

The National Agenda for 2006 was established after review of the suggestions contained in the reports of the 2005 Fall Regional meetings, National CODE Meeting and from the Regional CODE Directors. Previous National agendas are reviewed to avoid topic duplication. Inclusion of a previous topic may occur for discussion from the aspect to what has changed and the response/action taken and the outcome.

Thank you to the Regional CODE Directors and the membership for making recommendations to establish the National Agenda. Each Region is encouraged to also have a Regional Agenda.

Each school attending the Regional Meetings is requested to bring their responses to the National Agenda in written form AND electronic media This information is vital to the publication of the Annual Fall Regional Report.

Continue to invite your colleagues, who are Dental Licensure Board examiners and your Military and Public Health Service colleagues who head/instruct dental education programs to your Regional meetings.

Each Region should select next year's meeting site, date or tentative date during your Fall Regional CODE meeting so this information may be published in the Annual Fall Regional Report and on the Web site.

The Regional meeting reports are to be submitted to the National Director in **publishable format** as an attachment to e-mail.

The required format and sequence will be:

- 1. CODE Regional Meeting Report Form****
- 2. Summary of responses to the National Agenda.**
- 3. Individual school responses to the National Agenda**
- 4. The Regional Agenda summary and responses.**
- 5. CODE Regional Attendees Form****

** (Copies may be obtained from the Web site:
<http://www.unmc.edu/code/codeframe.html>).

NOTE: to locate the web site via a search engine, enter Academy of Operative Dentistry and then use the link CODE and ADEA.

Send a hard copy and an electronic copy of the report to the National Director. Both electronic and hard copy versions are to be submitted **within thirty (30) days** of the conclusion of the meeting.

Consortium of Operative Dentistry Educators
2006 National Code Agenda

National CODE Meeting:

The meeting will be held Thursday, February 22, 2007 from 4:00 pm to 6:00 pm at the Fairmont Hotel in Chicago, Illinois. Suggestions as to how to make this meeting productive and efficient are requested.

National Directory of Operative Educators:

The CODE National Office maintains the National Directory of Operative Educators as a source for other professionals. It is imperative that the information be as current as possible.

To update your university's directory listing on the CODE website, <http://www.unmc.edu/code/codeframe.html>, click on the red link, "Please help update," found under the CODE menu on the left side of the screen. Make any necessary changes and click "submit form".

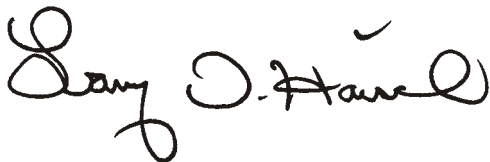
Please have each school in your Region update the following information for the National Directory of Operative Educators:

*School name and complete mailing address
Individual names: (full time), phone #, fax #, e-mail address of faculty who teach operative dentistry.
(This could be individuals in a comp care program, etc. if there is no defined operative section of department.)*

Include this information with the Regional Report by mailing a hard copy and an electronic copy to the National Office of CODE. All update information received by mail will be forwarded by the National Office to the Webmaster for inclusion on the Web site.

Your help and cooperation in accomplishing the above tasks helps save time and effort in maintaining a complete web site and publishing the Annual Fall Regional Report in a timely fashion.

Thank you,



Larry D. Haisch, D.D.S.
National Director, C.O.D.E.
UNMC College of Dentistry
40th & Holdrege Streets
Lincoln, Ne 68583-0750

lhaisch@unmc.edu
Office: 402-472-1290
Fax: 402-472-5290

2006 NATIONAL CODE AGENDA

(Please cite the evidence were applicable. If utilizing reports/forms/schedules from your Regional schools, please submit these as PDF files for utilization in the Annual Fall Regional Report)

- I. The following agenda item is a joint project between ADEA and CODE. The information should be useful to all for revision or confirmation of our teaching efforts.

Pre-clinical Operative Dentistry Curriculum Survey

List the ten most important Operative Dentistry concepts or techniques that should be taught in a pre-clinical lab course in relative order of importance. One can identify more than ten, but please choose at least ten essential core Operative Dentistry Curriculum items that are “non-negotiable” in your school. The concepts or techniques that are identified should be those that are routinely used in your clinics (adult patients) and/or that faculty believe are useful to a practicing dentist.

Examples (in no particular order) include, but are NOT limited to:

- Amalgam (Class I, Class II, Class III, Class V).
- Composite Direct (Class I, Class II, Class III, Class IV, Class V, Class VI)
- Diastema Closure (Elective with composite or porcelain)
- Composite Indirect (Class I, Class II)
- Veneers (Porcelain, composite)
- Inlays (Gold, composite, ceramic)
- Onlays (Gold, composite, ceramic)
- Glass Ionomer Restoratives (Class I, Class V)
- Sealants and Preventive Resin Restorations
- Isolation Techniques (Rubber dam, others)
- Caries Risk Assessment
- Caries Diagnosis and Removal
- Caries Control (Sedative fillings, pulp capping)
- Remineralization Therapies
- Amalgam Core Build-ups (Pin, slot, or adhesive retention)
- Composite Core Build-ups (Mechanical and adhesive retention)
- Air abrasion techniques
- Lasers for restorative procedures
- CAD-CAM restorations (CEREC III)

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Please be as specific as possible. For example:

Amalgam (Class I, II, And V only). Class III was omitted.

Veneers (Direct composite only). Porcelain taught by Fixed.

Inlays (Gold only). CAD-CAM Ceramic/Composite taught in Esthetics or as an Elective.

Composite Core Build-ups only. (Amalgam excluded).

Some of these procedures may be covered in another course such as Fixed Prosthodontics or even a separate Esthetic Dentistry Course. Indicate what is taught in the traditional Operative Dentistry Course(s) in your school so that a consensus on a National Operative Dentistry Core Curriculum can be developed.

In addition to providing the requested information by school, if possible provide a consensus list for the Region. Report on the discussion which took place.

II. What is the current use of **digital radiographs** in your school?

In what areas and for how long have digital radiographs been utilized? If not utilizing digital radiographs, are there future plans for utilization and what is your time frame?

Has digital radiography helped or hindered your ability to diagnose incipient interproximal or occlusal caries compared to traditional radiographic techniques?

Which of the two main categories of **intraoral sensors** are used: direct sensor/ charged-coupled device (CCD) or storage phosphor plates (SPP)? What advice/recommendations would you make as to which system to select? (CCD or SPP)? What is the rationale for this advice/recommendations?

Does your school have a **dental acquisition/ceph** (Cone beam 3-D dental imaging system)? Which system are you utilizing and how long have you had the system? Please list the pros and cons for this specific system.

III. Discuss the use of **carbide bur use versus diamond burs** for intracoronal procedures in Operative Dentistry at your school.

Which diamond burs are used and for what purposes? Has your school considered or tried diamond burs for intracoronal procedures? Report on the considerations/findings.

IV. Electric Handpieces (*Topic Revisited*)

Are electric handpieces being used? Where? For how long? What has been the experience? Is your school considering switching to electric handpieces in the next 2-4 years?

V. Direct placed composite resins are over taking amalgam as the basic restorative material.

How has this impacted the teaching of operative skills to new dental students?
Describe new or different teaching methods/technologies as Web CT.

What teaching sequence is utilized - group amalgam procedures together and composite together or based on complexity. Minimal invasive approach on to more complex procedure mixing the teaching of amalgam and composite together in one course?

Are motor skill developments being diminished with the greater utilization of direct placed composites throughout the Mouth? Discussion.

VI. Discuss matrixing.

Full band versus sectional band. Which is used? When is it used? Why is it used?
Which systems are used for full and sectional matrixing?

VII. Who/which departments are placing implants?

Who/what departments are restoring implants? Graduate/undergraduate dental students? What is the under graduate exposure at your school?

Any commentary on "Let's take the tooth out and place an implant versus doing endodontics." In other words, have implants had an effect on your students' experiences doing large core build-ups by reducing the numbers of teeth requiring endo and restorative rehabilitation?

Regional CODE Agenda

To be established by the respective Region and Regional Director. Please also report on responses to the Regional Agenda from all participants.

Suggestions for CODE.

What can the organization do to improve its effectiveness?

Any comments or suggestions to improve the Web site? <http://www.unmc.edu/code/codeframe.html>

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Other comments/suggestions?