

Policy Statement 6.28 – Telehealth and Virtual Care in Dentistry

1. Position Summary

Teledentistry services must only be provided by a dental practitioner registered with the Dental Board of Australia, and only in cases where direct treatment or specialist advice cannot be accessed.

2. Background

- 2.1. Teledentistry and teleradiology are emerging methods of dental service delivery which require monitoring as they develop.
- 2.2. Teledentistry has the potential to be particularly beneficial for rural and remote populations. The enhanced access and reduced costs that teledentistry delivers can potentially improve health outcomes in the community by overcoming socio-economic, geographic, and cultural barriers.
- 2.3. Teledentistry services can be delivered in a synchronous (real-time) or asynchronous (data stored for future diagnosis) manner.
- 2.4. The technology required is not complex, chiefly consisting of imaging devices, a high-definition display, a transmitting device and an internet connection capable of smooth real-time audio and video communication.
- 2.5. In 2014 a Teledentistry trial was supported by Google and conducted via the Oral Health Research Centre at the Melbourne Dental School, the Royal Children's Hospital and the Institute for a Broadband-Enabled Society (IBES), "Ninety per cent of the parents found it easy to understand the instructions received from the remote examiner. Two thirds of the parents who answered this question commented that the most valuable element of the remote dental examination was the avoidance of difficult and expensive travel". ⁽¹⁾
- 2.6. In 2018 a new form of remote consultation has become established in Australia where entities set up booths in pharmacies or shops where the public can be provided dental treatment by unregistered or not suitably qualified personnel.
- 2.7. Dental treatment is best provided in a fully equipped dental surgery.
- 2.8. Teledentistry is not suitable for procedural dental care.
- 2.9. Related terms such as virtual healthcare, telehealth and telemedicine are often used to describe the same thing as they not universally defined.
- 2.10. In 2020, an integration of Remote Patient Monitoring (RPM) and Mobile Health (mHealth) platforms allow greater functionality through a wider base of technology platforms, allowing more patient control in submitting and accessing healthcare images, records and data.
- 2.11. Teledentistry delivery services and record keeping will require frequent review and recommendation, and as such, dental practitioners have a duty to maintain awareness of applications and protocols

Definitions

- 2.12. BOARD is the Dental Board of Australia.
- 2.13. DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.
- 2.14. FUNDING AGENCIES are third parties which make contributions to the payment of the fees charged by dentists, and include:

This Policy Statement is linked to other Policy Statements: 3.2 Dentists, 3.3 Allied Dental Personnel, 5.4 Funding Agencies, 5.15 Consent to Treatment, 5.16 Informed financial consent, 5.17 Dental Records and 6.15 Dental Informatics and Digital Health

- statutory authorities, e.g., Commonwealth and state health departments, transport accident authorities, workers' compensation authorities;
- PHIs (for-profits and mutuals) through –
 - (a) Rebate entitlements (most health funds); and
 - (b) Contracted dentist schemes (also known as preferred provider schemes) which have been promoted by some health funds – these involve a dentist agreeing to work for a fixed fee for service for a contracted period, or capitation schemes.

2.15.TELEDENTISTRY is the use of information technology and telecommunications for the remote provision of primary dental care, consultation, education, and public awareness. (Appendix 1).

3. Position

- 3.1.** Teledentistry clinical services must only be provided by a Board registered dental practitioner.
- 3.2.** Teledentistry clinical services must only be provided in cases where direct face-to-face treatment or specialist advice cannot be provided.
- 3.3.** It is not acceptable for patients to receive procedural dental treatment without an in-person examination and the ability to directly contact their dental practitioner.
- 3.4.** Teledentistry services conducted by a dental practitioner where the patient is in a foreign country must comply with the requirements of that country's regulatory authorities, where such an authority can be identified and vice versa.
- 3.5.** Teledentistry services provided should be itemised as per The Australian Schedule of Dental Services and Glossary.
- 3.6.** Teledentistry services should be eligible to receive Funding Agency rebates.
- 3.7.** Patient confidentiality and record keeping standards should be maintained as if the patient was physically present.
- 3.8.** Teledentistry services should be conducted over a secure videoconferencing medium in order to protect patient privacy.
- 3.9.** Health organisations should support the integration of in-person care and virtual healthcare delivery.
- 3.10.** The progress of teledentistry and virtual healthcare, telehealth and telemedicine in Australia should be monitored and assessed and limitation of non-healthcare 3rd party applications.
- 3.11.** The further development of teledentistry or virtual dentistry in Australia is supported provided any solutions are proven to be clinically safe for patients and legally compliant for practitioners.
- 3.12.** CPD on teledentistry should be provided to the dental workforce.

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Policy Statement 6.28 Teledentistry Services - Appendix 1

Category	Description
Tele-consultation Tele-diagnosis Tele-treatment	The patient with the local dental practitioner consults a dentist or specialist dentist, who delivers assessment and/or monitors treatment.
Tele-education Tele-training	Continuing Professional Development and training for members of the dental team.
Tele-monitoring	Regular monitoring of physical and/or biochemical parameters in chronically ill patients (i.e. dialysis and cardiorespiratory), in intensive care or emergency care settings.
Tele-support	Support to remote health facilities located in isolated areas, remote places, or in areas affected by natural disasters or armed conflict.
Tele-administration	The use of communications technology for purely administrative work (for example scheduling and managing appointments).

- (1) Clarke, K; Marino, R; Manton, D; Hopcraft, M; McCullough, M; Borda, A; Hallett, K, (2014). *Paediatric teledentistry: delivering oral health services to rural and regional children*. Melbourne: Institute for a Broadband Enabled Society – University of Melbourne, p 12.