### Table of Contents

Purpose, Authority, Accountability .................................................................3

Principles ...........................................................................................................3

1. Patient Autonomy and Informed Choice ..................................................3
2. Nonmaleficence (do no harm) .................................................................4
3. Beneficence ...............................................................................................4
4. Competence .............................................................................................4
5. Veracity .....................................................................................................4

A. Responsibilities to Patients ......................................................................6
   Article A1: Service .....................................................................................6
   Article A2: Current/Continued Competence ..............................................6
   Article A3: Fitness to Practice/Incapacity ...............................................6
   Article A4: Competence, Consultation and Referral .................................6
   Article A5: Informed Choice of and Consent For Treatment ....................7
   Article A6: Provision of Full and Accurate Information ..........................7
   Article A7: Confidentiality and Release of Patient Information ...............7
   Article A8: Outcomes and Patient Expectations .......................................8
   Article A9: Emergencies ..........................................................................8
   Article A10: Provision of Care ..................................................................8
   Article A11: Arrangements for Continuity of Care .................................9
   Article A12: Assignment of Duties ...........................................................9
   Article A13: Reporting Suspected Child Abuse .......................................9
   Article A14: Prescribing Drugs for Self and Family ...............................9
   Article A15: Product Marketing in the Dental Office ..............................10
   Article A16: Disclosure of Potential Conflict of Interest .......................10

B. Responsibilities to the Public ....................................................................11
   Article B1: Representation of Qualifications, Experience, and Registration 11
   Article B2: Contractual Services/Practice Arrangements ......................11
   Article B3: Choice of Dentist ..................................................................11
   Article B4: Advertising and Promotional Activities ...............................11
      B4.1: False, Misleading or Deceptive ..................................................12
      B4.2: Objectively Verifiable ................................................................12
      B4.3: Articles and Newsletters ............................................................12
      B4.4: Name of Practice and Trade Names .........................................13
      B4.5: Dentists Departing a Practice ....................................................13
      B4.6: Courses and Certificates ............................................................14
      B4.7: Use of Titles and Announcement of Specialization ....................14
      B4.8: General Practitioner Announcement of Services ......................15
   Article B5: Fees and Compensation for Service ......................................15
      Article B5.1: Dental Plans and Third Party Carriers .........................16

C. Responsibilities to the Profession .........................................................17
   Article C1: Support of Self-Regulation of the Profession .......................17
   Article C2: Co-operation with Alberta Dental Association and College ....17
   Article C3: Unprofessional Conduct .......................................................17
   Article C4: Alberta Dental Association and College Official Spokespersons 17

---

**Code of Ethics**

Alberta Dental Association and College
Purpose, Authority, Accountability

This Code of Ethics is a set of principles of professional conduct that governs all registered dentists (generalists and specialists) and establishes the expectations for dentists in fulfilling duties to their patients, to the public, and to the profession. This Code of Ethics affirms and clarifies principles that are definitive to professional and ethical dental care. For those about to enter the profession, this Code of Ethics identifies the basic moral and ethical commitments of dentists and will serve as a source for education and reflection. For those within the profession, this Code of Ethics provides direction for ethical practice; and, in so doing, it also serves as a basis for self-evaluation. For those outside the profession, this Code of Ethics provides public identification of the profession's ethical expectations of its members. Therefore, this Code of Ethics is also educational. It governs behavior and expresses to the larger community the values and ideals that are espoused by the dental profession by reason of trust, commitment, and governance.

The Code of Ethics is an important part of the way in which the Alberta Dental Association and College fulfills its obligation to promote and protect the public interest. This Code of Ethics is binding on all members and violations may result in disciplinary action. The Code of Ethics, by its very nature, cannot be a complete articulation of all ethical obligations. In resolving ethical issues, dentists shall consider ethical principles, the patient's needs and interests, and all applicable laws.

The Code of Ethics that follows sets forth the ethical duties that along with the Standards of Practice, are binding on registered members of the Alberta Dental Association and College. Anyone who believes that a member-dentist has acted unethically or in an unskilled manner may bring the matter to the attention of the Complaints Director, to be dealt with in accordance with the provisions of the Health Professions Act of the Province of Alberta.

Principles

This Code of Ethics contains mandatory requirements for dentists and expresses the values shared by the dentists and dental profession of Alberta. The Principles of Ethics are the goals to which every member of the profession must aspire. There are five fundamental principles that form the foundation of the Alberta Dental Association and College Code of Ethics. These are:

1. Patient Autonomy and Informed Choice

Dentists have a duty to assess and inform the patient of the nature of the condition requiring potential treatment, the treatment and non-treatment options available including the advantages, disadvantages and the potential significant risks and costs of these options and whether it is appropriate to consider referral to a specialist. The patient makes the final decision on choice of treatment, and on choice of practitioner to provide any treatment (generalist or specialist), or to follow-up after referral or second opinion.
2. Nonmaleficence (do no harm)

Dental treatment shall expressly be intended to not leave the patient in a worse state than if no treatment had been provided. It is acknowledged that such states may inadvertently arise due to unanticipated or uncontrollable circumstances, regardless of that intention. Should harm to the patient occur, the dentist shall disclose it to the patient.

3. Beneficence

Dental treatment shall expressly be intended to result in an improvement or maintenance of the patient's condition. The ultimate goal of treatment shall be to optimize oral function and/or appearance for the patient. It is acknowledged that the achievement of this goal will be influenced by variables such as the patient’s age, general health, underlying anatomy, previous treatment, pre-existing conditions, and compliance with oral hygiene and other instructions. A dentist has the responsibility to provide a high standard of professional services and is accountable for the intended benefit and outcome of any treatment regardless of whether the treatment is medically necessary, or for structural, functional, cosmetic/aesthetic, preventive or health promotion purposes.

4. Competence

The dentists' primary obligation is to provide service to patients through the delivery of quality care in a competent and timely fashion. It is acknowledged that under certain circumstances beyond the dentist’s control, access to resources may affect the timeliness of care delivery. Dentists have a duty to apply the knowledge, skills, attitudes and judgments necessary to perform competently in the provision of all patient assessments and services, in accordance with currently accepted professional standards.

5. Veracity

A dentist must obtain informed consent from his or her patient prior to conducting any treatment. The dentist must be truthful and forthright in all professional matters. This means fully disclosing and not misrepresenting information in dealings with patients, the public at large on dental matters, other professionals, and the Alberta Dental Association and College.
A. Responsibilities to Patients

- Article A1: Service
- Article A2: Current/Continued Competence
- Article A3: Fitness to Practice/Incapacity
- Article A4: Competence, Consultation and Referral
- Article A5: Informed Choice of and Consent For Treatment
- Article A6: Provision of Full and Accurate Information
- Article A7: Confidentiality and Release of Patient Information
- Article A8: Guarantees
- Article A9: Emergencies
- Article A10: Provision of Care
- Article A11: Arrangements for Continuity of Care
- Article A12: Assignment of Duties
- Article A13: Reporting Suspected Abuse
- Article A14: Prescribing Drugs for Self and Family
- Article A15: Product Marketing in the Dental Office
- Article A16: Disclosure of Potential Conflict of Interest

B. Responsibilities to the Public

- Article B1: Representation of Qualifications, Experience, and Registration
- Article B2: Contractual Services/Practice Arrangements
- Article B3: Choice of Dentist
- Article B4: Advertising and Promotional Activities
- Article B5: Fees and Compensation for Service

C. Responsibilities to the Profession

- Article C1: Support of Self-Regulation of the Profession
- Article C2: Co-operation with Alberta Dental Association and College
- Article C3: Unprofessional Conduct
- Article C4: Alberta Dental Association and College Official Spokespersons
A. Responsibilities to Patients

Article A1: Service

As a primary health care provider, a dentist's first responsibility is a duty of care to the patient. As such, the competent and timely delivery of safe care appropriate to the presenting clinical circumstances and services sought by the patient shall be the most important aspect of that responsibility.

Article A2: Current/Continued Competence

The privilege of dentists to be accorded professional status rests primarily in the knowledge, skill, attitude and judgment with which they serve their patients and society. All dentists, therefore, must keep their knowledge of dentistry current and must provide treatment in accordance with currently accepted professional standards. Dentists have an obligation to maintain competence throughout their career and to comply with the Alberta Dental Association and College’s Continuing Competence Program under the Health Professions Act of Alberta.

Article A3: Fitness to Practice/Incapacity

A dentist may experience medical or behavioral impediments to competence. A dentist shall inform the College when a serious injury, medical condition, infection or any other condition has either immediately affected, or may affect over time, his or her ability to practice safely and competently. It is unethical for a dentist to practice while using controlled substances, alcohol or chemical agents that impair their ability to practice. A dentist has an ethical obligation to urge impaired colleagues to seek treatment. A dentist with first-hand knowledge that a colleague is practicing dentistry when so impaired has an ethical responsibility to report such information to the Alberta Dental Association and College. In this Article the term “infection” includes, but is not limited to, HIV/AIDS, Hepatitis B, and Hepatitis C.

Article A4: Competence, Consultation and Referral

A dentist shall provide assessment and/or treatment for a patient only when currently competent to do so by reason of his or her education and training, experience, or demonstrated continued competence; otherwise the dentist should consult with another dentist or dental specialist with the appropriate competencies and/or refer the patient to an appropriate care provider for assessment and/or treatment.
Article A5: Informed Choice of and Consent For Treatment

A dentist must discuss treatment and non-treatment recommendations with the patient including benefits, prognosis and significant risks of doing or of not doing treatment as well as reasonable alternatives and associated costs in order to allow the patient to make an informed choice. Dentists who misrepresent unnecessary dental procedures as necessary and recommend or perform unnecessary services on this basis are engaged in unethical conduct.

A dentist shall also inform the patient if any proposed oral health care involves treatment techniques and/or products that are not generally recognized or accepted by the dental profession. The dentist has a right to refuse to provide treatment that is not generally recognized or accepted by the profession even when requested to do so by the patient.

Informed choice implies that a dentist fully informs the patient of the above before obtaining informed consent for providing the services selected by the patient.

Article A6: Provision of Full and Accurate Information

A dentist is obligated to provide to the patient full and accurate comment and opinion concerning their oral health. When giving a second opinion, dentists must ensure that they have the necessary information to give an opinion that can fully inform patient choice. Dentists must fully inform the patient of their opinion of assessment and treatment options, even if that opinion differs from or disagrees with an opinion given by another dentist. When disagreeing with the opinion or treatment by another dentist or health professional, the dentist shall do so respectfully avoiding disparaging remarks.

Article A7: Confidentiality and Release of Patient Information

Patient information, verbally, written or electronically acquired and kept by the dentist, shall be kept in strict confidence except as required by law or as authorized by the patient. The information in dental records or reports must be released to the patient or to whomever the patient directs, including other professionals and dental plan carriers, when authorized by the patient. This obligation exists regardless of the state of the patient's account.

An authorization by a patient allowing a dentist to provide information to a dental plan carrier or another third party is acceptable. A separate authorization is not required for each release of information provided the information is shared for the purposes described in the authorization and the authorization allows the release of information on an ongoing basis.
Article A8: Outcomes and Patient Expectations

A dentist, in the process of obtaining informed consent, should provide the patient with reasonable expectations respecting the potential outcome of care.

A dentist must not, either by statement or implication, guarantee or make unsupportable statements as to the likely success of appliances, products, procedures or treatments for a patient.

A dentist should discuss with the patient what reasonable expectations the patient may have respecting the duration and durability of those appliances, products, procedures or treatments to be provided for that particular patient.

A dentist should discuss with the patient when and under what circumstances the patient can reasonably be expected to be held financially responsible for ongoing maintenance, repairs, revisions, replacement and re-performance of professional services involving said appliances, products, procedures or treatments.

A dentist should document references to these discussions in the patient’s ongoing care record.

Article A9: Emergencies

A dental emergency exists if, in the professional judgment of the dentist being solicited to provide care, it is determined that a person needs immediate attention to relieve pain, or to control infection or bleeding that is threatening to life, oral cavity structure, or function. Dentists have an obligation to provide immediate care and to consult and/or refer if necessary in a dental emergency or, if unavailable, to make alternative arrangements for the patient. Beyond offering adequate follow-up by direct service or referral, such emergency intervention does not bind dentists to future treatment of emergency patients.

Article A10: Provision of Care

A dentist shall not discriminate against or refuse to treat patients in a manner that is contrary to applicable human rights laws. This include, but is not limited to, refusal to treat a patient based on HIV/AIDS or Hepatitis status or any other condition defined as a disability by human rights legislation. Other than in an emergency situation, a dentist has the right to refuse to accept an individual as a patient.
Article A11: Arrangements for Continuity of Care

A dentist having undertaken the care of a patient shall not discontinue that care without first having given sufficient notice of that intention to the patient, and shall endeavor to arrange for continuity of care with another dentist. Where there has been a breakdown in the relationship between the dentist and the patient, the dentist has an obligation to transfer appropriate records to the care provider who will be assuming the ongoing care of the patient. In the event of referrals, both referring and consulting dentists should ensure the patient understands the importance of continuity of care with either or both of the respective dentists.

A dentist who has provided dental care, especially care that is of an extensive or invasive nature, has the obligation to provide direct availability for the patient to contact the care provider “after hours”. This “on call” or “after hours” obligation, if transferred to other professionals, must be done so with a formal agreement established through direct personal contact between the parties sharing this obligation. This transference must also be communicated to the patients receiving such care. Failure to do so breaches the dentist’s obligations to provide continuity of care.

Article A12: Assignment of Duties

A dentist may assign duties to those under his or her supervision in compliance with any applicable laws, ethical principles and standards of practice. In doing so, the dentist must be satisfied with the competencies and abilities of the person(s) to whom duties are assigned, and must provide appropriate supervision. A dentist’s ultimate responsibility to his or her patient is not affected by the assignment of duties.

Article A13: Reporting Suspected Child Abuse

A dentist is obliged to become familiar with the signs of child abuse and to report suspected occurrences of child abuse to the proper authorities in compliance with Alberta laws.

Article A14: Prescribing Drugs for Self and Family

A dentist must not prescribe drugs for themselves. Dentists may prescribe drugs for family members only when indicated specifically for dental issues.
Article A15: Product Marketing in the Dental Office

A dentist who sells or markets dental products to their patients must:

- ensure that they do not exploit the trust inherent in the dentist-patient relationship
- not misrepresent or exaggerate the value of the products
- verify that the claims about the efficacy of the dental products being made by manufacturers or distributors of the product are founded on accepted scientific knowledge and research, and
- make available to patients all information necessary for the patients to make an informed choice as to whether to purchase the products, including whether the product is available elsewhere and whether there are financial incentives for the dentist to sell the product which would not be evident to the patient.

Article A16: Disclosure of Potential Conflict of Interest

A dentist who refers patients to laboratory, radiological, diagnostic or other professional service facilities separate and apart from the dentist's office and who has a direct or indirect financial interest in such facilities, shall disclose that interest to their patients in advance of such a referral.
B. Responsibilities to the Public

Article B1: Representation of Qualifications, Experience, and Registration

A dentist shall represent himself or herself in a manner that contributes to the public's trust and confidence in the profession. A dentist shall not represent his or her education, qualifications or competence in any way that would be false or misleading.

Article B2: Contractual Services/Practice Arrangements

A dentist, by entering into a contract with an organization or other party involving the practice of dentistry, neither reduces personal professional responsibilities nor transfers any part of those ethical or legal responsibilities to that organization or other party. A dentist may enter into an agreement with individuals and/or organizations to provide dental care and services provided that the agreement is not contrary to the Health Professions Act of Alberta, and regulations, by-laws, Code of Ethics, or standards of practice of the Alberta Dental Association and College.

Article B3: Choice of Dentist

A dentist shall, at all times, respect and support the public right to choose one’s own dentist.

Article B4: Advertising and Promotional Activities

No dentist shall engage or be included in advertising or any form of promotional activity including all electronic advertising such as web sites which:

a) is false, misleading, deceptive, ambiguous or fraudulent;
b) may create unreasonable expectations in a patient or potential patient about the results that dentists, or the procedures they perform, can achieve;
c) is incapable of objective verification;
d) makes claims that the services are superior in quality to other dentists;
e) expressly claims or implies that a dentist is a specialist, or has specialist training, unless the dentist is registered in a specialty recognized by the Alberta Dental Association and College; or
f) tends to harm the dignity and honour of the profession.

Dentists involved in promotions indicating that the dentist/dental office will make a donation to a charity for a dental service provided must fully disclose the details of the charitable arrangement including how much money is being donated by the dentist/dental office, the time
frame of the promotion, whether a donation is being made for every patient who receives the
dental service and who gets the tax deductible receipt.

Dentists shall not use coupons or time limited discounts as promotional material.

**B4.1: False, Misleading or Deceptive**

In all advertising and promotional activities, statements must be avoided which:

a) contain a misrepresentation of fact;

b) omit a fact necessary to make the statement when considered as a whole not misleading.

Statements will be evaluated on a case-by-case basis, considering how patients are likely to respond to the impression made by the advertisement as a whole. The issue is whether the advertisement, taken as a whole, is false or misleading.

**B4.2: Objectively Verifiable**

In all advertising and promotional activities, a dentist is not to make statements that are not objectively verifiable. Subjective statements about the quality of dental services and/or patient care raise ethical concerns. Objectively verifiable means “capable of being proven by facts independent of personal feelings, beliefs, opinions or interpretations”. Expressed or implied representations that the advertised or promoted services are superior in quality to those provided by other dentists are not objectively verifiable. In particular, patients may misinterpret statements of opinion as implied statements of fact. The onus is on the dentist to be able to provide upon request, objective verification of any statements in advertising or promotional activities. A dentist shall not utilize advertising or promotional activities to publicize the equipment, material, or techniques used in their dental practice if the advertisement or promotional activity expressly represents or implies that such equipment, materials, or techniques are superior in quality to those of other dentists, or implies that superior results are achievable or that superior dental care is provided.

**B4.3: Articles and Newsletters**

If a dental health article, message or newsletter is published or electronically communicated under a dentist's name to the public without making truthful disclosure of the source and authorship, then the dentist is engaged in making a false, misleading or deceptive representation to the public. Dentists must also ensure that such information does not give rise to unreasonable expectations for the purpose of inducing the public to utilize the services of the dentist (or third party) distributing the communication.
B4.4: Name of Practice and Trade Names

Since the name under which a dentist conducts his or her practice may be a factor in the selection process of the patient, the use of a trade name or an assumed name that is misleading or which may create unreasonable expectations is prohibited. The use of trade names is considered to be a form of advertising or promotional activity and as a result trade names must comply with all of the provisions in the Code of Ethics of the Alberta Dental Association and College applicable to advertising and promotional activities.

A dentist shall not adopt or use a trade name for a dental practice unless the Alberta Dental Association and College has approved the trade name. This requirement does not apply to trade names in use prior to the effective date of this provision which shall be established by a resolution of Council of the Alberta Dental Association and College. However, all trade names, whether or not required to be approved by the Alberta Dental Association and College, must comply with all other requirements of the Code of Ethics of the Alberta Dental Association and College. For example, a dentist using a trade name that did not require pre-approval but which is misleading, implies superiority, or implies a non-existent specialty would still be breaching the Code of Ethics of the Alberta Dental Association and College.

Any advertising or promotional activities that use a trade name for a dental practice must include the names of the individual dentists at the dental practice. This requirement applies to all dental practices that use a trade name regardless of whether the trade name was required to be approved by the Alberta Dental Association and College.

B4.5: Dentists Departing a Practice

The use by a practice of the name of a dentist who is no longer actively associated with said practice may be continued for a period of time not to exceed one year. Dentists departing a practice who authorize the continued use of their name should receive competent advice on the legal implications of this action. With the permission of a departing dentist, the departing dentist’s name may be used for more than one year if after the one year grace period prominent notice is provided to the public through such mediums as a sign at the office and a short statement on stationery and business cards that the departed dentist is no longer associated with the practice.

This does not authorize the practice or other dentists associated with the practice to bill under the name of the dentist who has departed the practice.
B4.6: Courses and Certificates

A dentist may advertise only that he or she has obtained a DDS degree, a DMD degree, or other University or College degree such as a dental specialty recognized by the Council of the Alberta Dental Association and College. No other courses and programs or dental awards can be utilized in advertising and promotional activities by or for or including any dentist(s) or dentist(s) name(s); all such advertising and promotional activities is the responsibility of the dentist(s) who must ensure that it complies with the Code of Ethics of the Alberta Dental Association and College.

B4.7: Use of Titles and Announcement of Specialization

The provisions in this section are designed to help the public to make a clear distinction and an informed selection between a practitioner who has achieved specialty status and general practitioners. All members of the Alberta Dental Association and College may use the titles Doctor, Dr. and Dentist. However, only those dentists who are expressly authorized by the Alberta Dental Association and College may use any titles that imply specialty status including, but not limited to the following recognized titles for specialty areas of dental practice:

(a) Endodontist;
(b) Oral and Maxillofacial Surgeon;
(c) Orthodontist and Dentofacial Orthopedist;
(d) Pediatric Dentist;
(e) Periodontist;
(f) Prosthodontist;
(g) Oral Medicine and Pathology Specialist;
(h) Oral and Maxillofacial Radiologist;
(i) Public Health Dentist.

A dentist must ensure that he or she only uses specialist titles if he or she is authorized to do so by the Alberta Dental Association and College. A dentist must not do anything which would lead the public to believe that specialty services are being rendered by a qualified specialist in the dental office when such is not the case.

Other than fellowships in specialties as accredited by the Canadian Dental Association and recognized by the Alberta Dental Association and College, a dentist using the attainment of a fellowship in a direct advertisement to the public is making a representation which is misleading or deceptive. Such use of a fellowship status is misleading because of the likelihood that it will indicate to the patient the attainment of a specialty status. However, when such use does not conflict with the above principles or the law, the attainment of fellowship status may be indicated in scientific papers, curriculum vitae, third party payment forms and letterhead and stationery which is not used for the direct solicitation of patients.
In advertising and promotional activities, a dentist shall not refer to any fellowships except for fellowships in specialties as accredited by the Canadian Dental Association and recognized by the Alberta Dental Association and College.

A specialist may use advertisements and promotional activities that indicate that they are a specialist in an area recognized by the Alberta Dental Association and College. However, a specialist must ensure that any advertisements or promotional activities do not expressly represent or imply that they are specialists in areas not recognized by the Alberta Dental Association and College.

If a general practitioner is practicing in association with one or more specialists, then it is the duty of both the specialist(s) and the general practitioner to inform the patients that this dentist is a general practitioner.

**B4.8: General Practitioner Announcement of Services**

A general dentist who wishes to announce, advertise, or promote the services available in their practice are permitted to announce the availability of those services so long as he/she avoids any communications that express or imply specialization. General dentists shall also clearly state that the services are being provided by a general practitioner. A dentist shall not announce available services in any way that will be false, misleading or deceptive. In any advertising or promotional activity for services to be provided by a general dentist, a statement that the services are provided by a general dentist must be included. A general dentist may not express or imply to the public that he/she is certified or specialized in an area of dentistry not recognized as a specialty area by the Alberta Dental Association and College.

**Article B5: Fees and Compensation for Service**

A dentist is responsible for establishing fees for professional services performed for his or her own practice. Any fee advertising by a dentist shall be intended primarily to provide information for the public and must conform to the principles applicable to all advertising and promotional activities, as set out in Article B4.

While a dentist is entitled to reasonable compensation for services performed, a dentist shall not enter into an arrangement whereby the referral of patients results in a fee paid, a commission, a discount or other consideration to the dentist or another party.
Article B5.1: Dental Plans and Third Party Carriers

A dentist who submits a claim form to a third party carrier reporting incorrect treatment dates, procedure codes, and/or fees charged is engaging in inappropriate billing and unethical practice. If a patient has dental benefits through a third party provider, it is also the patient's right to have alternative treatment options explained regardless of the costs or coverage. This means that the dentist shall explain alternative treatment options, regardless of what the patient’s insurance plan or third party carrier will pay for. The dentist is obligated to inform a patient of the benefits, risks, disadvantages and costs of alternative dental treatment options. The patient is entitled to make an informed decision as to what is the best treatment for him or her, regardless of a third party carrier’s dental coverage.

A dentist, when submitting a claim form to a third party carrier reporting incorrect treatment dates for the purpose of assisting a patient in obtaining benefits under a dental plan when benefits would otherwise be disallowed, is engaging in making false or misleading representation to such a third party. A dentist who intentionally incorrectly describes a dental procedure when submitting a claim form to a third party carrier in order to receive a greater payment or reimbursement or intentionally incorrectly makes a procedure which is not covered appear to be a covered procedure on such a claim form is engaged in making false or misleading representation to such a third party. A dentist must ensure that claims made to a third party carrier for patient care are accurate statements of the services rendered and fees charged to the patient. A dentist must not determine or direct a patient’s treatment decisions based primarily on the existence or non-existence of a third party dental plan.

If the patient’s third party carrier plan specifies a co-payment from the patient, the dentist providing the services for the patient must, under the conditions of the plan, engage in usual and customary business practices to collect such co-payments from the patient. A dentist is prohibited from accepting an amount in full payment of an account or charge that is less than the full amount of the account or charge submitted by the member to a third party payer. For example, if a dentist assesses a fee of $100.00 for a dental service and the third party carrier pays 80%, if the dentist has no intention of collecting the $20 from the patient and waives the payment of the $20, this is considered to be misleading the insurance company since the actual fee for the service to the patient was $80 and not $100.
C. Responsibilities to the Profession

Article C1: Support of Self-Regulation of the Profession

The Legislature has granted the dental profession the privilege of self-regulation for the purpose of protecting the public and promoting the public interest. This responsibility is borne by all dentists, and governed on their behalf by the Council of the Alberta Dental Association and College and its delegates (officers and committees). A dentist has an obligation to participate in the protection of the public and promotion of the public interest with the Alberta Dental Association and College, thereby increasing the public trust of dentists, and strengthening the profession.

Article C2: Co-operation with Alberta Dental Association and College

All dentists must co-operate with the requests of the Alberta Dental Association and College, its officials and committees, to enable them to fulfill their legislated responsibilities.

Article C3: Unprofessional Conduct

If a dentist has reasonable grounds to believe that another dentist has engaged in unprofessional conduct, including breach of this Code of Ethics, then the dentist has an obligation to report to the Complaints Director of the Alberta Dental Association and College.

Article C4: Alberta Dental Association and College Official Spokespersons

The official spokespersons for the Alberta Dental Association and College shall be: the President, the Executive Director and Registrar, and the Commissioner of the Alberta Dental Association and College or those other spokespersons that they may designate. As such, they are the only individuals authorized to communicate with the press and broadcasting media on legal, policy and organizational matters relating to the Alberta Dental Association and College.