



**COMMONLY ASKED QUESTIONS
ABOUT ORAL AND MAXILLOFACIAL SURGERY**

Q: What is the definition of dentistry and how does it compare to our state's definition of dentistry?

A: The ADA defines dentistry as follows:

Dentistry is defined as the evaluation, diagnosis, prevention and/or treatment (nonsurgical, surgical or related procedures) or 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 applicable law.

However, many states have individual and varying definitions of the profession of dentistry, some of which are antiquated and should be updated.

Q: What is the definition of oral and maxillofacial surgery? How does that definition compare to our state's definition of dentistry?

A: The American Dental Association (ADA) defines oral and maxillofacial surgery as:

Oral and maxillofacial surgery is the specialty of dentistry which includes the diagnosis, surgical and adjunctive treatment of diseases, injuries, and defects involving both the functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

How your state's definition compares to this ADA definition varies by state, and therefore must be individually considered in each state.

Q: What is the definition of maxillofacial?

A: According to Stedman's Medical Dictionary. "Maxillofacial" is defined as "pertaining to the jaws and face, particularly with reference to specialized surgery of this region." For example, in Georgiade's Plastic, Maxillofacial and Reconstructive Surgery, "[t]he evaluation of maxillofacial injuries consists of a thorough physical examination...[t]he complete examination involves the cranium, the face, and the neck..." Further, "maxillofacial" surgery encompasses education and training that allows oral and maxillofacial surgeons to manage all aspects of treatment of the hard and soft tissues of the face, head and neck (maxillofacial region).

Q: What education, training, and experience do oral and maxillofacial surgeons have?

A: Oral and maxillofacial surgery education and training includes completing an intensive four-year degree program in dentistry followed by the completion of a minimum four-year hospital surgical residency training program in oral and maxillofacial surgery.

Q: What specific procedures are oral and maxillofacial surgeons trained to do?

A: Oral and maxillofacial surgeons treat such conditions as problem wisdom teeth (dentoalveolar surgery), facial pain (diagnosis and management of craniofacial disorders), dentofacial/craniofacial abnormalities (correction of skeletal deformities), severe facial injuries (trauma management and esthetic/cosmetic surgery), oral cancer (management of malignant disease in the head and neck), and cleft lip/palate (reconstructive and craniofacial surgery).

Q: Should oral and maxillofacial surgeons be allowed to perform hair transplants, facial skin resurfacing, rhinoplasties, blepharoplasties, rhytidectomies, and other esthetic cosmetic procedures?

A: Yes, oral and maxillofacial surgeons may perform these cosmetic procedures when they are properly educated, trained, and licensed to do so. For example, criteria used by the nationally-recognized Joint Commission on Accreditation of Healthcare Organizations (JCAHO) have been accepted for nearly half a century, whereby hospitals grant clinical privileges to medical staff members, including oral and maxillofacial surgeons based upon each member's education, training, current competence and experience. Cosmetic esthetic procedures performed by oral and maxillofacial surgeons are a natural extension of the knowledge and expertise gained by these specialists in performing complex trauma and reconstructive surgery.

Q: Does the state's definition of dentistry give statutory authority for oral and maxillofacial surgeons to provide cosmetic procedures?

A: Yes, as oral and maxillofacial surgery is the surgical specialty of dentistry. The training and practice overlap in some areas with medical and surgical specialties. Therefore, as a result of their specialized education and training in both dentistry and surgery, oral and maxillofacial surgeons are licensed to perform procedures in every state that are also performed by medical doctors. However, as dental specialists, oral and maxillofacial surgeons should be regulated by dental boards, rather than medical boards, for the maximum benefit and protection of patients.

Q: How long have oral and maxillofacial surgeons been performing cosmetic surgery procedures?

A: Oral and maxillofacial surgeons have been successfully performing cosmetic surgery procedures for the past 30 years, initially in conjunction with complex facial reconstructive and trauma surgeries and for the past 10 years as elective procedures.

Q: Is the state dental association supportive of oral and maxillofacial surgery as practiced in this state?

A: Hopefully, the answer to this question is yes. If this question cannot be answered affirmatively, reach out to your state's dental association and work to familiarize them with the contemporary practice of oral and maxillofacial surgery and urge them to support it. This support is often the key to successfully resolve questions or concerns about the practice of oral and maxillofacial surgery in the respective state.

Q: What other dental/medical specialties might have overlapping clinical interests with oral and maxillofacial surgeons?

A: Oral and maxillofacial surgeons have specific overlapping clinical interests with the following dental and medical specialties: orthodontics and dentofacial orthopedics (dental); maxillofacial surgery (medical); and otolaryngology (medical); plastic and reconstructive surgery (medical), a subgroup of plastic surgery.

Q: Is it safe for oral and maxillofacial surgeons to administer anesthesia while simultaneously performing surgery?

A: Yes, Oral and maxillofacial surgeons learn anesthesia techniques by completing a minimum four-month intensive rotation on the medical anesthesia service. They are required to undergo additional ambulatory training throughout the residency program and must obtain Advanced Cardiac Life Support (ACLS) certification. During their minimum four-year hospital surgical residency training program, oral and maxillofacial surgeons continuously refine their anesthesia techniques and participate in numerous skills. In addition, members of AAOMS are required to undergo periodic on-site anesthesia evaluation inspections and recertification, requirements that often exceed those under state law and provide an extra measure of protection to the public.