



Royal College of
Dental Surgeons of Ontario

Ensuring Continued Trust

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January 8, 2013

Dr. Daisy Chemaly
President
Ontario Society of Oral & Maxillofacial Surgeons
2146 Bloor Street W, #2
Toronto, ON M6S 1M8

Dear Dr. Chemaly:

Re: Scope of Practice for Oral and Maxillofacial Surgeons

Your letter dated October 1, 2012, enclosing an amended list of procedures that was prepared by the Ontario Society of Oral and Maxillofacial Surgeons (OSOMS) to reflect the discussion at our meeting on September 17, 2012, was presented to the Quality Assurance Committee at its meeting on December 12, 2012.

The Committee was able to have a full discussion regarding this matter and receive the advice of the College's General Legal Counsel, Mr. Alan Bromstein.

The Committee understands that the OSOMS is not seeking a separate or expanded scope of practice for oral and maxillofacial surgeons at this time. It further understands that the OSOMS is seeking recognition by the College that within the current scope of practice for dentistry, oral and maxillofacial surgeons who have the requisite competencies should be permitted to perform certain procedures in situations where they are ancillary, secondary or as a follow-up to therapeutic procedures that are performed for the patient, and that when performed under these circumstances, they are covered by the College's Professional Liability Program. Examples of conditions requiring such procedures were provided, including maxillofacial contour deformities of the cheeks, nose and jaws, and soft tissue redundancy, deficit or deformities around the eyes, cheeks and submental region.

The Committee agrees with the position of the OSOMS, provided that the following criteria are met:

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1. The primary procedure is necessary for the treatment of a disease, disorder or dysfunction of the oral-facial complex, as that phrase has been historically interpreted by Council;
2. The secondary procedure, while not necessary for the treatment of a disease, disorder or dysfunction of the oral-facial complex (as that phrase has been historically interpreted by Council) is necessary to fulfill the objectives of the primary procedure; and
3. The oral and maxillofacial surgeon is appropriately trained and competent to perform both the primary and the secondary procedures.

The Committee's decision in this matter will be reported to the RCDSO Council at a future meeting.

I trust that this meets with your satisfaction.

Yours truly,



Dr. David Clark
Chair, Quality Assurance Committee

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