**Massachusetts**

**Association of**

**Orthodontists\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

March 4, 2019

Board of Registration in Dentistry

239 Causeway Street

Suite 500

Boston MA 02114

Dear Board Members,

The Massachusetts Association of Orthodontics (MAO) is pleased to take this opportunity to contribute to the proposed changes to the 235CMR 5.00 (Requirements for the practice of Dentistry, Dental Hygiene, and Dental Assisting).

It is certainly important to update the dental regulations periodically to keep up with technological and technical changes in the dental industry. We thank you for your vigilance. The goal in any update includes protecting the public health from *industry changes* that undermine the basic tenets of good dentistry.

At this time, due to technological advancements that are enabling minimally supervised orthodontic tooth movement, the current regulations are not protecting the general public in fundamental ways and are allowing orthodontic tooth movement to occur without prohibiting the following violations to basic standards of care:

1. Failure to conduct an occlusal exam that includes functional movements which can be destructive to a persons dentition and/or oral/facial complex prior to and during orthodontic tooth movement

2. Failure to obtain proper radiographs and conduct a radiographic exam to assess bone health and root viability prior to and during orthodontic tooth movement.

3. Failure to examine a patient to confirm accuracy of digital intraoral scans prior to and during orthodontic tooth movement.

4. Failure to monitor tooth movement closely to identify unfavorable changes in occlusion, hygiene, periodontal health, and bone health so that treatment can be modified as quickly as possible to reduce risks for damage and minimize limitations to a successful treatment outcome.

The MAO proposes that the following changes be made to the 234 CMR 5.0 regulations.

Add to the Non-Delegable Procedures (5.12):

1. An occlusal exam that includes functional movements which can be destructive to a persons dentition and/or oral/facial complex prior to and during orthodontic tooth movement

2. A radiographic exam to assess bone health and root viability prior to and during orthodontic tooth movement.

3. A patient exam to confirm accuracy of digital intraoral scans prior to and during orthodontic tooth movement.

4. Monitoring of tooth movement to identify unfavorable changes in occlusion, hygiene, periodontal health, and bone health so that treatment can be modified as quickly as possible to reduce risks of damage and minimize limitations to a successful treatment outcome.

We believe that adding this short list of Non-Delegable Procedures to the proposed 234 CMR 5.0 amendments will be in line with the stewardship responsibilities of each member of our honorable Board.

Sincerely,

Stephen J. Noxon

President, Massachusetts Association of Orthodontists