committees of its own members, and the Committee on the New Dentist composed of one new dentist from each trustee district.

Special committee (also known as a Task Force)—A special committee or task force is a group of members selected to perform a specific task and automatically ceases to exist once the task is completed. Special committees of the American Dental Association may be created by the House of Delegates or, when the House is not in session, by the Board of Trustees, for the purpose of performing specific tasks duties not otherwise assigned by the Bylaws. The Association’s parliamentary authority, The Standard Code of Parliamentary Procedure (4th edition) by Alice Sturgis also refers to special committees as ad hoc committees, and which ceases to exist either when its assigned task is completed or with the adjournment sine die of the annual session of the House of Delegates following its creation.

Task force—A task force is a type of special committee.

Subcommittee—A subcommittee is a subdivision of a committee subgroup of a body which is organized-created for a specific purpose within the jurisdiction of that body, and reports only to the committee that established it. ADA councils and commissions may establish one or more ongoing subcommittees of their own members to which they may delegate have authority delegated to it by the body, and which reports and is are directly responsible to only the delegating body, which may be a the council, committee or commission.

Ad hoc advisory committee—An ad hoc advisory committee is established by an ADA council or commission for a singular purpose and limited duration. An ad hoc advisory committee is composed of subject matter experts who assist the council or commission with a specific matter.
Patient Rights and Responsibilities (Trans.2009:477)

Resolved, that the American Dental Association Dental Patient Rights and Responsibilities Statement (Appendix 2 (Amended), where additions are shown by underscoring and deletions are stricken through) be adopted as policy of the Association, and be it further

Resolved, that item 7 of the patients’ rights be amended to read: You have the right to be informed of continuing health care needs, and be it further

Resolved, that constituent and component societies be encouraged to use the ADA Dental Patient Rights and Responsibilities Statement as a guide in developing a, or revising an existing, patient rights and responsibilities statement, and be it further

Resolved, that constituent and component societies encourage their members to make available the patient rights and responsibilities statement to each patient and to post it conspicuously in their offices and clinics.

ADA Statement on Dental Patient Rights and Responsibilities

Background: The ADA Council on Ethics, Bylaws and Judicial Affairs (CEBJA) has developed the following template Dental Patient Rights and Responsibilities Statement (DPRR Statement) as a guide and as an aid to be used by constituent and component societies and practitioners in creating their own dental patients rights and responsibilities statements. In the DPRR Statement that follows, the term “rights” is used not in a legal sense, but merely to convey an indication that a patient should have an expectation of experiencing treatment in accordance with the enumerated “rights.” Several other dental and medical related organizations publish patient rights statements; indeed, CEBJA reviewed those statements during the development of the DPRR Statement, as well as Standard 5-3 of the ADA Commission on Dental Accreditation (CODA) Standards for Predoctoral Dental Education Programs, which also refers to a statement of patients’ rights.

The DPRR Statement grew out of a collaborative ethics summit conducted in March 2006 by the American College of Dentists (ACD) and the American Dental Association (ADA) on the topic of commercialism in dentistry. Members of CEBJA were invited to attend along with representatives from ADA and ACD leadership, the ADA Council on Dental Education and Licensure, the recognized specialty groups, the National Dental Association, the U.S. Department of Veterans Affairs, the American Dental Education Association, dental school deans and faculty, ethicists, dental editors and leading representatives from the insurance, practice management and dental product manufacturers industry.

The Summit attendees noted that patients have become more assertive in seeking elective procedures and that the dental profession seeks to be mindful of protecting patient autonomy while balancing the importance of overall dental health and lifelong consequences. One of the outcomes of the Summit was the recommendation that CEBJA, the ADA agency dedicated to promoting the highest ethical and professional standards in the provision of dental care to the public, develop a patient rights document that would have the benefit and protection of the patient as its primary objective. It was envisioned that the patient rights document would also serve to remind patients and dentists of the importance of informed consent by involving patients in treatment decisions in a meaningful way. (See also ADA Principles of Ethics and Code of Professional Conduct, Section 1, Principle: Patient Autonomy.)

The CODA Standard 5-3 states: “The dental school must have developed and distributed to all appropriate students, faculty, staff and to each patient a written statement of patients’ rights. The primacy of care for the patient should be well established in…assuring that the rights of the patient are protected.” An online investigation revealed the existence of patient rights statements for dental schools as well as three dental societies—California Dental Association, Minnesota Dental Association and Pennsylvania Dental Association. In addition, the AMA incorporates statements of patient rights and responsibilities
within its Code of Medical Ethics. The ADA document is based on common elements from the patient rights statements used by the dental schools and the three dental associations. The experience from these communities suggests the impact of the DPRR Statement as an educational tool to promote thorough patient-dentist discussions of treatment options.

The rights and responsibilities enumerated in the DPRR Statement were developed as a suggested guide for the development of an appropriate patient relationship where consideration is given to a patient's autonomy and the dentist's clinical skills and judgment.

**ADA Dental Patient Rights and Responsibilities Statement**

Your dentist is the best source of information about your dental health and wants you to feel comfortable about your dental care. Maintaining healthy teeth and gums means more than just brushing and flossing every day and visiting your dentist regularly. As an informed dental patient, it also means knowing what you can expect from your dentist and dental care team and understanding your role and responsibilities in support of their efforts to provide you with quality oral health care.

The rights and responsibilities listed below do not establish legal entitlements or new standards of care, but are simply intended to guide you through the development of a successful and collaborative dentist-patient relationship.

### Patient Rights

1. **You have a right** to choose your own dentist and schedule an appointment in a timely manner.
2. **You have a right** to know the education and training of your dentist and the dental care team.
3. **You have a right** to arrange to see the dentist every time you receive dental treatment, subject to any state law exceptions.
4. **You have a right** to adequate time to ask questions and receive answers regarding your dental condition and treatment plan for your care.
5. **You have the right** to know what the dental team feels is the optimal treatment plan as well as the right to ask for alternative treatment options.
6. **You have a right** to an explanation of the purpose, probable (*short and long term*) results, alternatives and risks involved before consenting to a proposed treatment plan.
7. **You have a right** to be informed of continuing health care needs.
8. **You have a right** to know in advance the expected cost of treatment.
9. **You have a right** to accept, defer or decline any part of your treatment recommendations.
10. **You have a right** to reasonable arrangements for dental care and emergency treatment.
11. **You have a right** to receive considerate, respectful and confidential treatment by your dentist and dental team.
12. **You have a right** to expect the dental team members to use appropriate infection and sterilization controls.
13. **You have a right** to inquire about the availability of processes to mediate disputes about your treatment.

### Patient Responsibilities

1. **You have the responsibility** to provide, to the best of your ability, accurate, honest and complete information about your medical history and current health status.
2. You have the responsibility to report changes in your medical status and provide feedback about your needs and expectations.

3. You have the responsibility to participate in your health care decisions and ask questions if you are uncertain about your dental treatment or plan.

4. You have the responsibility to inquire about your treatment options, and acknowledge the benefits and limitations of any treatment that you choose.

5. You have the responsibility for consequences resulting from declining treatment or from not following the agreed upon treatment plan.

6. You have the responsibility to keep your scheduled appointments.

7. You have the responsibility to be available for treatment upon reasonable notice.

8. You have the responsibility to adhere to regular home oral health care recommendations.

9. You have the responsibility to assure that your financial obligations for health care received are fulfilled.

August 2009
Referral of Resolution 29 from the 2012 House of Delegates

29. Resolved, that the ADA policy “Eliminating Use of Human Subjects in Board Examinations” (Trans.2005:335) be amended by inserting language from the policy “Use of Human Subject in Clinical Licensure Exams” before the first resolving clause of the policy so the new, comprehensive policy “Eliminating Use of Human Subjects in Board Examinations” reads as follows: (additions are underscored and deletions are stricken):

Eliminating Use of Human Subjects in Board Examinations

Resolved, that dental students providing patient care under the direct and/or indirect supervision of qualified faculty is an essential method of learning clinical skills including the ability to manage the anxieties, fears, reflexes and other emotions related to dental treatment, and be it further

Resolved, that although the use of human subjects in licensure examinations raises certain ethical concerns, the practice is not in and of itself unethical as determined by the ADA Council on Ethics, Bylaws and Judicial Affairs (Trans.1993:109), and be it further

Resolved, that the Association recognizes that ethical considerations, including those identified in the ADA Council on Ethics, Bylaws and Judicial Affairs statement entitled Ethical Considerations When Using Human Subjects/Patients in the Examination Process (Annual Reports and Resolutions 2008:103), arise from the use human subject/patients in the clinical licensure examination process, even though the clinical examination process is itself ethical, and be it further

Resolved, that the ADA supports the elimination of human subjects/patients in the clinical licensure examination process with the exception of the curriculum integrated format as defined by the ADA, or the portfolio-style format within dental schools, and be it further

Resolved, that the Association encourages all states to adopt recognize methodologies for licensure that are consistent with this policy and be it further

Resolved, that CHAPTER X. COUNCILS, Section 120. DUTIES, Subsection G. COUNCIL ON ETHICS, BYLAWS AND JUDICIAL AFFAIRS, Paragraph i of the ADA Bylaws be amended as follows (additions underscored):

G. COUNCIL ON ETHICS, BYLAWS AND JUDICIAL AFFAIRS. The duties of the Council shall be to:

* * *

i. Notwithstanding paragraph g of this subsection, the Council shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, change syntax, delete moot material and make similar editorial corrections in the Bylaws which do not alter its context or meaning. Such corrections shall be made only by a unanimous vote of the Council members present and voting.
Resolved, that CHAPTER VIII Elective Officials, Section 30 NOMINATIONS, Subsection B of the ADA Bylaws be amended as follows (additions underscored deletions stricken through):

Section 30 NOMINATIONS:

B. Nominations for the office of Treasurer shall be made in accordance with the order of business. The search for Treasurer shall be announced in an official publication of the Association in November of the final year of the incumbent Treasurer’s term, together with the recommended qualifications for that position as provided in Chapter VII, Section 100G of these Bylaws. Candidates for the office of Treasurer shall apply by submitting a standardized Treasurer Curriculum Vitae form to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. Each candidate’s application shall be reviewed by the Board of Trustees. At least sixty (60) days prior to the convening of the House of Delegates, the Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of the House of Delegates, with each candidate’s standardized Treasurer Curriculum Vitae and the determination of the Board of Trustees as to whether the candidate meets the recommended qualifications for the office of Treasurer. Only those candidates shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted. No further nominations for the office of Treasurer shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Treasurer when the House of Delegates meets, the term of the incumbent Treasurer shall be extended by one (1) year. Should the incumbent Treasurer be unwilling or unable to serve an additional one (1) year term, the office of Treasurer shall be filled in the same manner as provided in Chapter VIII, Section 80 of these Bylaws. Under these circumstances, former Treasurers of this Association would be eligible to serve as Treasurer pro tem for one (1) additional year.

and be it further

Resolved, that CHAPTER VIII Elective Officials, Section 30 NOMINATIONS, Subsection C of the ADA Bylaws be amended as follows (additions underscored deletions stricken through):

C. Nominations for the office of Speaker of the House shall be made in accordance with the order of business. The search for Speaker of the House shall be announced in an official publication of the Association in January. Candidates for the office of Speaker of the House shall apply by submitting curriculum vitae along with a statement supporting their qualifications to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. At least sixty (60) days prior to the convening of the House of Delegates, the Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of the House of Delegates, with each candidate’s curriculum vitae and statement of qualifications for the office of Speaker of the House. If no candidate has applied, or if there is no remaining eligible candidate for election, then the Association shall inform all delegates of this circumstance and the period to apply shall be extended to thirty (30) days prior to the convening of the House of Delegates. If thirty (30) days prior to the convening of the House of Delegates there is no remaining candidate for election then the Association shall inform all delegates of this circumstance and also inform them that nominations shall be permitted from the floor of the House of Delegates. Only those candidates shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Election Commission. Seconding a nomination is not permitted. No further nominations for the office of Speaker of the House shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Speaker of the House when
the House of Delegates meets, the office of Speaker of the House shall be filled in the same manner as provided in Chapter VIII, Section 80 of these Bylaws.
Resolved, that CHAPTER X. COUNCILS, Section 120. DUTIES, Subsection G. COUNCIL ON ETHICS, BYLAWS AND JUDICIAL AFFAIRS, Paragraph i of the ADA Bylaws be amended as follows (additions underscored):

G. COUNCIL ON ETHICS, BYLAWS AND JUDICIAL AFFAIRS. The duties of the Council shall be to:

* * *

i. Notwithstanding paragraph g-h of this subsection, the Council shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial corrections in the Bylaws which do not alter its context or meaning. Such corrections shall be made only by a unanimous vote of the Council members present and voting.