

# The Revised Dentists (Code of Ethics) Regulations, 2014

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# The Revised Dentists (Code of Ethics) Regulations, 2014<sup>1</sup>

In exercise of the powers conferred by Section 20 read with Section 17-A of the Dentists Act, 1948 (16 of 1948), the Dental Council of India with the previous sanction of the Central Government, in supersession of the Dentists (Code of Ethics) Regulations 1976, except as respects things done or omitted to be done before such supersession, hereby makes the following Dental Council of India (Code of Ethics) Regulations:—

## 1. Short title and Commencement:

- 1.1 These regulations may be called the Revised Dentists (Code of Ethics) Regulations, 2014.
- 1.2 They shall come into force on the date of their publication in the Official Gazette of India.

## 2. Definitions.—In these regulations, unless the context otherwise requires—

- 2.1 'Act' means the Dentists Act, 1948 (16 of 1948);
- 2.2 'Council' means the Dental Council of India;
- 2.3 Dentist means any person with a register able dental degree (in Part A or Part B of the State Dental Register) either by virtue of a prior registration with the Council or one who has been conferred a Bachelor of Dental Surgery (BDS) from any university recognised by the Council and shall be referred to as a Dentist or Dental Surgeon;
- 2.4 Postgraduate dental degree refers to any postgraduate qualification such as M.D.S. in any discipline of dentistry received by convocation from a University recognised by the Dental Council of India or any other postgraduate qualification equivalent to MDS that is recognised by the Council;
- 2.5 All expressions used and not defined in these regulations shall have the meanings assigned to them in the Act and the regulations made thereunder from time to time.

## CHAPTER 1

### 3. Code of Dental Ethics:

A. *Declaration:* Every dentist who has been registered (either on Part A or Part B of the State Dentists Register) shall, within a period of thirty days from the date of commencement of these regulations, and every dentist who gets himself registered after the commencement of these regulations shall, within a period of thirty days from such registration, make, before the Registrar of the State Dental Council, a declaration in the form set out for the purpose in the Schedule to these regulations and shall agree to have read, understood and thence to abide by the same.

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1. *Vide* Notification No. DE-97-2014, dated 27-6-2014, published in the Gazette of India, Extra., Part III, Section 4, dated 27-6-2014, pp. 17-28, No. 191.

**B. Duties and Obligation of Dentists in General:**

**3.1 Character of Dentist/Dental Surgeon:** In view of the important role of a Dentist/Dental Surgeon as a health professional educated and trained in surgical and medical treatment of diseases of the Oral cavity, he shall:

- (3.1.1) Be mindful of the high character of his mission and the responsibilities he holds in the discharge of his duties as an independent health-care professional and shall always remember that care of the patient and treatment of the disease depends upon the skill and prompt attention shown by him and always remembering that his personal reputation, professional ability and fidelity remain his best recommendations;
- (3.1.2) Treat the welfare of the patients as paramount to all other considerations and shall conserve it to the utmost of his ability;
- (3.1.3) Be courteous, sympathetic, friendly and helpful to, and always ready to respond to, the call of his patients, and that under all conditions his behaviour towards his patients and the public shall be polite and dignified;

**3.2 Maintaining good Clinical Practices:** The Principal objective of the Dental profession is to render service to humanity with full respect for the dignity of profession and man. Dental Surgeons should merit the confidence of patients entrusted to their care, rendering to each a full measure of service and devotion. They should try continuously to improve medical knowledge and skills and should make available to their patients and colleagues the benefits of their professional attainments. The Dentist/Dental Surgeon should practice methods of healing founded on scientific basis and should not associate professionally with anyone who violates this principle. The honoured ideals of the dental profession imply that the responsibilities of the Dental Professionals extend not only to individuals but also to Society.

- (3.2.1) The Principal objective of the Dental profession is to render service to humanity with full respect for the dignity of profession and man. Dental Surgeons should merit the confidence of patients entrusted to their care, rendering to each a full measure of service and devotion. They should try continuously to improve medical knowledge and skills and should make available to their patients and colleagues the benefits of their professional attainments. The Dentist/Dental Surgeon should practice methods of healing founded on scientific basis and should not associate professionally with anyone who violates this principle. The honoured ideals of the dental profession imply that the responsibilities of the Dental Professionals extend not only to individuals but also to Society.
- (3.2.2) **Membership in Dental and Medical Associations and Societies:** For the advancement of his/her profession, a Dental Surgeon

should be encouraged to affiliate with associations and societies of dental, oral and allied medical professionals and play a proactive role in the promotion of oral health in particular and health of an individual in general.

- (3.2.3) A Dentist/Dental Surgeon should enrich his professional knowledge by participating in professional meetings as part of Continuing Dental and Medical Education programs/Scientific Seminars/Workshops as stipulated by the regulations made by the statutory bodies from time to time and should register any mandatory requirements with the state registration bodies or any other body as stipulated.

### 3.3 *Maintenance of Dental/Medical records:*

- (3.3.1) Every Dental surgeon shall maintain the relevant records pertaining to his out-patients and in-patients (wherever applicable). These records must be preserved for a minimum period of three years from the date of commencement of the treatment in a format determined by the Council or accepted as a standard mode of documentation.
- (3.3.2) If any request is made for medical or dental records either by the patients/authorised attendant or legal authorities involved, the same may be issued to the competent authority within 72 hours after having obtained a valid receipt for all documents. It is prudent to keep certified photocopies/carbon copies of such submissions.
- (3.3.3) A Registered Dental practitioner shall maintain a Register of Medical Certificates giving full details of certificates issued. When issuing a medical certificate he shall always enter the identification marks of the patient and keep a copy of the certificate. He shall not omit to record the signature and/or thumb mark, address and at least one identification mark of the patient on the medical certificates or report. The medical certificate shall be prepared as in Appendix 2 of this document, Revised Dentists Code of Ethics Regulations, 2012.
- (3.3.4) Efforts shall be made to digitalise dental/medical records for quick retrieval.

### 3.4 *Display of Registration Numbers:*

- (3.4.1) Every Dental practitioner shall display the registration number accorded to him by the State Dental Council in his clinic and in all his prescriptions, certificates and money receipts given to his patients.
- (3.4.2) Dental Surgeons shall display as suffix to their names only recognised Dental degrees which are recognised by the Council or other qualifications such as certificates/diplomas and memberships/honours/fellowships which are conferred by

recognised Universities/recognised bodies approved by the Council and obtained by convocation in person or in absentia. Any other qualifications such as medical degrees, doctorates, post-doctoral degrees or any degree that has bearing on the person's knowledge or exemplary qualification may be used as suffix in a manner that does not convey to the observer or patient a false impression regarding the practitioner's knowledge or ability as a dental professional. Abbreviations of memberships in association or organisations of professionals should not be used as abbreviations in a manner that is misleading to the public [refer to Article 8.9.3 of this document, Revised Dentists Code of Ethics Regulations, 2012 for relevant details].

- 3.5 *Prescription of Drugs*: Every dental surgeon should take care to prescribe and administer drugs in a responsible manner and ensure safe and rational use of drugs. He should as far as possible, prescribe drugs in a generic form.
- 3.6 *Highest Quality Assurance in patient care*: Every Dental practitioner should ensure quality treatment that does not compromise the outcome of treatment. He must be vigilant about malpractice by other practitioners that may jeopardise the lives of others and which are likely to cause harm to the public. All practitioners should be aware of unethical practices and practices by unqualified persons. Dentists/Dental Surgeons shall not employ in connection with their professional practice any attendant who is neither registered nor enlisted under the Dentists Act and shall not permit such persons to attend, treat or perform operations upon patients wherever professional discretion or skill is required.
- 3.7 *Exposure of Unethical Conduct*: A Dental Surgeon should expose, without fear or favour, incompetent or corrupt, dishonest or unethical conduct on the part of members of the profession. It is the responsibility of the dental surgeon to report to the competent authorities' instances of quackery and any kind of abuse including doctor-patient sexual misconduct, misuse of fiduciary relationship, child abuse and other social evils that may come to their attention.
- 3.8 *Payment of Professional Services*: The Dental Surgeon, engaged in the practice of his profession shall give priority to the interests of patients. The personal financial interests of a dental surgeon should not conflict with the medical interests of patients. A dental practitioner should announce his fees before rendering service and not after the operation or treatment is under way. Remuneration received for such services should be in the form and amount specifically announced to the patient at the time the service is rendered. It is unethical to enter into a contract of "no cure - no payment". Dental Surgeons rendering service on behalf of the State shall refrain from anticipating or accepting any consideration.

While it is not mandatory to offer free consultations to fellow dental or medical professionals and their immediate family, it will be deemed a courtesy to offer free or subsidised consultations and treatment to them in situations where no significant expenses are incurred.

- 3.9 *Observation of Statutes:* The Dental Surgeon shall observe the laws of the country in regulating the practice of his profession including the Dentists' Act, 1948 and its amendments and shall also not assist others to evade such laws. He should be cooperative in observance and enforcement of sanitary laws and regulations in the interest of public health. He should observe the provisions of the State Acts like Drugs and Cosmetics Act, 1940; Pharmacy Act, 1948; Narcotic Drugs and Psychotropic substances Act, 1985; Environmental Protection Act, 1986; Drugs and Magic Remedies (Objectionable Advertisement) Act, 1954; Persons with Disabilities (Equal Opportunities and Full Participation) Act, 1995 and Bio-Medical Waste (Management and Handling) Rules, 1998 and such other Acts, Rules, Regulations made by the Central/State Governments or local Administrative Bodies or any other relevant Act relating to the protection and promotion of public health.
- 3.10 *Signing Professional Certificates, Reports and other Documents:* A Registered Dental Surgeon involved independently in the treatment of dental and oral surgical problems may be called upon to sign certificates, notifications, reports, etc. He is bound to issue such certificates and to sign them. Documents relating to disability, injury in the oral and maxillofacial region and deaths occurring while under the care of such dental surgeons should be signed by them in their professional capacity for subsequent use in the courts or for administrative purposes, etc. Such documents, among others, include the ones given at Appendix 4. Any registered dental surgeon who is shown to have signed or given under his name and authority any such certificate, notification, report or document of a similar character which is untrue, misleading or improper, is liable to have his name deleted from the Register.

## CHAPTER 2

### **4. Duties of Dental Practitioners to their Patients:**

#### *4.1 Obligations to Patients*

- (4.1.1) Though a Dental Surgeon is not bound to treat each and every person asking his services, he should attend emergencies reporting to the clinic and should be mindful of the high character of his/her mission and the responsibility he discharges in the course of his professional duties. The Dental Surgeon should see patients at their hour of appointment as far as possible unless he is unable to do so due to unforeseen delays. He should never forget that the health and the lives of those

entrusted to his care depend on his skill and attention. A Dental Surgeon should endeavour to add to the comfort of the sick by making his visits at the hour indicated to the patients. A Dental surgeon advising a patient to seek service of another Dental Surgeon or physician is acceptable. However in the case of medical emergency a Dental Surgeon must institute standard care including resuscitation in case of cardiac episodes, for which all dental surgeons must be adequately trained in basic life support.

- (4.1.2) A Dental Surgeon can refuse treatment using his discretion but it should not be on the basis of any discrimination of colour, caste, religion, nationality or the presence of ailments such as HIV or other contagious diseases. However in keeping with the dictum of medical care, the dental surgeon must 'continue to treat' if he/she has accepted the patient for treatment. Treatment can be terminated on the wishes of the patient or with the resolution of the complaint for which the patient sought treatment. Treatment can also be terminated if the patient is in need of additional or expert care for which the Dental surgeon is not equipped to treat or if it falls outside the range of his expertise. In such instances, the patient should be referred to such specialists or higher centres where treatment is possible.
- (4.1.3) A Dental Practitioner having any incapacity detrimental to the patient or which can affect his performance vis-a-vis the patient is not permitted to practice his profession.

4.2 *Confidentiality*: Confidences concerning individual or domestic life entrusted by patients to a Dental Surgeon and defects in the disposition or character of patients observed during professionally attending to a patient should never be revealed unless such a revelation is required by the laws of the State. Sometimes, however, a clinician must determine whether his duty to society requires him to employ knowledge, obtained through confidence as a health care provider to protect a healthy person against a communicable disease to which he is about to be exposed. In such instance, the Dental Surgeon should act as he would wish another to act toward one of his own family in like circumstances.

4.3 *Prognosis*: The Dental Surgeon should neither exaggerate nor minimise the gravity of a patient's disease. He should ensure himself that the patient, his relatives or his responsible friends have such knowledge of the patient's condition as will serve the best interests of the patient and the family.

4.4 *The Patient must not be neglected*: A Dental surgeon is free to choose whom he will serve. He should, however, respond to any request for his assistance in an emergency. Once having undertaken a case, the Dental Surgeon should not neglect the patient, nor should he withdraw from

the case without giving adequate notice to the patient and his family. He shall not wilfully commit an act of negligence that may deprive his patient or patients from necessary Dental/Medical care.

### CHAPTER 3

## 5. Duties of Dental Surgeons and Specialists in Consultations:

### 5.1 *Consultation Etiquettes:*

(5.1.1) A Dental Surgeon should ordinarily be able to deal with all common diseases of the Oral cavity by virtue of his qualification and training. However, if the patient requires expert care of a specialist, appropriate references to Dental or Medical specialists may be made according to the nature of the problem. It is the duty of a specialist to refer the patient back to the patient's original dentist after the treatment for which the referral was made. While the specialist can collect his or her fees it would be unethical to pay commissions or any kind of gratuity to the referring dental surgeon.

(5.1.2) A Dental Surgeon shall not receive from the radiologist, laboratory or dispensing chemist any kind of commission in the form of money, gifts or gratuity for referrals. All referrals for investigation should be judicious, justifiable and done in the best interests of the patient to arrive at a diagnosis.

5.2 *Consultation for Patient's Benefit:* In every consultation, the benefit to the patient is of foremost importance. All Dental Surgeons engaged in the case should be frank with the patient and his attendants.

5.3 *Punctuality in Consultation:* Punctuality for consultations should be observed by a Dental Surgeon except in the case of unavoidable professional delays which are justifiable.

### 5.4 *Opinions and Disclosure:*

(5.4.1) All statements to the patient or his representatives made by any Consulting Healthcare Professional and/or the paramedical staff (nurses, etc.,) should take place in the presence of the Dental Surgeon, except as otherwise agreed. The disclosure of the opinion to the patient or his relatives or friends shall rest with the Dental Surgeon.

(5.4.2) Differences of opinion should not be divulged to the patient unnecessarily but when there is irreconcilable difference of opinion the circumstances should be frankly and impartially explained to the patient or his relatives or friends. It would be up to them to seek further advice, if they so desire.

5.5 *Treatment after Consultation:* No decision should restrain the attending Dental Surgeon from making such subsequent variations in the treatment if any unexpected change occurs, but at the next consultation, reasons for the variations should be discussed/explained. The same privilege, with



its obligations, belongs to the consultant when sent for in an emergency during the absence of attending Dental surgeon. The attending Dental Surgeon may prescribe medicine at any time for the patient, whereas the consultant may prescribe only in case of emergency or as an expert when called for.

5.6 *Patients Referred to Specialists:* When a patient is referred to a specialist by the attending Dental surgeon, a case summary of the patient should be given to the specialist, who should communicate his opinion in writing to the attending Dental surgeon.

5.7 *Fees and other charges:*

(5.7.1) A Dental Surgeon or the Clinic run by him shall clearly indicate the cost of treatment for the procedure and make an estimate of all costs likely to be incurred. Any increase in subsequent cost should be justified by the Dental surgeon. There is no bar on the display of fees and other charges in the Dental Clinic. Prescription should also make it clear if the Dental Surgeon himself dispensed any medicine.

(5.7.2) A Dental Surgeon shall write his name and designation in full along with the recognised dental degrees and the registration particulars in his prescription letter head.

*Note:* In Government hospitals where the patient-load is heavy, the name of the prescribing doctor must be written below his signature.

#### CHAPTER 4

### 6. Responsibilities of Dental Surgeons to One Another:

6.1 *Dependence of Dental Surgeons to each other:* A Dental Surgeon should consider it as a pleasure and privilege to render gratuitous service to other dentists, physicians and their immediate family dependants. However there is no mandatory bar on one accepting fees particularly when it involves expensive materials and time.

6.2 *Conduct in Consultation:* In consultations, no insincerity, rivalry or envy should be indulged in. All due respect should be observed towards the Dental Surgeon/physician in-charge of the case and no statement or remark be made, which would impair the confidence reposed in him. For this purpose no discussion should be carried on in the presence of the patient or his representatives.

6.3 *Consultant not to take charge of the case:* When a specialist Dental Surgeon has been called for consultation, the Consultant should normally not take charge of the case, especially on the solicitation of the patient or friends. The Consultant shall not criticise the referring Dental Surgeon. He shall discuss the diagnosis treatment plan with the referring Dental Surgeon.

6.4 *Appointment of Substitute:* Whenever a Dental Surgeon requests another Dental Surgeon to attend his patients during his temporary absence

from his practice, professional courtesy requires the acceptance of such appointment only when he has the capacity to discharge the additional responsibility along with his other duties. The Dental Surgeon acting under such an appointment should give the utmost consideration to the interests and reputation of the absent Dental Surgeon and all such patients should be restored to the care of the latter upon his return.

- 6.5 *Visiting another Case:* When it becomes the duty of a Dental Surgeon occupying an official position to see and report upon a condition and appropriate treatment, he should communicate to the Dental Surgeon in attendance so as to give him an option of being present. The Medical Officer/Dental Surgeon occupying an official position should avoid remarks upon the diagnosis or the treatment that has been adopted.

#### CHAPTER 5

### **7. Duties of Dental Surgeons to the Public and to the Paramedical Profession:**

- 7.1 *Dental Surgeons as Citizens:* Dental Surgeons, as good citizens, possessed of special training should disseminate advice on public health issues. They should play their part in enforcing the laws of the community and in sustaining the institutions that advance the interests of humanity. They should particularly cooperate with the authorities in the administration of sanitary/public health laws and regulations.
- 7.2 *Public and Community Health:* Dental Surgeons, especially those engaged in public health dentistry, should enlighten the public concerning oral health and prevention of oral diseases such as dental caries, periodontal health, precancerous lesions and oral cancer. At all times the dental surgeons should notify the constituted public health authorities or hospitals of every case of communicable disease under his care, in accordance with the laws, rules and regulations of the health authorities.
- 7.3 *Pharmacists/Nurses:* Dental Surgeons should recognise and promote the practice of different paramedical services such as Dental Hygienist, Dental Mechanic, Pharmacy and Nursing as professions and should seek their cooperation wherever required.

#### CHAPTER 6

**8. Unethical Acts:** A Dental Surgeon shall not aid or abet or commit any of the following acts which shall be construed as unethical. For the purpose of this regulations a dental surgeon refers to all registered practitioners whether they are in individual private practice, attached to hospitals, teaching hospitals or employed by others whether they are corporate or otherwise:

- 8.1 *Advertisement:* The global position on the issue of Ethics of Advertisement by Dental/Medical professionals has drastically changed over the last few decades. A Dentist or a group of Dentists may advertise provided that they maintain decorum, keeping in mind the high moral

obligations and the value that society places on the important nature of their work and the moral character and integrity expected of them. Dental Surgeons are expected to exhibit integrity, honesty, fidelity and selfless service. Monetary commitments can only be secondary to the welfare of his patients. Under these circumstances it is unethical:

- (8.1.1) To indulge in demeaning solicitation and false promises through advertisements or direct marketing of individuals, clinics or hospitals in contravention of the National Advertising Council or any other body regulating advertising in the country;
- (8.1.2) To advertise, whether directly or indirectly or being associated or employed with any organisation or company including corporate bodies that indulges in such activities in a manner which gives unfair professional advantage by cold targeting vulnerable groups and conducting camps and other promotional activity in schools, colleges, old age homes and distributing handbills, claim vouchers and other business promotional activities. Registered charitable organisations including registered body of Dental or Medical persons which provide fully free dental care and treatment out of altruism are however exempted;
- (8.1.3) To be associated with or employed by those who procure or sanction such false and misleading advertisements or publication through press reports that promise inducements, rebates and false benefits;
- (8.1.4) To employ any agent or canvasser for the purpose of obtaining patients in a manner that is commercial; or being associated with or employed by those who procure or sanction of such employment;
- (8.1.5) To use or exhibit any disproportionately large sign, other than a sign which in its character, position, size and wording is merely such as may reasonably be required to indicate to persons seeking the exact location of, and entrance to, the premises at which the dental practice is carried on, and nowhere else;
- (8.1.6) To allow the Dental Surgeon's name to be used to designate commercial articles such as toothpaste, toothbrush, tooth powder, mouthwashes liquid cleaners, or the like except if such articles are fabricated in the dental clinic e.g. dentures, crowns, bridges, etc.;
- (8.1.7) To permit publication of the Dental Surgeon's opinion on any procedure, equipment, in the general or lay papers or lay journals except when validated or supported by evidence based studies;
- (8.1.8) To indulge in surrogate advertisements in the garb of educating the public through TV programs, magazines or periodicals. Any

public information disseminated to the public in good faith and intention should not carry addresses telephone numbers, e-mail addresses, etc., of the Dental Surgeon or the clinic employing him to attract patients to their establishment;

- (8.1.9) To advertise in the electronic media, such as in television programs, that display names, addresses and telephone number of dentists as on-screen 'scrollers', or, of the clinics employing such dentists, etc.

8.2 *Soliciting*: Soliciting of patients, directly or indirectly, by a Dental Surgeon, by a group of Dental Surgeons or by institutions or organisations is unethical except when permitted under the provisions mentioned later (vide 8.2.1 to 8.2.10 of this document, Revised Dentists Code of Ethics Regulations, 2012). A Dental Surgeon shall not make use of himself (or his name) as subject of any form or manner of advertising or publicity through any mode either alone or in conjunction with others which is of such a character as to invite attention to him or to his professional position, skill, qualification, achievements, attainments, specialties, appointments, associations, affiliations or honors and/or of such character as would ordinarily result in his self-aggrandisement.

A Dental Surgeon shall not give to any person, whether for compensation or otherwise, any approval, recommendation, endorsement, certificate, report or statement with respect of any drug, medicine, nostrum remedy, surgical, or therapeutic article, apparatus or appliance or any commercial product or article with respect of any property, quality or use thereof or any test, demonstration or trial thereof, for use in connection with his name, signature, or photograph in any form or manner of advertising through any mode nor shall he boast of cases, operations, cures or remedies or permit the publication of report thereof through any mode. A Dental Surgeon is however permitted as an ethically acceptable practice to make a formal announcement in press regarding the following:

- (8.2.1) On starting practice.  
(8.2.2) On change of type of practice.  
(8.2.3) On changing address.  
(8.2.4) On temporary absence from duty for a prolonged period of time.  
(8.2.5) On resumption of practice after a break a prolonged period.  
(8.2.6) On succeeding to another practice.  
(8.2.7) About the availability of new equipment or services without boastful claims of being the 'best' or 'first' especially if such services are already available in other facilities.  
(8.2.8) Through insertion in telephone directories, yellow pages or on the internet is permissible and will only serve as public information. However any claim to superiority or special skills over others will be construed as unethical practice.

(8.2.9) Through maintenance of websites about dentists or dental clinics where all information is factual will not be construed as unethical practice. Websites can also carry details of treatment facilities available and the fees for the same. This will in fact help patients to make informed choices through a transparent system. However websites should not make claims or statements that are not factual and therefore misleading to the public.

### 8.3 *Publicity and Signage:*

(8.3.1) Printing of self-photograph, or any such material of publicity in the letter head or on sign board of the consulting room or any such clinical establishment shall be regarded as acts of self-advertisement and unethical conduct on the part of the physician. However, printing of sketches, diagrams, picture of human system shall not be treated as unethical;

(8.3.2) Using or exhibition of any sign, other than a sign which in its character, position, size and wording is merely such as may reasonably be required to indicate to persons seeking the exact location of, and entrance to, the premises at which the dental practice is carried on is considered unethical. These include:

(8.3.2.1) Use of sign-board with the use of such words which trivialise the dignity of the profession or notices in regard to practice on premises other than those in which a practice is actually carried on, or show cases, or flickering light signs and the use of any sign showing any matter other than his name and qualifications as defined under clause (j) of Section 2 of the Act;

(8.3.2.2) Affixing a sign-board on a chemist's shop or in places where the dentist does not reside or work.

(8.3.3) A Dental Surgeon shall not claim to be a specialist either through displayed signs on the name board and/or the office stationary (visiting cards, letterheads, etc.) unless he has a special qualification (which is recognised by the Council) in that Specialty. A Dental Surgeon can however practice all branches of Dentistry provided he shows adequate qualification, competence and bona fide training in the concerned branch or branches.

8.4 *Patent and Copyrights:* A Dental Surgeon may patent surgical instruments, appliances and medicine or copyright applications, methods and procedures. However, it shall be unethical if the benefits of such patents or copyrights are not made available in situations where the interest of large population is involved.

- 8.5 *Running an Open Shop (Dispensing of Drugs and Appliances by Physicians):* A Dental Surgeon should not run an open shop for sale of medicine for dispensing prescriptions prescribed by doctors other than him or for sale of dental medical or surgical appliances. It is not unethical for a Dental Surgeon to prescribe, supply or sell drugs, remedies or dental appliances in his clinic as long as there is no exploitation of the patients. Drugs prescribed by a Dental Surgeon or brought from the market for a patient should explicitly state the proprietary formulae as well as generic name of the drug.
- 8.6 *Rebates and Commission:*
- (8.6.1) A Dental Surgeon shall not give, solicit, or receive nor shall he offer to give solicit or receive, any gift, gratuity, commission or bonus in consideration of or return for the referring, recommending or procuring of any patient for dental, medical, surgical or other treatment. A Dental Surgeon shall not directly or indirectly, participate in or be a party to act of division, transference, assignment, subordination, rebating, splitting or refunding of any fee for medical, surgical or other treatment.
- (8.6.2) Provisions of Section 8.6.1 (of this document, Revised Dentists Code of Ethics Regulations, 2012) shall apply with equal force to the referring, recommending or procuring by a physician or any person, specimen or material for diagnostic purposes or other study/work. Nothing in this section, however, shall prohibit payment of salaries by a qualified physician to other duly qualified person rendering medical care under his supervision.
- 8.7 *Secret Remedies:* The prescribing or dispensing by a physician of secret remedial agents of which he does not know the composition, or the manufacture or promotion of their use is unethical and as such prohibited. All the drugs prescribed by a Dental Surgeon should always carry a proprietary formula and clear name.
- 8.8 *Human Rights:* The physician shall not aid or abet torture nor shall he be a party to either infliction of mental or physical trauma or concealment of torture inflicted by some other person or agency in clear violation of human rights.
- 8.9 *Unethical Practices:* The following shall also be the unethical practices for a Dentist:
- (8.9.1) A Dental Surgeon shall not employ a Dentist/Dental Surgeon in the professional practice or any other professional assistant (not being a registered dental hygienist or a registered dental mechanic) whose name is not registered in the State Dentists Register, to practice Dentistry as defined in clause (d) of Section 2 of the Act. He may however retain the services of a medical practitioner or anaesthetist as necessary.

- (8.9.2) Signing under his name and authority any certificate which is untrue, misleading or improper, or giving false certificates or testimonials directly or indirectly to any person or persons.
- (8.9.3) Use of abbreviations after the Dental Surgeon's name except those indicating dental qualifications as earned by him during his academic career in dentistry and which conform to the definition of 'recognised dental qualification' as defined in clause (j) of Section 2 of the Act, or any other academic qualifications from a recognised university obtained through a convocation indicating exemplary achievement. Any degree conferred on an honorary basis should be suffixed with the words "Honoris Causa". Such unacceptable abbreviations include, but not necessarily restricted to the following which are not academic qualifications:
- (8.9.3.1) R.D.P. for Registered Dental Practitioner;
  - (8.9.3.2) M.I.D.A. for Member, Indian Dental Association;
  - (8.9.3.3) F.I.C.D. for Fellow of International College of Dentists;
  - (8.9.3.4) M.I.C.D. for Master of International College of Dentists;
  - (8.9.3.5) F.A.C.D. for Fellow of American College of Dentists;
  - (8.9.3.6) M.R.S.H. for Member of Royal Society of Hygiene;
  - (8.9.3.7) F.A.G.E. for Fellow of Academy of General Education, etc.;
- (8.9.4) Submission of false information in declaration form at the time of assessment of Dental College.
- (8.9.5) Serving as (Duplicate faculty) i.e. working simultaneously in two/more Dental Colleges.
- (8.9.6) Conviction for any crime by any court will constitute unethical act.
- <sup>2</sup>[(8.9.7) Not enriching his/her professional knowledge by participating in professional meetings as part of Continuing Dental Education programs.]

8.10 *Naming and Styling of Dental Establishments:* A Dental Surgeon or a group of Dentists/Dental Surgeons shall refer to their establishment as a dental clinic. It may however be referred to as a dental hospital if the practice involves surgical treatment of oral and dental diseases under local or general anaesthesia and if the patients need to be maintained as an in-patient for part of a day or for several days for post-operative care provided the hospital fulfils the statutory requirements for such hospitals or establishments in the respective States.

- 8.11 *Contravention of Statutory Provisions:* A Dental Surgeon shall not contravene any of the acts referred to in Article 3.9 of this document, Revised Dentists Code of Ethics Regulations, 2014, and named in Annexure 3 of the same document and the rules made thereunder as amended from time to time, involving an abuse of privileges conferred thereunder upon a dentist, whether such contravention has been the subject of criminal proceedings or not.
- 8.12 *Signing of Certificates:* A Registered Dental Surgeon is bound by law to give, or may from time to time be called upon or requested to give certain certificates, notification, reports and other documents of similar character signed by them in their professional capacity for subsequent use in the courts, or elsewhere for administrative purposes, etc. Such documents, among others, include the ones given at Appendix 4 of this document, Revised Dentists Code of Ethics Regulations, 2014. A Dental Surgeon shall not sign under his name and authority any certificate which is untrue, misleading or improper, or give false certificates or testimonials directly or indirectly to any person or persons. He shall however deem it his duty to sign all necessary certificates relating to health of the patients.
- 8.13 *Doctor-Patient Sexual Misconduct:* A Dental Surgeon shall not be involved in immorality involving abuse of professional relationship and involve in sexual misconduct with a patient by misusing fiduciary relationship.
- 8.14 *Abiding by all Laws of the Land:* A Dental Surgeon shall not aid or abet in any violation of the laws of the land or be involved in any matter that is against public policy. He shall not be convicted by a court of law for offences involving moral turpitude/criminal acts.
- 8.15 *Relationship with Pharmaceutical Companies and Medical and Dental Industry:*
- 8.15.1 *Gifts, Travel, Hospitality, Monetary Grants:* A Dental Surgeon shall not receive any gift from any pharmaceutical or allied health care industry and their sales people or representatives. A Dental Surgeon shall not accept any travel facility inside the country or outside, including rail, air, ship, cruise tickets, paid vacations, etc. from any pharmaceutical or allied healthcare industry or their representatives for self and family members for vacation or for attending conferences, seminars, workshops, CDE/CME program, etc., as a delegate. A Dental Surgeon shall not receive any cash or monetary grants from any pharmaceutical and allied healthcare industry for individual purpose in individual capacity under any pretext. Funding for medical research, study, etc. can only be received through approved institutions and Professional Organisations by modalities laid down by law/rules/guidelines adopted by



such approved institutions, in a transparent manner. It shall always be fully disclosed.

8.15.2 *Dental/Medical Research*: A Dental Surgeon may carry out, participate in, and work in research projects funded by pharmaceutical and allied healthcare industries. A Dental Surgeon is obliged to know that the fulfillment of the following items [8.15.2.1 to 8.15.2.7 of this document, Revised Dentists Code of Ethics Regulations, 2012] will be an imperative for undertaking any research assignment/project funded by industry for being proper and ethical. Thus, in accepting such a position a Dental Surgeon shall:

(8.15.2.1) Ensure that the particular research proposal(s) has the due permission from the competent concerned authorities.

(8.15.2.2) Ensure that such a research project(s) has the clearance of national/state/institutional ethics committees/bodies.

(8.15.2.3) Ensure that it fulfils all the legal requirements prescribed for medical research.

(8.15.2.4) Ensure that the source and amount of funding is publicly disclosed at the beginning itself.

(8.15.2.5) Ensure that proper care and facilities are provided to human volunteers, if they are necessary for the research project.

(8.15.2.6) Ensure that undue animal experimentations are not done and when these are necessary they are done in a scientific and a humane way.

(8.15.2.7) Ensure that while accepting such an assignment a Dental Surgeon shall have the freedom to publish the results of the research in the greater interest of the society by inserting such a clause in the MOU (Memorandum of Understanding) or any other document/agreement for any such assignment.

8.15.3 *Maintaining Professional Autonomy*: In dealing with pharmaceutical and allied healthcare industry, a Dental Surgeon shall always ensure that there shall never be any compromise either with his/her own professional autonomy and/or with the autonomy and freedom of the medical institution.

8.15.4 *Affiliation*: A Dental Surgeon may work for pharmaceutical and allied healthcare industries in advisory capacities, as consultants, as researchers, as treating doctors or in any other professional capacity. In doing so, a medical practitioner shall always:

- (8.15.4.1) Ensure that his professional integrity and freedom are maintained.
  - (8.15.4.2) Ensure that patients' interest is not compromised in any way.
  - (8.15.4.3) Ensure that such affiliations are within the law.
  - (8.15.4.4) Ensure that such affiliations/employments are fully transparent and disclosed.
- 8.15.5 *Endorsement:* A Dental Surgeon shall not endorse any drug or product of the industry publically. Any study conducted on the efficacy or otherwise of such products shall be presented to and/or through appropriate scientific bodies or published in appropriate scientific journals in a proper way.

#### CHAPTER 7

**9. Punishments and Disciplinary Actions.**—A Dental Surgeon shall not aid or abet or commit any acts which shall be construed as unethical.

- 9.1 It must be clearly understood that the instances of offences and unethical conducts which are given above do not constitute and are not intended to constitute a complete list of the infamous acts which calls for disciplinary action, and that by issuing this notice the Dental Council of India and or State Dental Councils are in no way precluded from considering and dealing with any other form of professional misconduct on the part of a registered practitioner. Circumstances may and do arise from time to time in relation to which there may occur questions of professional misconduct which do not come within any of these categories. Every care should be taken that the code is not violated in letter or spirit. In such instances as in all others, the Dental Council of India and/or State Dental Councils have to consider and decide upon the facts brought before the Dental Council of India and/or State Dental Councils.
- 9.2 It is made clear that any complaint with regard to professional misconduct can be brought before the appropriate Dental Council for Disciplinary action. Upon receipt of any complaint of professional misconduct, the appropriate Dental Council would hold an enquiry and give opportunity to the registered Dental practitioner to be heard in person or by pleader. If the Dentist/Dental Surgeon is found to be guilty of committing professional misconduct, the appropriate Dental Council may award such punishment as deemed necessary or may direct the removal altogether or for a specified period, from the register the name of the delinquent registered practitioner. Deletion from the Register shall be widely publicized in local press as well as in the publications of different Medical and Dental Associations/Societies/Bodies.
- 9.3 In case the punishment of removal from the register is for a limited period, the appropriate Council may also direct that the name so removed

shall be restored in the register after the expiry of the period for which the name was ordered to be removed.

9.4 Decision on complaint against delinquent Dental Surgeons shall be taken within a time-limit of 6 months.

9.5 During the pendency of the complaint the appropriate Council may restrain the Dental Surgeon from performing the procedure or practice which is under scrutiny.

9.6 Professional incompetence shall be judged by peer group as per guidelines prescribed by State Dental Council. For this purpose the State Dental Council shall institute an Ethics Committee consisting of qualified persons of integrity and good name from amongst prominent registered Dental Surgeons in the State.

9.7 Where either on a request or otherwise the State Government or any competent authority is informed that any complaint against a delinquent practitioner has not been decided by a State Dental Council within a period of six months from the date of receipt of complaint by it and further the State Government or any competent authority has reason to believe that there is no justified reason for not deciding the complaint within the said prescribed period, the State Government or any competent authority may.

(9.7.1) Impress upon the concerned State Dental Council to conclude and decide the complaint within a time bound schedule.

(9.7.2) May decide to refer the said complaint pending with the concerned State Dental Council straightaway or after the expiry of the period which had been stipulated by the Regulation in accordance with para (9.7.1 of this document, Revised Dentists Code of Ethics Regulations, 2012) above, to itself and refer the same to the Ethical Committee of the State Dental Council for its expeditious disposal in a period of not more than six months from the receipt of the complaint with the State Government.

9.8 Any person aggrieved by the decision of the State Dental Council on any complaint against a delinquent Dental Surgeon, shall have the right to file an appeal to the State Government within a period of 60 days from the date of receipt of the order passed by the said State Dental Council:

Provided that the State Government may, if it is satisfied that the appellant was prevented by sufficient cause from presenting the appeal within the aforesaid period of 60 days, allow it to be presented within a further period of 60 days.