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الهيئة الوطنية لتنظيم المهن والخدمات الصحية
NATIONAL HEALTH REGULATORY AUTHORITY

Scope Of Dental Practice

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Introduction

Dentistry is defined as the evaluation, diagnosis, prevention and/or treatment (nonsurgical, surgical or related procedures) of diseases, disorders and/or conditions of the oral cavity, maxillofacial area and/or the adjacent and associated structures and their impact on the human body; provided by a dentist, within the scope of his/her education, training and experience, in accordance with the ethics of the profession and the law of practicing Medicine and Dentistry in Kingdom of Bahrain (No.7 – 1989) and in accordance with the regulations and standards set by the National Health Regulatory Authority (NHRA).

Scope of dental practice describes the procedures, actions, and processes that a dental practitioner is permitted to undertake in keeping with the terms of their professional license.

Dental practitioners must use sound professional judgment to assess their own scope of practice and they must only work within their area of education, training and competence and whenever encountered a case beyond their education, training, and competence they should refer it to an appropriate qualified dental practitioner who will be able to provide a quality and safe treatment for the patient. A team approach between dental practitioners is encouraged, so that patients are assured of receiving the most appropriate treatment from the dental practitioner who is most appropriate to provide it.

This document sets the procedures the licensed dental practitioner is allowed to practice as a general dentist or as a dental specialist according to his/her license. The dental specialist is allowed automatically to the general dentist scope of practice in addition to his/her specialty scope of practice.

General Dentistry

The practice of general dentistry is the maintenance of oral health through the assessment, diagnosis, management, treatment and prevention of any disease, disorder, or condition of the orofacial complex and associated structures within the scope of the practitioner's approved education, training, and experience. This involves:

1. Evaluation and Diagnostic Procedures

- Provide general oral evaluation and general periodontal evaluation / screening of teeth, and teeth supporting structure (Periodontium), diagnose periodontal diseases, and formulate treatment plans that consider the tooth/teeth health and the patient overall well-being.
- Evaluate and diagnose diseases and pain of intraoral and extraoral tissues inclusive of salivary glands, soft and hard palate, tongue, cheeks, lips, facial symmetry, head and neck lymph glands, and Temporomandibular Joint.
- Evaluate oral functions such as speech, swallowing and mastication.
- Evaluate dental restorations and oral prosthesis and the health of the surrounding tissues.
- Clinical examination and assessment of occlusion.
- Use intraoral and extraoral images and radiographs to diagnose dental pathologies.
- Pulp vitality tests, transillumination, and others.
- Detect signs and symptoms of diseases beyond the oral cavity such as diabetes, cardiovascular disease, substance abuse, eating disorders, and signs of neglect or abuse among others and refer the patient to specialist care.
- Referral of patient to the related dental specialty.
- Charting and documentation.
- Diagnostic cast fabrication.
- Requesting and interpretation of relevant medical laboratory examination.
- Taking Photographs.

2. Preventive Procedures

- Oral hygiene therapy (Instructions and education).
- Dietary counseling.
- General dental prophylaxis
- Topical fluoride application.
- Caries Prevention agent such as Fissure sealant application.
- Fabrication of Custom Fluoride Trays.
- Mouth guard fabrication/ insertion.

3. Restorative Procedures

- Temporary and permanent Conventional Restorations for primary and permanent dentition.
- Direct and in-direct restorations using (such as inlays, on lays, veneers)
- Direct / Indirect Pulp Capping

- Post and core fabrication
- Vital bleaching of discolored teeth.
- Occlusal adjustment.

4. Endodontic Procedures

- Provide dental pulp therapy procedures such as Vital pulp management and therapy, therapeutic pulpotomy and pulpectomy on primary and permanent teeth.
- Provide Conventional root canal therapy for primary and permanent teeth.
- Non-Surgical retreatment of Uncomplicated cases.
- Non vital Bleaching of Discolored Teeth
- Bleaching of discolored dentin and enamel of teeth.
- Clinical judgment to identify cases that require advanced endodontic care (referral to Endodontist) , such as:
  - Root canal systems with unusual anatomy, anomalies, iatrogenic or pathologic loss of hard tissue, or with foreign body impaction.
  - Tooth/teeth with para-radicular pathologies (cyst or perio-endo lesion), immature root development, root fracture, or other dentoalveolar complications.
  - Tooth/teeth with failed Endodontic treatment, and those requires removal of posts.
  - Tooth/teeth that require elective endodontic treatment as part of joint care with prosthodontist for occlusion rehabilitation.

5. Periodontal Procedures

- Treatment of gingivitis conditions by Scaling and root planning
- Non-surgical periodontal therapy (deep scaling) for stage I, II Periodontitis.
- Gingivoplasty /gingivectomy localized single tooth only.
- Application of local medication delivery system
- Single crown lengthening.
- Incision and drainage of periodontal abscesses
- Provisional splinting of teeth
- Referral of advanced gingivitis and periodontitis to a specialist for active treatment.
- Referral of severe gingival overgrowth cases (plaque and non-plaque induced) to a specialist.
- Identify mucogingival defects including: severe gingival recessions, aberrant frenum attachments, and teeth surrounded by lack of keratinized tissues to a periodontist.
- Provide monitoring and maintenance care following the active treatment provided by a periodontist.
- Provide monitoring and maintenance to dental Implant.

6. Prosthodontics Procedures

- Inlay and onlay preparation/fabrication
- Veneer preparation/fabrication

- Partial coverage crown preparation/fabrication
- Full crown preparation/fabrication that does not require modification of the surrounding tissue or alteration of occlusion. (where crown root rations and physiologic soft tissue, and occlusion is within normal).
- Conventional bridge preparation/fabrication that does not require modification of the surrounding tissue or alteration of occlusion. (simple cases include maximum of 3 crowns per arch confined to single quadrant, where crown root rations and physiologic soft tissue, and occlusion is within normal).
- Adhesive Maryland bridge preparation/fabrication
- Removable Partial Denture fabrication where no modification to the occlusion is required.
- Removable Complete Denture fabrication where no modification to the occlusion is required.
- Denture relining
- Repair of removable / fixed prosthodontic restorations.
- Simple implant-supported crowns (requires specific training and privileging from NHRA).
- Interim prosthesis in preparation to refer the case to specialist care for complete mouth rehabilitation.
- Refer to a prosthodontist cases requiring anterior prosthesis with aesthetic demand.

7. Oral Surgery Procedures

- Normal and simple extraction of teeth / roots.
- Uncomplicated Surgical extraction of teeth / roots.
- Clinical judgment to identify and refer any complicated extraction case that requires specialist care. This includes: tooth/root located close to vital anatomic structure, tooth/root with un-usual anatomic shape, tooth/root close to pathologic tissue, and tooth/root removal that is expected to be associated with significant systemic complications).
- Referral of cases that developed un expected complications during extractions like: ora-antral communications, displacement into the sinus, and remaining root fragments that could not be removed or others.
- Removal of pathological tissues associated with tooth extraction (consider biopsy for suspicious
- Identify and refer to specialist care conditions such as chronic orofacial pain, oral mucositis, bisphosphonate-related osteonecrosis of the jaws, oral pathology related to radiation therapy, dry mouth conditions, and other soft tissue or hard tissue mucosal lesions.
- Manage patients with a history of cancer therapy (evaluation, diagnosis, intervention, and referral when needed).
- Identify TMJ Disorders and refer the patient to specialist care.
- Incision and drainage of intraoral abscesses.
- Suturing of intraoral wounds.
- Excision of hyperplastic tissues

- Provide local and regional block anesthesia within the scope of dental practice.

8. Pediatrics Procedures

- Provide preventive, restorative, and surgical care to children based on best practices while engaging the children and their guardians.
- Pulpotomy (primary teeth)
- Root Canal Therapy of Primary Teeth
- Passive space maintainer fabrication/insertion
- Stainless Steel/ Aesthetic (zirconium) crown fabrication/insertion.
- Refer pre-cooperative children, anxious and dental phobic children to pediatric dentist.
- Identify signs of growth abnormalities and refer the patient to specialist care.

9. Orthodontics:

- Provisional diagnosis of malocclusion and teeth eruption
- Provisional diagnosis of dental developmental abnormalities.

10. Oral Medicine:

- Identifying dental abnormalities.
- Identifying oral lesions.
- Treatment of simple oral lesions.
- Manage oral infections by utilizing antibacterial, antiviral, anti-inflammatory, and anti-fungal medicaments.

11. Emergency Management:

- Provide emergency treatment and palliative interventions to dental pain, and oral tissue irritations through (not inclusive to): placement of sedative dressing, pulpotomy, pulpectomy, incision and drainage, removal of foreign body, suture intra-oral wound, pericoronitis management, cutting displaced orthodontic wire.
- Management of post-operative or post-surgical complications.
- Diagnose and manage dentoalveolar injuries (dressing, re-placement, re-implantation, and splinting).
- Referring the complex cases to specialist care.
- Manage medical emergencies in the dental office.
- Prescription of medication to manage the condition within the scope of dental practice.

Dental Specialties

Dental Specialties are fields of dentistry requires Advanced Qualifications / residency training program (refer to Dental PQR). Specialist dentist can perform both General and specialist scope of practice.
A specialist dentist can practice the scope of work of a general dentist, provided that he has continuity in general dentistry Procedures (i.e without discontinuity from the core of general practice).

1. Orthodontics

Orthodontics is the branch of dentistry that is concerned with the supervision, guidance and correction of the growing and mature dentofacial structures and includes the diagnosis, prevention, interception and treatment of all forms of malocclusion of the teeth and associated alterations in their surrounding structures. This involves:

- Provide specific Orthodontic Evaluation: Evaluation and diagnosis of conditions such as malocclusion, orofacial skeletal growth abnormalities, craniofacial anomalies, cleft lip and palate, sleep-related breathing disorders and speech problems.
- Interpret intraoral and extraoral diagnostic images, including x-rays and Cone Beam Computed Tomography (CBCT).
- Use advanced diagnostic techniques to plan the treatment for patient with malocclusion with or without orthognathic abnormalities.
- Manage cases with malocclusion and or dentofacial growth abnormalities of all age groups and different medical and behavioral disabilities.
- Apply evidence-base orthodontic techniques, might include: The use of removable appliances, fixed appliances, functional appliances, and orthopedic appliances, Temporary anchorage devices assisted orthodontic treatment.
- Work as an effective member in multidisciplinary team to manage malocclusion and other craniofacial abnormalities in patients with un-usual conditions such as:
  - Patient with cleft lip and palate,
  - Patient with under oncology therapy or with history of cancer therapy
  - Patient with periodontal disease
  - Patient with history of dentoalveolar trauma
  - Patient with TMJ disorders.
- Work as an effective member in an interdisciplinary team to treat and manage major dentofacial abnormalities prior, during and after orthognathic surgery.
- Retreat cases having relapse or incomplete achievement of treatment objectives.
- Capture and maintain pre-operative and post-operative images and radiographs to assess, monitor and record treatment progression.

2. Pedodontics

Pedodontics is the branch of dentistry that is concerned with oral health care for children from birth through up to 18 years old. It includes management of orofacial problems related to medical, behavioral, physical, or developmental disabilities. This involves:

- Provide comprehensive child Evaluation: Evaluation of young children and children with medical, genetic, special needs, and behavioral conditions through system-oriented physical examinations, clinical assessments, parental interviews, and laboratory tests in addition to growth and development evaluation based on physical, motor, sensory, and cognitive assessment.
- Formulate an individualized treatment plan considering the child's condition.
- Identify and report suspected child abuse, neglect, and non-accidental trauma.
- Preventive dental care (including oral hygiene, injury prevention, dietary, and habit counseling).
- Behavior management techniques for apprehensive children (including voice control, non-verbal communication, tell-show-do, positive reinforcement, distraction, parental presence/absence, hand over mouth and Physical restraint).
- Conventional Restorative Dentistry Procedures.
- Manage primary and permanent teeth with structural abnormalities such enamel hypomineralization, and amelogenesis imperfecta.
- Occlusion Management: for the primary, mixed and permanent dentitions, which includes:
- Balancing and compensation extractions (after consultation with orthodontist).
- Correction of single tooth/teeth malocclusion by means of interceptive orthodontics techniques to manage a range of conditions such as:
  - Dentoalveolar growth modification with functional appliance
  - Simple anterior and posterior crossbites
  - Functional occlusal shift.
  - Anterior spacing with or without dental protrusion
- Manage malocclusion resulting from dental anomalies such as exposure of impacted teeth, forced eruption of submerged teeth, and adjustment of micro & macro teeth.
- Refer children with malocclusion to specialist orthodontist at the appropriate time.
- Prosthodontic procedures for primary teeth / Replace missing tooth/ teeth using interim fixed or removable prostheses.
- Management of bruxism.
- Manage vital and non-vital pulp therapy in immature permanent teeth Conventional Root Canal Therapy
- Uncomplicated extraction of primary and permanent teeth, full management of all types of tooth injuries (traumas).
- Conduct minor oral surgery - (with clinical judgement of the complexity of the case) such as:
  - Routine Dental Extraction
  - frenectomy, tongue tie, mucocele removal, and removal of foreign body
  - Exposure of impacted tooth in the child population

- Inhalation Sedation (Anxiolysis), Sedation, and General Anesthesia.
- Treatment of medically compromised physically and mentally disables children under local or general anesthesia.
- Full mouth rehabilitation for healthy apprehensive children under general anesthesia.
- Management and treatment of children receiving chemotherapy and / or radiation.
- Work as effective member of multidisciplinary team to provide oral/dental care for children.

3. Endodontics

Endodontics is branch of dentistry that is concerned with the morphology and pathology of the pulpo-dentine complex and periradicular tissues. Its study and practice encompasses the basic clinical sciences including the biology of the normal pulp, and the etiology, diagnosis, prevention, and treatment of diseases and injuries to the pulp and associated periradicular tissues. This involves:

- Manage odontogenic infections of pulp origin using intracanal medicaments, and oral antibiotic.
- Provide non-surgical endodontic treatment; for primary and permanent teeth using different mechanical and chemical preparation techniques as well as different obturation techniques that is adequate for each case.
- Provide root canal treatment for immature teeth utilizing evidence-based and best practice techniques (i.e., regeneration, apexification, and calcification).
- Provide endodontic treatment for complicated cases such as :
  - Root canal re-treatment.
  - Pulp system with separated instrument, unusual root anatomy (i.e., dilaceration), and Root canal system with anomalies (i.e., pulp stones, calcified canals).
  - Repair pathologic or iatrogenic defect in the pulp system: resorption, and perforation.
  - Manage perio-endo lesion.
  - Manage longitudinal tooth fracture and root fracture
  - Removal of the dental posts from root canal system space.
- Bleach endodontically treated teeth.
- Manage dentoalveolar injuries' complications.
- Follow –up on endodontic treatment over teeth that have peri-radicular pathologies over a period of time to ensures healing necessary before final restoration
- Surgical Procedures:
  - Surgical drainage: Incision and drainage, and Cortical trephination
  - Periradicular surgery: Curettage, biopsy, root end resection, root end preparation and filling, and apicectomy.
  - Corrective surgery: Perforation repair, mechanical (iatrogenic), resorptive (external and internal), root resection, and hemisection.
  - Replacement surgery i.e. intentional replantation.
  - Tooth transplantation.

  - Management of large lesions of endodontic origins in collaboration with oral surgeons.
- Restore vital and none vital teeth utilizing different restorative procedures, techniques and materials.
- Elective endodontic treatment as part of joint care with other dental specialties and whenever indicated.

4. Periodontics

Periodontics is the branch of dentistry that is concerned with the prevention, diagnosis and treatment of diseases or abnormalities of the supporting tissues of the teeth or their substitutes. This involves:

- Provide specific periodontal evaluation: inclusive of medical and dental history, clinical examination of occlusion, teeth, and teeth supporting structure (Periodontium). In addition to identify risk factors, diagnose periodontal diseases, and formulate treatment plans that consider the tooth/teeth health and the patient overall well-being.
- Provide dental prophylaxis, oral hygiene education, oral habit education, and dietary counseling, in addition to the application of medicament to treat and protect from oral and dental pathologies.
- Provide treatment plans for primary care practitioners /hygienist in relation to management of periodontal disease.
- Provide monitoring and maintenance for the periodontium around dental implant.
- Manage patients with periodontal diseases and related conditions through diagnosis, develop comprehensive treatment plan, and provide the required intervention. In addition to monitoring the disease progression and treatment outcomes.
- Manage plaque-induced and non-plaque-related periodontal diseases and disorders of the periodontium using Non-surgical management techniques, which may include:
  - Biofilm control
  - Mechanical scaling and root planning therapy including periodontal curettage
  - Local and systemic adjunctive therapies.
  - Occlusal therapy and splinting for periodontal reasons
- Manage plaque-induced and non-plaque-related periodontal diseases and disorders of the periodontium using Surgical management techniques of soft and hard tissues, which may include:
  - Resective periodontal surgical procedures: Examples includes periodontal open flap debridement, apically positioned flap, root resection, curettage, subgingival irrigation and debridement, gingivoplasty, gingivectomy, periodontal osseous surgery, flap procedures, functional crown lengthening surgery, osteoplasty, osteotomy, vestibuloplasty, alveoloplasty, excision of intraoral sialolith, excision of mucous extravasation and mucous retention cysts, biopsies, frenectomy, and removal of exostosis.
  - Regenerative and reconstructive periodontal surgical procedures: Examples includes periodontal osseous grafting -Autogenous and non-autogenous-, guided tissue

regeneration, guided bone regeneration, use of biologics, and utilization of tissue substitutes, where appropriate.
  - Periodontal plastic and esthetic surgical procedures: Examples include gingival augmentation, root coverage procedures, and esthetic crown lengthening surgery.
- Other surgical Procedures:
  - Repair of soft/hard tissue defects i.e oroantral fistula management, vestibuplasty procedures alveolar bone and soft tissue ridge augmentation.
  - Periodontal therapy in conjunction with Orthodontic procedures such as surgical exposure of unerupted tooth, and managing gingival/periodontal recession, gingivectomies, frenectomies.
  - Maintain and enhance alveolar ridge height and thickness to receive implant i.e. socket preservation, and internal sinus lift.
- Provide Surgical endodontic therapy including:
  - Apicectomy, root amputation, and hemi-section in collaboration with the endodontist who would assume the responsibility for completion of the case.
  - Removal of tooth/teeth & remaining roots (simple, surgical & impacted extractions) in the course of periodontal and implant therapy.
  - Resection of tooth/root.
- Dental Implantology:
  - Develop dental implant site by means of soft tissue, and hard tissues reservation or reconstruction, Examples: Ridge augmentation, Internal sinus floor elevation, minimal traumatic extraction, Alveolar ridge preservation, and increase keratinized tissues around implant.
  - Dental implant surgical placement as per the planned treatment with the multidisciplinary team (or Prosthodontist).
  - Dental implant monitoring and maintenance procedures.
  - Dental implant complication: management of short term and long-term complications that may occur around dental implants through non-surgical and surgical management of peri-implant disease including implant removal.

5. Prosthodontics

Prosthodontics is the branch of dentistry that is concerned with diagnosis, treatment planning, rehabilitation, and maintenance of patients with a range of clinical conditions involving missing or deficient teeth and/or craniofacial tissues, using biocompatible substitutes. This involves:

- Provide specific prosthodontic evaluation: inclusive of medical and dental history, clinical examination of occlusion, teeth, and teeth supporting structure (Periodontium), identification of risk factors, diagnosis and treatment plan with specific consideration to mastication, speech, and aesthetic and its impact on the patient well-being. In addition to monitoring the treatment provided impact and outcomes.
- Provide occlusion reconstruction/full-mouth rehabilitation that may or may not involve vertical height modifications and elective endodontic treatment:

- Interim prosthesis in preparation for complete mouth rehabilitation analysis and treatment.
- Complex crown and bridgework.
- Multi-unit fixed partial denture utilizing different materials and techniques.
- Immediate maxillary and/or mandibular denture.
- Overdentures.
- Complete maxillary and/or mandibular denture.
- Denture repair procedures including rebase/reline procedure.
- Construction of Precision Attachments for retention of Prostheses
- Maxillofacial Prosthetic Replacement for Intraoral Acquired or Congenital Defects.

- Perform occlusal therapy to equilibrate patient's natural dentition and stomatognathic system.
- Diagnose and non-surgical treatment of temporomandibular disorders.

- Dental Implantology:
  - Evaluate the patient to identify different clinical needs with special consideration to mastication, speech, and aesthetics. Refer the complex dental implant cases to oral and maxillofacial surgeons for advanced surgical procedures.
  - Dental implant restorations (prosthetic part of implant placement) such as:
    - Implant-supported crowns and bridges
    - Implant-supported fixed partial denture
    - Implant-supported overdenture
    - Implant Supported complete denture
  - Repair of implant-supported prosthesis

6. Conservative Dentistry

Conservative dentistry is the branch of dentistry that is concerned with restoration of parts of the teeth that are defective as a result of disease, trauma, or abnormal development to a state of normal function, health, and esthetics. This involves:

- Direct restoration – Amalgam, Composite resin, GIC.
- Indirect restoration – Inlay, onlay, crowns (base metal, precious metal, porcelain fused to metal, or metal free ceramic).
- Veneers – Direct or indirect.
- Management of tooth surface loss.
- Dental management of dental anomalies.
- Restorative phase of dental implant.

7. Restorative Dentistry

Restorative Dentistry is the branch of dentistry that is concerned with dental procedures in the dentulous or partially edentulous mouth. This involves conservative, endodontic, periodontic and prosthetic procedures.

8. Oral medicine

Oral medicine is primarily a non-surgical specialty with procedures limited to diagnostic biopsies, small excisions, therapeutic injections, and other minor surgical interventions. In many cases, conditions are managed medically with the use of topical and systemic medications – oral medicine doctor has received additional specialized training and experience in the diagnosis and management of oral mucosal abnormalities (growths, ulcers, infection, allergies, immune-mediated and autoimmune disorders, cancers), salivary gland disorders, temporomandibular disorders (e.g.: problems with the TMJ) and facial pain (due to musculoskeletal or neurologic conditions), taste and smell disorders; and recognition of the oral manifestations of systemic and infectious diseases.

- Biopsies. Surgical removal of tissue or bone specimen for analysis to obtain a diagnosis.
- Ordering and interpretation of tests. Such tests include imaging studies (x-rays, CT scans, MRIs), salivary and blood tests and microbiological investigations.
- Medical management. Treating with topical and systemic medications to treat a wide range of conditions.
- Specialized injections. Injections in the mouth or face for diagnostic purposes, or for administration of medication for pain relief, anesthesia, or inflammation

9. Oral Surgery

Oral surgery is the branch of dentistry concerned with the diagnosis and surgical management of conditions affecting the oral and dento-alveolar tissues. This involves:

- Provide specific oral evaluation: inclusive of medical and dental history, clinical examination of occlusion, teeth, periodontium, Peri-radicular tissues, mucosal tissue health, salivary glands dysfunction, oral cancer screening, oral hygiene evaluation along with identification of risk factors, diagnosis and treatment of odontogenic and all other oral infections and pathologies while considering patients' mastication, speech, and aesthetic and its impact on their well-being. In addition to monitoring the treatment provided impacts and outcomes.
- Collaborate with multi-disciplinary team to evaluate and plan the management for patients requiring dentoalveolar surgery in relation to orthodontic treatment and maxillofacial rehabilitation care.
- Evaluate and diagnose dental and non-dental chronic orofacial pain
- Evaluate the diagnose TMJ dysfunction.
- Evaluate and tailor treatment plan for patients requiring orofacial or maxillofacial prosthetic care considering their other dental needs and overall wellbeing (i.e. well, medically compromised patients, and patients with special needs).
- Diagnose and manage dento-alveolar trauma level of involvement depends on the location/complexity of the fracture
- Manage TMJ dislocation and pain

- Manage oral post-surgical complications
- Manage chronic pain conditions such as oral mucositis, bisphosphonate-related osteonecrosis of the jaws, oral pathology related to radiation therapy, neuralgias.
- Manage non-dental chronic orofacial pain such as burning mouth syndrome, neuralgias myofascial and atypical facial pain, autonomic cephalalgias, headaches and migraines and temporomandibular joint (TMJ) disorder
- Manage pre-malignant lesions of the oral cavity such as leukoplakias or erythroplakias
- Manage Oral health of patient undergoing cancer therapy, organ transplant and other conditions that requires concurrent oral intervention during the course of medical care.
- Manage patient with history of cancer therapy (evaluation, diagnosis, intervention, and referral whenever needed).
- Work as an effective member within a multidisciplinary team to provide the care to patient in need of full mouth rehabilitation.
- Collaborate with other dental specialists' colleague to fulfil the surgical component of patient oral care as part of a comprehensive treatment plan.
- Surgical Procedures: (Note: This is not an inclusive list)

- Tooth Extraction (simple and complex) including impacted, submerged, hemisection, root amputation, and those in un-usual anatomic locations. Which may or may not involve elevation of muco-periosteal flap and bone resection
- Surgical removal of pathological tissues resulting from pulpal pathosis /periradicular surgery (cysts,abscesses, granulomas).
- Surgical exposure of un-erupted tooth
- Socket preservation
- Minor oral surgeries of the soft tissue and hard tissue, including alveoloplasty, apically repositioned flap, autogenous/non-autogenous graft, excision of intra oral sialolit, excision of mucous extravasation and mucous retention cysts, curettage, biopsy, frenectomy, intra-oral incision and drainage, open flap debridement, oroantral fistula management, tooth re-implantation, vestibuloplasty, removal of exostosis, and partial ostectomy.
- Apicectomy
- External and internal sinus lift
- Ridge augmentation
- Surgical management of dentoalveolar traumas and fractures.
- Surgical management of patient with history of cancer therapy (or undergoing cancer therapy).
- Surgical management of post-surgical complications.
- Assist an Oral and Maxillofacial Surgeon in major surgeries in areas within their scope of practice.

- Dental Implantology:
  - Work to develop dental implant site by means of soft tissue, and hard tissues preservation or reconstruction, Examples:
    - Ridge augmentation
    - Internal and external sinus floor elevation
    - Minimal traumatic extraction.
    - Alveolar ridge preservation
  - Dental implant surgical placement (surgical part of implant placement) as per the planned treatment with the multidisciplinary team (or Prosthodontist).
  - Dental implant monitoring and maintenance procedures.
  - Dental implant complication: management of short term and long-term complications that may occur around dental implants through non-surgical and surgical management of peri-implant disease including implant removal.
- Administer sedation.
- Treat patients under General Anesthesia.

10.Oral and Maxillofacial Surgery

- Oral and Maxillofacial surgery (OMFS) is part of surgery which deals with the diagnosis, surgical and adjunctive treatment of diseases, injuries and defects of the human jaws and associated structures. The OMFS scope discussed below also involves **in addition to the scope of oral surgery scope mentioned earlier**.
- NHRA will approach the scope of OMFS on the merit of the robustness of training. Globally there are FOUR basic systems of education and TRAINING in OMFS. What makes each unique or superior is the SCOPE of PRACTICE adjudicated to that PATHWAY of TRAINING.
- **The FOUR basic systems of education and TRAINING in OMFS are:**
  - Oral and Maxillofacial Surgery [dual/double DENTAL and MEDICAL degree]
  - Oral and Maxillofacial Surgery [only a DENTAL degree]
  - Oral and Maxillofacial Surgery [only a MEDICAL degree and *no* or minimal dental training]
  - Oral and Maxillofacial Surgery [combination of DENTAL and MEDICAL education, but *not* degree based (stomotology) i.e., this is in China and the Fareast Countries *only*]

Oral & Maxillofacial Surgery SCOPE of PRACTICE can be divided into THREE parts:
Scope 1: Oral Surgery and Surgical Dentistry (Core 'Dental' Privileges)

- Dento-alveolar surgery (impacted teeth, difficult/complicated tooth extractions, extractions on medically compromised patients, minor/intermediate (simple) bone grafting, impacted tooth exposures, pre-prosthetic surgery etc.).
- Diagnosis and treatment of minor/moderate (simple) soft and hard tissue trauma of the oral and maxillofacial region (mandible fractures, zygoma/maxilla fractures etc.).

- Diagnosis and treatment of minor/moderate (simple) benign pathology (cysts and non-malignant tumors of the mouth and facial skeleton).
- Diagnosis and treatment of Oral Mucosal Disorders (Oral Medicine).
- Surgery to insert osseo-integrated dental implants and maxillofacial implants for attaching oral & craniofacial prostheses [bone anchored hearing aids is excluded and under (Scope 3)]
- Cleft Palate – alveolar bone grafting without bone harvest.
- Dento-alveolar Laser(s)

Scope 2: Craniofacial and Facial Plastic Surgery (Additional 'Medical' Privileges)

- Cosmetic surgery limited to the head and neck: (browlift, blepharoplasty, otoplasty, cheek augmentation, chin augmentation, genioplasty, oculoplastic, neck liposuction, lip enhancement, injectable cosmetic treatments, Botox, chemical peel etc.)
- Splint and surgical treatment of sleep apnea.
- Stereo-lithography in Maxillofacial Surgery.
- Anaesthesia (Local and Regional Blocks in the Head & Neck, Intravenous Sedation, Inhalation Sedation, Oral Sedation).
- Dental, Oral & Maxillofacial [Head & Neck] Laser(s).
- Distant Bone harvesting.
- Diagnosis and treatment of Salivary Gland Disease (Parotid, Submandibular and Sublingual).
- Skull Base Surgery.

Scope 3: Head & Neck Surgery (Dual 'Dental' and 'Medical' Privileges)

Diagnosis and treatment of congenital craniofacial malformations such as cleft lip and palate and cranial vault malformations such as cranio-synostosis.

- Diagnosis and treatment of dysgnathia, and orthognathic reconstructive surgery, genioplasty, maxillo-mandibular advancement, and surgical correction of facial asymmetry.
- Diagnosis and treatment of major (complex) soft and hard tissue trauma of the oral and maxillofacial region (nasal/ethmoid fractures, mid-face (LeFort) fractures, skull fractures, frontal sinus fractures and orbital fractures etc.).
- Diagnosis and treatment (ablative and reconstructive surgery/flap harvest/flap reconstruction, microsurgery) of malignant pathology (Head & Neck Surgery).
- Diagnosis and treatment of cutaneous malignancy (skin cancer), lip reconstruction.
- Diagnosis and treatment of chronic facial pain disorders.
- Diagnosis and treatment of the temporomandibular joint (TMJ) (medical treatment, surgical treatment including arthroscopic surgery, and total joint replacement [TJR] of the TMJ).

Recommendation on NHRA Registration of Scope:

Pathway of Education & Training	Scope of Practice
Pathway 1: Oral & Maxillofacial Surgery (Dual/Double Dental and Medical degree)	Refer to Scope 1, Scope 2 & Scope 3
Pathway 2: Oral & Maxillofacial Surgery (Dental Degree Only)	Refer to Scope 1 only. **note:** exception would be the North American (USA and/or Canada Board Certified) Trained – add Scope 3.
Pathway 3: Oral & Maxillofacial Surgery (Medical Degree and no *or* minimal Dental training)	Refer to Scope 3 only.
Pathway 4: Oral & Maxillofacial Surgery (Combination of Dental and Medical education, but not degree based (stomatology) (China and the Fareast Countries *only*).	Refer to Scope 1 only. **note:** if completed additional 8-years of training in the same pathway – add Scope 3.

Reference

- HCP_Clinical guidelines Scope of Dental practice_v1.0_2017
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