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Committed to Dental Excellence

28 February, 2020

Shri D.V.K. Rao IAS (dvkrao@gov.in)
Deputy Secretary
Dental Education
Ministry of Health and Family Welfare
Government of India
Nirman Bhavan, New Delhi 110011

Dear Shri Rao,

Subject: Comments on Draft National Dental Commission Bill (Updated)

This has reference to the letter No. D.O. No. V.12011/01/2019-DE dated 5 February, 2020 from Shri Nipun Vinayak, Joint Secretary, MoHFW, Government of India, addressed to our President, Dr. Ravindar Singh on the captioned subject.

As desired therein, we are forwarding attached hereto the comments of the Indian Dental Association (IDA) on the Draft National Dental Commission Bill for the consideration of the Ministry. This supersedes the earlier comments those were sent to you at 2:27 hrs on 27th February, 2020,

The Indian Dental Association representatives will be very happy to present through rational of suggestions and further discuss on amplification of existing resources for achievement of overall progress towards betterment of oral health scenario in the country by deploying adequate measures under good governance.

Kindly acknowledge receipt.

With regards
Yours sincerely



Dr. Ashok Dhoble
Hon. Secretary General

Encl: Suggestion / comments from Indian Dental Association.

Copy with compliments to:

Shri Nipun Vinayak (vinayak.nipun@nic.in)
Joint Secretary, MoHFW for kind information

Dr Ravindar Singh
President IDA

THE NATIONAL DENTAL COMMISSION BILL, 2020 - Draft

(Indian Dental Association observations on the circulated Draft Bill)

CHAPTER - I PRELIMINARY

The PREAMBLE

Explanatory

Dentistry has seen lot many evidence-based advancements and the scope has expanded much. Globally World Health Organization, speaks about oral health and its integration with general health. As per WHO Oral health is a key indicator of overall health, well-being and quality of life. Most oral diseases and conditions share modifiable risk factors with the leading NCDs (cardiovascular diseases, cancer, chronic respiratory diseases and diabetes). These risk factors include tobacco use, alcohol consumption and unhealthy diets high in free sugars, all of which are increasing at the global level. Our country also has a "National Oral Health Program" and moving in direction of framing "National Oral Health Policy". Hence it is timely and imperative that, the proposed bill addresses the issues in macro aspect, which will be much important in addressing, universal health coverage, human resource planning as relevant to oral healthcare service providers, education, quality assessments and improving health systems as such. Considering the fact, that this bill seeks to replace the Indian Dentists act of 1948, it will be a great service to our nation, if the same is drafted in accordance with the changing times and requirement.

Draft Bill

Suggestions

A BILL

A BILL

Page - 1
PREAMBLE

to provide for a dental education system that improves access to quality and affordable dental education ensures availability of adequate and high-quality dental professionals in all parts of the country; that promotes equitable and universal oral healthcare that encourages community health perspective and makes services of dental professionals accessible to all the citizens; that promotes national health goals; that encourages dental professionals to adopt latest dental research in their work and to contribute to research; that has an objective periodic and

to provide for a dental education system that improves access to quality and affordable Dental education ensures availability of adequate and high-quality **Oral Health Care Professionals** in all parts of the that promotes equitable and universal oral healthcare, that encourages community health perspective and makes services of **Oral Health Care Professionals** accessible to all of the citizens; that promotes national health goals; that encourages **Oral Health Care Professionals** to adopt and contribute to research; that has an objective periodic and transparent assessment of **Dental Educational institutions,**

	transparent assessment of dental institutions and facilitates maintenance of a dental register for India and enforces high ethical standards in all aspects of dental services; that is flexible to adapt to changing needs and has an effective grievance redressal mechanism and for matters connected therewith or incidental thereto.	facilitates the maintenance of registers of Oral Health Care Professionals for India and regulates the profession of Dentistry by enforcing high ethical standards in all aspects of Oral health services; that is flexible to adapt to changing needs and has an effective grievance redressal mechanism and for matters connected therewith or incidental thereto.
Section : 2 – Definitions		
Explanatory	In Chapter 1 of the new act which deals with definitions, has not included the terms like “dental hygienist” and “dental mechanic”. The above-mentioned terms were well defined in the Dentist Act, 1948 which this new bill seeks to replace, and these definitions should be added in the new bill, as the dental hygienist and dental mechanic plays a very important role in the dental profession and omitting these words will have a detrimental effect in the profession. Since the bill clearly defines as to who can practise dentistry, the relevant section may be added to the elaboration of the definition as there is more clarity.	
Page - 2	Draft Bill	Suggestions
Page - 2 Section 2 (j)	“dentist” means a person who practises dentistry;	“dentist” or "dental Surgeon" means a person who practises dentistry with a licence to practice dentistry granted under sub-section (1) of section 33;
Inclusion sought		“Dental hygienist” means a person not being a dentist or a medical practitioner, who scales, cleans or polishes teeth, or gives instruction in dental hygiene under the supervision of a Dental Surgeon.
Inclusion sought		“dental mechanic” means a person who makes or repairs denture and dental appliances;
Section: 2 - Definition of Dentistry		
Explanatory	Though the scope of practice of dentistry is significantly altered to suit the present-day modern practice it would be suggested to include forensic odontology and sports dentistry as two areas wherein today's age dental professionals are involved in a major	

	way.	
	Draft Bill	Suggestions
Page - 2 Section 2 (k)	<p>“dentistry” includes— (i) the performance of any operation on, and the treatment on any disease, deficiency or lesion of, human teeth or jaw or or facial hard and soft tissues and associated structures; and the performance of other diagnostic tools/investigations in connection with human teeth or jaws or the oral cavity; (ii) Measures for prevention of diseases of the oral cavity and associated structures and promotion of oral health including tobacco cessation; (iii) the giving of any anesthetic in connection with any such operation or treatment; excluding general anaesthesia; (iv) the performance of any operation on, or the giving of any treatment, advice or attendance to, any person preparatory to, or for the purpose of, or in connection with restoration, reconstruction and rehabilitation of teeth, jaws, orofacial tissue and associated structures, the fitting, inserting, fixing, constructing, repairing or renewing of artificial dentures or restorative dental appliances, and the performance of any such operation and the giving of any such treatment, advice or attendance, as is usually performed or given by dentists; (v) Knowledge related to performance of mastication, phonation and deglutition.;</p>	<p>“dentistry” includes— (i) the performance of any operation on, and the treatment on any disease, deficiency or lesion of, human teeth or jaw or orofacial hard and soft tissues and associated structures; and the performance of other diagnostic tools/investigations in connection with human teeth or jaws or the oral cavity; (ii) Measures for prevention of diseases of the oral cavity and associated structures and promotion of oral health including tobacco cessation; (iii) the giving of any anaesthetic in connection with any such operation or treatment; excluding general anaesthesia; (iv) the performance of any operation on, or the giving of any treatment, advice or attendance to, any person preparatory to, or for the purpose of, or in connection with restoration, reconstruction and rehabilitation of teeth, jaws, orofacial tissue and associated structures, the fitting, inserting, fixing, constructing, repairing or renewing of artificial dentures or restorative dental appliances, and the performance of any such operation and the giving of any such treatment, advice or attendance, as is usually performed or given by dentists in maintenance of Oral health and fields such as sports dentistry (v) Knowledge related to the performance of mastication, phonation and deglutition.;(vi) assistance to legal investigations with regard to Forensic Odontology.</p>
	Definition of State Dental Council	
Explanatory	<p>The definition of “State Dental Council” is given in Section 2(v) of the new bill, the bill has redefined the definition when compared with the parent act.</p> <p>The new definition of the state dental council is seen to be restricting the powers of the state dental council, limiting the powers of the council will have a detrimental effect in the management of dental education in the state, thus the definition given to the said term must be redefined and well-constructed definition must be given.</p>	

	Draft Bill	Suggestions
Page - 3 Section 2 (v)	“State Dental Council” means a dental council constituted under any law for the time being in force in any State or Union territory for regulating the practice and registration of practitioners of dentistry in that State or Union territory;	The definition of “State Dental Council” the definition given to the said term must be redefined and well-constructed definition and its constitution clearly mentioned elsewhere.
Definition of National and State Register		
Explanatory	Section 2(n &w) of the new bill deals with the definition of the term “National register” and it has replaced the term “Register” from the parent act. While the term register has been replaced with the national register has not been properly defined in the bill, thus it creates an ambiguity hence as per the new bill, the definition and purpose of a National register & State Register and have to be suitably modified.	
	Draft Bill	Suggestions
Page - 2 Section 2 - (n)	“National Register" means a register maintained under Ethics and Registration Board under Section 31:	<i>The term “National register” and it has replaced the term “Register” from the parent act. While the term register has been replaced with the national register has not been properly defined in the bill,</i>
Page - 3 Section 2 - (w)	“State Register" means a register maintained under any law for the time being in force in any State or Union territory for registration of practitioners of dentistry;	“State Register" means a register maintained under any law for the time being in force in any State or Union territory for registration of practitioners of dentistry or means a register maintained as per Section 31 (6) of the proposed NDC Bill
CHAPTER 2 - THE NATIONAL DENTAL COMMISSION		
Composition of the Commission		

<p>Explanatory</p>	<p>Dental practitioners are not represented in any of the autonomous boards which will be constituted under the new bill. Thus, affecting equal representation of stakeholders criteria followed in the Dentist Act 1948. In the new bill, the private practitioners must be given proper representation in the boards. Inclusion of a representative of Indian Dental Association in the Commission and Autonomous boards would significantly improve</p>	
	<p style="text-align: center;">Draft Bill</p>	<p style="text-align: center;">Suggestions</p>
<p>Page - 5 Section 4 - (3)</p>	<p>The following persons shall be the ex-officio Members of the Commission, namely:</p> <ul style="list-style-type: none"> (a) the President of the Under-Graduate Dental Education Board; (b) the President of the Post-Graduate Dental Education Board; (c) the President of the Dental Assessment and Rating Board; (d) the President of the Ethics and Dental Registration Board; (e) the Director-General of Health Services, Directorate General of Health Services, New Delhi; (f) Chief of the Centre for Dental Education & Research, All India Institute of Medical Sciences, New Delhi; (g) one person to represent the Ministry of the Central Government dealing with Health and Family Welfare, not below the rank of Additional Secretary to the Government of India, to be nominated by that Ministry. 	<p style="color: red;">h) One representative of the Indian Dental Association (IDA) which is the largest and oldest professional body in Dentistry.</p>
	<p style="text-align: center;">Section: 4 - Appointment as a part-time member</p>	
<p>Explanatory</p>	<p>There is a major concern in the fact that the majority of Commission / Advisory Council members are non-Dental Professionals. It is imperative that appropriate dental professionals are incorporated into the regulatory body for fulfilling the objectives of the bill. The qualification for the appointment as a part-time member under the above-mentioned section is that the person must be a Vice-Chancellor of a health university in the State or Union territory, there are only a very few Dental professionals in this category and eventually, the Council and the advisory board would have a huge discrepancy. We, therefore, suggest instead of Vice-</p>	

	<p>chancellor it must be replaced with Dean, Faculty of Dental Science of Health University. The changes should be brought for bringing proper representation in the Dental Advisory Council.</p> <p>The President and the whole-time members appointed by the Central Government in the autonomous boards will have tenure of 4 years and the part-time member nominated by the State Dental Council will get tenure of 2 years. The nominated members of the State Dental Council should be given a term of 4 years so that the democratic nature of the boards may be upheld. By giving a 4-year term to the nominated members of the state dental council it will contribute to the better working of the boards and ultimately will have a positive effect.</p>	
	Draft Bill	Suggestions
<p>Page - 4 Section 4 - (b)</p>	<p>(b) ten Members to be appointed from amongst the nominees of the States and Union territories, under clauses (c) and (d) of sub-section (2) of section 11, in the Dental Advisory Council for a term of two years in such manner as may be prescribed;</p>	<p><i>clause (c) & (d) of sub-section (2) of section 11 :</i> one member to represent each State, who is the vice-chancellor Dean of Faculty of Dentistry of a Health University in that State, to be nominated by that State Government;</p> <p>Ten Members to be appointed from amongst the nominees of the States and Union territories, under clauses (c) and (d) of sub-section (2) of section 11, in the Dental Advisory Council for a term of four years in such manner as may be prescribed;</p>
<p>Page - 4 Section 4 - (c)</p>	<p>(c) nine members to be appointed from amongst the nominees of the States and Union territories, under clause (e) of sub-section (2) of section 11, in the Dental Advisory Council for a term of two years in such manner as may be prescribed.</p>	<p><i>clause (e) of sub-section (2) of section 11 :</i> one member to represent each Union Territory, who is the Vice-Chancellor Dean of Faculty of Dentistry of a health University in that State, to be nominated by that State Government;</p> <p>nine members to be appointed from amongst the nominees of the States and Union territories, under clause (e) of sub-section (2) of section 11, in the Dental Advisory Council for a term of four years in such manner as may be prescribed.</p>
Section : 10 - Functions of the Commission		
<p>Explanatory</p>	<p>The role of the commission in the regulation of fees would only lead to making the Education system more costlier and place the</p>	

	credibility of the whole system in jeopardy and nullify the very purpose of this new legislation. The role of Fees fixing is best left to the State government taking into consideration local factors as well.	
	Draft Bill	Suggestions
Page - 9 Section 10 - (i)	frame guidelines for determination of fees and all other charges in respect of fifty per cent of seats in private dental institutions and deemed to be universities which are governed under the provisions of this Act;	The commission should not be involved in the regulation of fees
	CHAPTER - 3 THE DENTAL ADVISORY COUNCIL	
	Constitution and Composition of Dental Advisory Council	
Explanatory	<p>There is a major concern in the fact that the majority of Advisory Council members are Non Dental professionals. It is imperative that appropriate dental professionals are incorporated into the regulatory body for fulfilling the objectives of the bill. The qualification for the appointment as a part-time member under the above-mentioned section is that the person must be a Vice-Chancellor of a health university in the State or Union territory, there are only a very few Dental professionals in this category and eventually the Council and advisory board would have a huge discrepancy we therefor suggest instead of Vice-chancellor it must be replaced with Dean, Faculty of Dental Science of Health University. The changes should be brought for bringing proper representation in the Dental Advisory Council.</p> <p>The President and the whole-time members appointed by the Central Government in the autonomous boards will have a tenure of 4 years and the part-time member nominated by the State Dental Council will get a tenure of 2 years. The nominated members of the State Dental Council should be given a term of 4 years so that the democratic nature of the boards may be upheld. By giving a 4-year term to the nominated members of the state dental council it will contribute to the better working of the boards and ultimately will have a positive effect.</p>	
	Draft Bill	Suggestions
Page - 9 Section11 -	one member to represent each State, who is the Vice-Chancellor of a health University in that State, to be	one member to represent each State, who is the vice-chancellor Dean of Faculty of Dentistry of a Health University in that State,

2. (c)	nominated by that State Government;	to be nominated by that State Government;
Page - 10 Section 11 - 2. (d)	one member to represent each Union territory, who is the Vice-Chancellor of a health University in that Union territory, to be nominated by the Ministry of Home Affairs in the Government of India;	one member to represent each Union Territory, who is the vice-chancellor Dean of Faculty of Dentistry of a health University in that State, to be nominated by that State Government;
Page - 10 Section 11 - 2. (e)	one member to represent each State and each Union territory from amongst elected members of the State Dental Council, to be nominated by that State Dental Council;	one member to represent each State and each Union territory from amongst elected members of the State Dental Council, to be nominated elected by that State Dental Council;
Provisio	Provided that if there is no health University in any State or Union territory, the Vice-Chancellor of a University within that State or Union territory having the largest number of dental colleges affiliated to it shall be nominated by the State Government or by the Ministry of Home Affairs in the Government of India:	Provided that if there is no health University in any State or Union territory, the Vice-Chancellor Dean of Faculty of Dentistry of a University within that State or Union territory having the largest number of dental colleges affiliated to it shall be nominated by the State Government or by the Ministry of Home Affairs in the Government of India:
Functions of Dental Advisory Council		
	Draft Bill	Suggestions
Page - 10 Section 12 - 2	The Council shall advise the Commission on measures to determine and maintain and to coordinate maintenance of, the minimum standards in all matters relating to dental education, training and research.	The Council shall advise the Commission on measures to determine and maintain and to coordinate maintenance, the minimum Optimum Standards in all matters relating to dental education, training and research.
CHAPTER IV NATIONAL EXAMINATION		
National Exit Test		

<p>Explanatory</p>	<p>Section 15 of the NDC Bill introduces National Exit Test which will be used as a qualifying examination for final year BDS students to practice in India, for getting post-graduate seats and also be used for foreign dental qualification/ professional degree holders to practice in India. National exit test being used as a criteria for 3 different purposes will have a detrimental effect on dental education in India.</p> <p>Proper explanation regarding the designated authority who will be conducting the counselling of the national exit test is not given in Section 15(6) of the bill. The ambiguity prevailing the designated authority must be properly resolved.</p> <p>The very purpose of this new bill is to provide for a dental education system that has an objective periodic assessment of the systems and hence the constitution of Autonomous boards as in the Undergraduate and Postgraduate Education board. The very purpose of an Exit Exam would nullify the objective of the bill. The degrees granted by recognised health Universities following the directives of the bill would be of no value.</p> <p>The Exit test which has no provision to test the clinical acumen of a professional is worthless when it comes to licence to practice and the same test to be used as an entrance examination for postgraduate courses will only serve to create confusion amongst the young graduates and aspirants of Postgraduate programmes.</p>	
	<p>Draft Bill</p>	<p>Suggestions</p>
<p>Page - 11 Section 15</p>	<p>A common final year undergraduate dental examination, to be known as the National Exit Test (Dental) shall be held for granting a licence to practice dentistry as dentists and for enrolment in the State Register or the National Register, as the case may be.</p>	<p>The Proposed Exit Test for granting a license to practise should be done away with</p>
<p>CHAPTER - V AUTONOMOUS BOARDS</p>		
<p>Composition of the Autonomous Bodies</p>		
<p>Explanatory</p>	<p>Dental practitioners are not represented in any of the autonomous boards which will be constituted under the new bill. Thus, affecting equal representation of stakeholders criteria followed in the Dentist Act 1948. In the new bill, the private practitioners</p>	

	<p>must be given proper representation in the boards. Inclusion of a representative of Indian Dental Association in the Commission and Autonomous boards would significantly improve.</p> <p>it is without a doubt that the transparency involved when a member of the professional body is incorporated as a constituent of the Dental Assessment and Rating Board as being a major stakeholder in the profession representing the vast number of Dental Surgeons the IDA representative would be able in providing a practical viewpoint in the autonomous body. There are a lot of fears and misconceptions prevailing over The Ethics and Dental Registration Board and its functions, A representative from IDA should be definitely be included as a member which would help in allaying the fears of the General practitioner to a large extent.</p> <p>Section 27(1) (d) of the bill, The Ethics and Dental Registration board will exercise appellate jurisdiction over the actions taken by the State Dental Council. The State Dental Council has very less representation in the board, thus the decisions and actions taken by state dental council can easily be revoked by the Board. The state dental council and the professional organization must be given proportionate representation in the Ethics And Dental Registration Board.</p> <p>As per section 17 (5), the 4th member of every autonomous board will be nominated by the State Dental Council. The way in which the fourth members among the State Dental Council will be elected is not properly explained in the bill, which creates ambiguity and the same must be properly fixed.</p>	
	Draft Bill	Suggestions
Page - 12 Section 17 - 1	Each Autonomous Board shall consist of a President and two whole-time Members and two part-time Members.	One representative of the Indian Dental Association (IDA) if included would be beneficial since a representation from the practitioners is not there.
Page - 13 Section 17 - 5	The fourth Member of each Autonomous Boards, being a part-time Member, shall be chosen from amongst the elected Members of the State Dental Council in such a manner as may be prescribed.	The fourth Member of each Autonomous Boards, being a part-time Member, shall be elected from amongst the Members of the State Dental Councils.
	Functions of Undergraduate & Post-Graduate Dental Education Board	
Explanatory	While the Undergraduate & Postgraduate Dental Education Board grants recognition of a dental qualification it is equally important that the powers envisaged should include the power to withdraw a dental qualification at the appropriate level.	

	Draft Bill	Suggestions
Page - 15 Section 24 - 1 (j)	grant recognition to a dental qualification at the undergraduate level.	grant / withdraw recognition to a dental qualification at the undergraduate level.
Page - 15 Section 25 - 1 (i)	grant recognition to the dental qualifications at the postgraduate level;	grant / withdraw recognition to the dental qualifications at the postgraduate level;
Functions of The Ethics and Dental Registration Board		
Explanatory	<p>The dental hygienist and dental mechanic registers will have to be maintained at the National and State level. The above-mentioned registers were well defined in the Dentist Act, 1948 and maintained.</p> <p>The ethics and dental registration board are given the authority to maintain the national register in India. In the new bill provisions for maintaining a Speciality register / Speciality List must be added and the ethics and registration board must be given the authority to the maintain the same.</p> <p>The ethics and dental registration board must be given appellate jurisdiction over the health universities for managing the service related matters of faculty members in the dental institutions. This will enable protection for the faculty member's against the arbitrary and illegal actions on the part of the dental institutions and will help in protecting their rights.</p>	
	Draft Bill	Suggestions
Page - 17 Section 27- 1 (a)	Maintain National Registers of all licensed dentists in accordance with the provisions of section 31;	
Inclusion sought		(b) maintain National Registers of Dental Hygienists
Inclusion sought		(c) maintain National Registers of all Dental Technicians

	STATE DENTAL COUNCIL	
Explanatory	<p>State Dental Councils that function now is formed as per Section 21 of the Dentists Act and rules formed by State governments made under section 55 of the Dentist Act 1948.</p> <p>Unlike in the Medical Scenario, there are no Acts that regulate the Dental Councils in the State, hence the very process of repealing the Dentist Act would make the existing State Dental Councils Non existent.</p> <p>It is mandatory that the Bill lays out a framework of the constitution of the State Dental Councils as there is a lot of ambiguity or add sufficient provision to make the existing councils functional under the proposed legislation.</p>	
	Draft Bill	Suggestions
Page - 19 Section 30	<p>“State Dental Council” means a dental council constituted under any law for the time being in force in any State or Union territory for regulating the practice and registration of practitioners of dentistry in that State or Union territory;</p>	<p>“State Dental Council” must be redefined and well-constructed definition and its constitution clearly outlined</p>
	NATIONAL REGISTER AND STATE REGISTER	
Explanatory	<p>Separate register for Dental mechanics and dental hygienist must be maintained by the ethics and registration board. The parent act has the provisions for maintaining the register for dental hygienist and dental mechanics by the state dental council, that provisions has been omitted in the new bill and it should be added.</p> <p>The maintainance and validity of entry in the dental register is not specified elsewhere and it is highly essential that the Registers maintained under the act are live Registers, which have to depict the current status of practicing Oral health care professionals which otherwise would tend to promote quackery. Hence definite provisions should be provided in the parent act itself to maintaining a live register by means of regulations rules framed for such purpose.</p>	
	Draft Bill	Suggestions
Page - 20 Section	<p>The Ethics and Dental Registration Board shall maintain a National Register containing the name, address, all</p>	<p>The Ethics and Dental Registration Board shall maintain a National Register containing the name, address, all recognised</p>

31 - (1)	recognised qualifications possessed by a licensed dentist and such other particulars as may be specified by regulations.	qualifications possessed by a licensed dentist, Dental Hygeinist, Dental technician and such other particulars as may be specified by regulations.
Page – 20 Section 32 - (1)	Any person who qualifies the National Exit Test held under section 15 shall be granted a licence to practice dentistry and shall have his name and qualifications enrolled in the National Register oi a State Register, as the case may be: Provided that a person who has been registered in the Indian Dental Register maintained under the Dentists Act. 1948 prior to the coming	Any person who qualifies the National Exit Test held under section 15 shall be granted a licence to practice dentistry and shall have his name and qualifications enrolled in the National Register or a State Register, as the case may be in accordance with rules & regulations framed as in Section 55 from time to time : Provided that a person who has been registered in the Indian Dental Register maintained under the Dentists Act. 1948 prior to the coming
	BAR TO PRACTICE	
	<p>The new bill states no person other than one enrolled in the state or national register may hold office as a dentist or any other office, by whatever name called, which is meant to be held by a dentist. The term “by whatever name called” will leave room for misinterpretation and will eventually lead to the sprouting of different names for dental treatment centres. The term “dental clinic” is a must for any centre that provides dental treatment and the same should be specifically mentioned in the new bill.</p> <p>As per section 3.10 of The Revised Dentist (Code of Ethics) Regulations, 2014 of the Dentist Act 1948, a dentist had been given the power to issue death certificates and that provision is seen omitted in the new bill, so that provision must be added in the new bill.</p>	
	Draft Bill	Suggestions
Page - 21 Section 33 - 1 (b)	hold office as a dentist or any other office, by whatever name called, which is meant to be held by a dentist;	hold office as a dentist in a dental clinic , which is meant to be held by a dentist;
Page - 21 Section 33 - 1 (c)	be entitled to sign or authenticate a medical or fitness certificate or any other certificate required by any law to be signed or authenticated by a duly qualified dentist;	be entitled to sign or authenticate a medical or fitness certificate, death certificate or any other certificate required by any law to be signed or authenticated by a duly qualified dentist;

CHAPTER VIII MISCELLANEOUS	
Power to make regulations	
Explanatory	Separate regulations should be made by the Commission for the purpose of maintenance of Live Registers and the formalities for updating them periodically.
	Draft Bill
	Suggestions
Page - 30 Section 55	The Commission may, after previous publication, by notification, make regulations consistent with this Act and the Rules made thereunder to carry out the provisions of this Act.
Inclusion sought	The procedure for maintaining and renewing live National Register and State Register.
OMMISSIONS	
OMISSION - 1	<p>As per the Indian dentist act 1948, section 51(1) clearly states that “except as hereinafter provided, the profession of dentistry shall not be carried on by a company of other corporate bodies” if this is not added in the new bill, then the corporates who have no association with dentistry will start dental clinics and this will have a detrimental effect on the practising dental surgeons in India. So the provisions in the parent act must be retained in the new bill and the rights and interest of the practising dentist in India must be protected.</p> <p>1. The new bill has not mentioned the company and body corporate carrying on the profession of dentistry.</p>
OMISSION - 2	<p>Section 36 of the new bill says that the dental qualification granted by any “statutory or other body in India” which are listed in the Schedule shall be recognized for the purposes of this Act. This provision may have drastic effect as it will permit anybody in India to start courses in dentistry and issue certificates.</p> <p>The Indian Dental Association should be permitted as the sole provider and the only Agency for providing such certificate courses for continuous dental educational accreditation & upgradation of dental professionals, i.e., Oral Healthcare Professionals.</p>

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(Indian Dental Association observations on the circulated Draft Bill)

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Dentistry has seen lot many evidence-based advancements and the scope has expanded much. Globally World Health Organization, speaks about oral health and its integration with general health. As per WHO Oral health is a key indicator of overall health, well-being and quality of life. Most oral diseases and conditions share modifiable risk factors with the leading NCDs (cardiovascular diseases, cancer, chronic respiratory diseases and diabetes). These risk factors include tobacco use, alcohol consumption and unhealthy diets high in free sugars, all of which are increasing at the global level. Our country also has a "National Oral Health Program" and moving in direction of framing "National Oral Health Policy". Hence it is timely and imperative that, the proposed bill addresses the issues in macro aspect, which will be much important in addressing, universal health coverage, human resource planning as relevant to oral healthcare service providers, education, quality assessments and improving health systems as such. Considering the fact, that this bill seeks to replace the Indian Dentists act of 1948, it will be a great service to our nation, if the same is drafted in accordance with the changing times and requirement.

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	transparent assessment of dental institutions and facilitates maintenance of a dental register for India and enforces high ethical standards in all aspects of dental services; that is flexible to adapt to changing needs and has an effective grievance redressal mechanism and for matters connected therewith or incidental thereto.	facilitates the maintenance of registers of Oral Health Care Professionals for India and regulates the profession of Dentistry by enforcing high ethical standards in all aspects of Oral health services; that is flexible to adapt to changing needs and has an effective grievance redressal mechanism and for matters connected therewith or incidental thereto.
Section : 2 – Definitions		
Explanatory	In Chapter 1 of the new act which deals with definitions, has not included the terms like “dental hygienist” and “dental mechanic”. The above-mentioned terms were well defined in the Dentist Act, 1948 which this new bill seeks to replace, and these definitions should be added in the new bill, as the dental hygienist and dental mechanic plays a very important role in the dental profession and omitting these words will have a detrimental effect in the profession. Since the bill clearly defines as to who can practise dentistry, the relevant section may be added to the elaboration of the definition as there is more clarity.	
Page - 2	Draft Bill	Suggestions
<i>Page - 2</i> Section 2 (j)	“dentist” means a person who practises dentistry;	“dentist” or "dental Surgeon" means a person who practises dentistry with a licence to practice dentistry granted under sub-section (1) of section 33;
Inclusion sought		“Dental hygienist” means a person not being a dentist or a medical practitioner, who scales, cleans or polishes teeth, or gives instruction in dental hygiene under the supervision of a Dental Surgeon.
Inclusion sought		“dental mechanic” means a person who makes or repairs denture and dental appliances;
Section: 2 - Definition of Dentistry		
Explanatory	Though the scope of practice of dentistry is significantly altered to suit the present-day modern practice it would be suggested to include forensic odontology and sports dentistry as two areas wherein today's age dental professionals are involved in a major	

	way.	
	Draft Bill	Suggestions
Page - 2 Section 2 (k)	<p>“dentistry” includes— (i) the performance of any operation on, and the treatment on any disease, deficiency or lesion of, human teeth or jaw or or facial hard and soft tissues and associated structures; and the performance of other diagnostic tools/investigations in connection with human teeth or jaws or the oral cavity; (ii) Measures for prevention of diseases of the oral cavity and associated structures and promotion of oral health including tobacco cessation; (iii) the giving of any anesthetic in connection with any such operation or treatment; excluding general anaesthesia; (iv) the performance of any operation on, or the giving of any treatment, advice or attendance to, any person preparatory to, or for the purpose of, or in connection with restoration, reconstruction and rehabilitation of teeth, jaws, orofacial tissue and associated structures, the fitting, inserting, fixing, constructing, repairing or renewing of artificial dentures or restorative dental appliances, and the performance of any such operation and the giving of any such treatment, advice or attendance, as is usually performed or given by dentists; (v) Knowledge related to performance of mastication, phonation and deglutition.;</p>	<p>“dentistry” includes— (i) the performance of any operation on, and the treatment on any disease, deficiency or lesion of, human teeth or jaw or orofacial hard and soft tissues and associated structures; and the performance of other diagnostic tools/investigations in connection with human teeth or jaws or the oral cavity; (ii) Measures for prevention of diseases of the oral cavity and associated structures and promotion of oral health including tobacco cessation; (iii) the giving of any anaesthetic in connection with any such operation or treatment; excluding general anaesthesia; (iv) the performance of any operation on, or the giving of any treatment, advice or attendance to, any person preparatory to, or for the purpose of, or in connection with restoration, reconstruction and rehabilitation of teeth, jaws, orofacial tissue and associated structures, the fitting, inserting, fixing, constructing, repairing or renewing of artificial dentures or restorative dental appliances, and the performance of any such operation and the giving of any such treatment, advice or attendance, as is usually performed or given by dentists in maintenance of Oral health and fields such as sports dentistry (v) Knowledge related to the performance of mastication, phonation and deglutition.;(vi) assistance to legal investigations with regard to Forensic Odontology.</p>
	Definition of State Dental Council	
Explanatory	<p>The definition of “State Dental Council” is given in Section 2(v) of the new bill, the bill has redefined the definition when compared with the parent act.</p> <p>The new definition of the state dental council is seen to be restricting the powers of the state dental council, limiting the powers of the council will have a detrimental effect in the management of dental education in the state, thus the definition given to the said term must be redefined and well-constructed definition must be given.</p>	

	Draft Bill	Suggestions
Page - 3 Section 2 (v)	“State Dental Council” means a dental council constituted under any law for the time being in force in any State or Union territory for regulating the practice and registration of practitioners of dentistry in that State or Union territory;	The definition of “State Dental Council” the definition given to the said term must be redefined and well-constructed definition and its constitution clearly mentioned elsewhere.
Definition of National and State Register		
Explanatory	Section 2(n &w) of the new bill deals with the definition of the term “National register” and it has replaced the term “Register” from the parent act. While the term register has been replaced with the national register has not been properly defined in the bill, thus it creates an ambiguity hence as per the new bill, the definition and purpose of a National register & State Register and have to be suitably modified.	
	Draft Bill	Suggestions
Page - 2 Section 2 - (n)	“National Register" means a register maintained under Ethics and Registration Board under Section 31:	<i>The term “National register” and it has replaced the term “Register” from the parent act. While the term register has been replaced with the national register has not been properly defined in the bill,</i>
Page - 3 Section 2 - (w)	“State Register" means a register maintained under any law for the time being in force in any State or Union territory for registration of practitioners of dentistry;	“State Register" means a register maintained under any law for the time being in force in any State or Union territory for registration of practitioners of dentistry or means a register maintained as per Section 31 (6) of the proposed NDC Bill
CHAPTER 2 - THE NATIONAL DENTAL COMMISSION		
Composition of the Commission		

Explanatory	Dental practitioners are not represented in any of the autonomous boards which will be constituted under the new bill. Thus, affecting equal representation of stakeholders criteria followed in the Dentist Act 1948. In the new bill, the private practitioners must be given proper representation in the boards. Inclusion of a representative of Indian Dental Association in the Commission and Autonomous boards would significantly improve	
	Draft Bill	Suggestions
Page - 5 Section 4 - (3)	<p>The following persons shall be the ex-officio Members of the Commission, namely:</p> <p>(a) the President of the Under-Graduate Dental Education Board;</p> <p>(b) the President of the Post-Graduate Dental Education Board;</p> <p>(c) the President of the Dental Assessment and Rating Board;</p> <p>(d) the President of the Ethics and Dental Registration Board;</p> <p>(e) the Director-General of Health Services, Directorate General of Health Services, New Delhi;</p> <p>(f) Chief of the Centre for Dental Education & Research, All India Institute of Medical Sciences, New Delhi;</p> <p>(g) one person to represent the Ministry of the Central Government dealing with Health and Family Welfare, not below the rank of Additional Secretary to the Government of India, to be nominated by that Ministry.</p>	<p style="color: red;">h) One representative of the Indian Dental Association (IDA) which is the largest and oldest professional body in Dentistry.</p>
Section: 4 - Appointment as a part-time member		
Explanatory	There is a major concern in the fact that the majority of Commission / Advisory Council members are non-Dental Professionals. It is imperative that appropriate dental professionals are incorporated into the regulatory body for fulfilling the objectives of the bill. The qualification for the appointment as a part-time member under the above-mentioned section is that the person must be a Vice-Chancellor of a health university in the State or Union territory, there are only a very few Dental professionals in this category and eventually, the Council and the advisory board would have a huge discrepancy. We, therefore, suggest instead of Vice-	

	<p>chancellor it must be replaced with Dean, Faculty of Dental Science of Health University. The changes should be brought for bringing proper representation in the Dental Advisory Council.</p> <p>The President and the whole-time members appointed by the Central Government in the autonomous boards will have tenure of 4 years and the part-time member nominated by the State Dental Council will get tenure of 2 years. The nominated members of the State Dental Council should be given a term of 4 years so that the democratic nature of the boards may be upheld. By giving a 4-year term to the nominated members of the state dental council it will contribute to the better working of the boards and ultimately will have a positive effect.</p>	
	Draft Bill	Suggestions
<p>Page - 4 Section 4 - (b)</p>	<p>(b) ten Members to be appointed from amongst the nominees of the States and Union territories, under clauses (c) and (d) of sub-section (2) of section 11, in the Dental Advisory Council for a term of two years in such manner as may be prescribed;</p>	<p><i>clause (c) & (d) of sub-section (2) of section 11 :</i> one member to represent each State, who is the vice-chancellor Dean of Faculty of Dentistry of a Health University in that State, to be nominated by that State Government;</p> <p>Ten Members to be appointed from amongst the nominees of the States and Union territories, under clauses (c) and (d) of sub-section (2) of section 11, in the Dental Advisory Council for a term of four years in such manner as may be prescribed;</p>
<p>Page - 4 Section 4 - (c)</p>	<p>(c) nine members to be appointed from amongst the nominees of the States and Union territories, under clause (e) of sub-section (2) of section 11, in the Dental Advisory Council for a term of two years in such manner as may be prescribed.</p>	<p><i>clause (e) of sub-section (2) of section 11 :</i> one member to represent each Union Territory, who is the Vice-Chancellor Dean of Faculty of Dentistry of a health University in that State, to be nominated by that State Government;</p> <p>nine members to be appointed from amongst the nominees of the States and Union territories, under clause (e) of sub-section (2) of section 11, in the Dental Advisory Council for a term of four years in such manner as may be prescribed.</p>
Section : 10 - Functions of the Commission		
<p>Explanatory</p>	<p>The role of the commission in the regulation of fees would only lead to making the Education system more costlier and place the</p>	

	credibility of the whole system in jeopardy and nullify the very purpose of this new legislation. The role of Fees fixing is best left to the State government taking into consideration local factors as well.	
	Draft Bill	Suggestions
Page - 9 Section 10 - (i)	frame guidelines for determination of fees and all other charges in respect of fifty per cent of seats in private dental institutions and deemed to be universities which are governed under the provisions of this Act;	The commission should not be involved in the regulation of fees
CHAPTER - 3		
THE DENTAL ADVISORY COUNCIL		
Constitution and Composition of Dental Advisory Council		
Explanatory	<p>There is a major concern in the fact that the majority of Advisory Council members are Non Dental professionals. It is imperative that appropriate dental professionals are incorporated into the regulatory body for fulfilling the objectives of the bill. The qualification for the appointment as a part-time member under the above-mentioned section is that the person must be a Vice-Chancellor of a health university in the State or Union territory, there are only a very few Dental professionals in this category and eventually the Council and advisory board would have a huge discrepancy we therefor suggest instead of Vice-chancellor it must be replaced with Dean, Faculty of Dental Science of Health University. The changes should be brought for bringing proper representation in the Dental Advisory Council.</p> <p>The President and the whole-time members appointed by the Central Government in the autonomous boards will have a tenure of 4 years and the part-time member nominated by the State Dental Council will get a tenure of 2 years. The nominated members of the State Dental Council should be given a term of 4 years so that the democratic nature of the boards may be upheld. By giving a 4-year term to the nominated members of the state dental council it will contribute to the better working of the boards and ultimately will have a positive effect.</p>	
	Draft Bill	Suggestions
Page - 9 Section11 -	one member to represent each State, who is the Vice-Chancellor of a health University in that State, to be	one member to represent each State, who is the vice-chancellor Dean of Faculty of Dentistry of a Health University in that State,

2. (c)	nominated by that State Government;	to be nominated by that State Government;
Page - 10 Section 11 - 2. (d)	one member to represent each Union territory, who is the Vice-Chancellor of a health University in that Union territory, to be nominated by the Ministry of Home Affairs in the Government of India;	one member to represent each Union Territory, who is the vice-chancellor Dean of Faculty of Dentistry of a health University in that State, to be nominated by that State Government;
Page - 10 Section 11 - 2. (e)	one member to represent each State and each Union territory from amongst elected members of the State Dental Council, to be nominated by that State Dental Council;	one member to represent each State and each Union territory from amongst elected members of the State Dental Council, to be nominated elected by that State Dental Council;
Provisio	Provided that if there is no health University in any State or Union territory, the Vice-Chancellor of a University within that State or Union territory having the largest number of dental colleges affiliated to it shall be nominated by the State Government or by the Ministry of Home Affairs in the Government of India:	Provided that if there is no health University in any State or Union territory, the Vice-Chancellor Dean of Faculty of Dentistry of a University within that State or Union territory having the largest number of dental colleges affiliated to it shall be nominated by the State Government or by the Ministry of Home Affairs in the Government of India:
Functions of Dental Advisory Council		
	Draft Bill	Suggestions
Page - 10 Section 12 - 2	The Council shall advise the Commission on measures to determine and maintain and to coordinate maintenance ol, the minimum standards in all matters relating to dental education, training and research.	The Council shall advise the Commission on measures to determine and maintain and to coordinate maintenance, the minimum Optimum Standards in all matters relating to dental education, training and research.
CHAPTER IV NATIONAL EXAMINATION		
National Exit Test		

<p>Explanatory</p>	<p>Section 15 of the NDC Bill introduces National Exit Test which will be used as a qualifying examination for final year BDS students to practice in India, for getting post-graduate seats and also be used for foreign dental qualification/ professional degree holders to practice in India. National exit test being used as a criteria for 3 different purposes will have a detrimental effect on dental education in India.</p> <p>Proper explanation regarding the designated authority who will be conducting the counselling of the national exit test is not given in Section 15(6) of the bill. The ambiguity prevailing the designated authority must be properly resolved.</p> <p>The very purpose of this new bill is to provide for a dental education system that has an objective periodic assessment of the systems and hence the constitution of Autonomous boards as in the Undergraduate and Postgraduate Education board. The very purpose of an Exit Exam would nullify the objective of the bill. The degrees granted by recognised health Universities following the directives of the bill would be of no value.</p> <p>The Exit test which has no provision to test the clinical acumen of a professional is worthless when it comes to licence to practice and the same test to be used as an entrance examination for postgraduate courses will only serve to create confusion amongst the young graduates and aspirants of Postgraduate programmes.</p>	
	<p>Draft Bill</p>	<p>Suggestions</p>
<p>Page - 11 Section 15</p>	<p>A common final year undergraduate dental examination, to be known as the National Exit Test (Dental) shall be held for granting a licence to practice dentistry as dentists and for enrolment in the State Register or the National Register, as the case may be.</p>	<p>The Proposed Exit Test for granting a license to practise should be done away with</p>
<p>CHAPTER - V AUTONOMOUS BOARDS</p>		
<p>Composition of the Autonomous Bodies</p>		
<p>Explanatory</p>	<p>Dental practitioners are not represented in any of the autonomous boards which will be constituted under the new bill. Thus, affecting equal representation of stakeholders criteria followed in the Dentist Act 1948. In the new bill, the private practitioners</p>	

	<p>must be given proper representation in the boards. Inclusion of a representative of Indian Dental Association in the Commission and Autonomous boards would significantly improve.</p> <p>it is without a doubt that the transparency involved when a member of the professional body is incorporated as a constituent of the Dental Assessment and Rating Board as being a major stakeholder in the profession representing the vast number of Dental Surgeons the IDA representative would be able in providing a practical viewpoint in the autonomous body. There are a lot of fears and misconceptions prevailing over The Ethics and Dental Registration Board and its functions, A representative from IDA should be definitely be included as a member which would help in allaying the fears of the General practitioner to a large extent.</p> <p>Section 27(1) (d) of the bill, The Ethics and Dental Registration board will exercise appellate jurisdiction over the actions taken by the State Dental Council. The State Dental Council has very less representation in the board, thus the decisions and actions taken by state dental council can easily be revoked by the Board. The state dental council and the professional organization must be given proportionate representation in the Ethics And Dental Registration Board.</p> <p>As per section 17 (5), the 4th member of every autonomous board will be nominated by the State Dental Council. The way in which the fourth members among the State Dental Council will be elected is not properly explained in the bill, which creates ambiguity and the same must be properly fixed.</p>	
	Draft Bill	Suggestions
Page - 12 Section 17 - 1	Each Autonomous Board shall consist of a President and two whole-time Members and two part-time Members.	One representative of the Indian Dental Association (IDA) if included would be beneficial since a representation from the practitioners is not there.
Page - 13 Section 17 - 5	The fourth Member of each Autonomous Boards, being a part-time Member, shall be chosen from amongst the elected Members of the State Dental Council in such a manner as may be prescribed.	The fourth Member of each Autonomous Boards, being a part-time Member, shall be elected from amongst the Members of the State Dental Councils.
Functions of Undergraduate & Post-Graduate Dental Education Board		
Explanatory	While the Undergraduate & Postgraduate Dental Education Board grants recognition of a dental qualification it is equally important that the powers envisaged should include the power to withdraw a dental qualification at the appropriate level.	

	Draft Bill	Suggestions
Page - 15 Section 24 - 1 (j)	grant recognition to a dental qualification at the undergraduate level.	grant / withdraw recognition to a dental qualification at the undergraduate level.
Page - 15 Section 25 - 1 (i)	grant recognition to the dental qualifications at the postgraduate level;	grant / withdraw recognition to the dental qualifications at the postgraduate level;
Functions of The Ethics and Dental Registration Board		
Explanatory	<p>The dental hygienist and dental mechanic registers will have to be maintained at the National and State level. The above-mentioned registers were well defined in the Dentist Act, 1948 and maintained.</p> <p>The ethics and dental registration board are given the authority to maintain the national register in India. In the new bill provisions for maintaining a Speciality register / Speciality List must be added and the ethics and registration board must be given the authority to the maintain the same.</p> <p>The ethics and dental registration board must be given appellate jurisdiction over the health universities for managing the service related matters of faculty members in the dental institutions. This will enable protection for the faculty member's against the arbitrary and illegal actions on the part of the dental institutions and will help in protecting their rights.</p>	
	Draft Bill	Suggestions
Page - 17 Section 27- 1 (a)	Maintain National Registers of all licensed dentists in accordance with the provisions of section 31;	
Inclusion sought		(b) maintain National Registers of Dental Hygienists
Inclusion sought		(c) maintain National Registers of all Dental Technicians

	STATE DENTAL COUNCIL	
Explanatory	<p>State Dental Councils that function now is formed as per Section 21 of the Dentists Act and rules formed by State governments made under section 55 of the Dentist Act 1948.</p> <p>Unlike in the Medical Scenario, there are no Acts that regulate the Dental Councils in the State, hence the very process of repealing the Dentist Act would make the existing State Dental Councils Non existent.</p> <p>It is mandatory that the Bill lays out a framework of the constitution of the State Dental Councils as there is a lot of ambiguity or add sufficient provision to make the existing councils functional under the proposed legislation.</p>	
	Draft Bill	Suggestions
Page - 19 Section 30	<p>“State Dental Council” means a dental council constituted under any law for the time being in force in any State or Union territory for regulating the practice and registration of practitioners of dentistry in that State or Union territory;</p>	<p>“State Dental Council” must be redefined and well-constructed definition and its constitution clearly outlined</p>
	NATIONAL REGISTER AND STATE REGISTER	
Explanatory	<p>Separate register for Dental mechanics and dental hygienist must be maintained by the ethics and registration board. The parent act has the provisions for maintaining the register for dental hygienist and dental mechanics by the state dental council, that provisions has been omitted in the new bill and it should be added.</p> <p>The maintainance and validity of entry in the dental register is not specified elsewhere and it is highly essential that the Registers maintained under the act are live Registers, which have to depict the current status of practicing Oral health care professionals which otherwise would tend to promote quackery. Hence definite provisions should be provided in the parent act itself to maintaining a live register by means of regulations rules framed for such purpose.</p>	
	Draft Bill	Suggestions
Page - 20 Section	<p>The Ethics and Dental Registration Board shall maintain a National Register containing the name, address, all</p>	<p>The Ethics and Dental Registration Board shall maintain a National Register containing the name, address, all recognised</p>

31 - (1)	recognised qualifications possessed by a licensed dentist and such other particulars as may be specified by regulations.	qualifications possessed by a licensed dentist, Dental Hygeinist, Dental technician and such other particulars as may be specified by regulations.
Page – 20 Section 32 - (1)	Any person who qualifies the National Exit Test held under section 15 shall be granted a licence to practice dentistry and shall have his name and qualifications enrolled in the National Register oi a State Register, as the case may be: Provided that a person who has been registered in the Indian Dental Register maintained under the Dentists Act. 1948 prior to the coming	Any person who qualifies the National Exit Test held under section 15 shall be granted a licence to practice dentistry and shall have his name and qualifications enrolled in the National Register or a State Register, as the case may be in accordance with rules & regulations framed as in Section 55 from time to time: Provided that a person who has been registered in the Indian Dental Register maintained under the Dentists Act. 1948 prior to the coming
	BAR TO PRACTICE	
	<p>The new bill states no person other than one enrolled in the state or national register may hold office as a dentist or any other office, by whatever name called, which is meant to be held by a dentist. The term “by whatever name called” will leave room for misinterpretation and will eventually lead to the sprouting of different names for dental treatment centres. The term “dental clinic” is a must for any centre that provides dental treatment and the same should be specifically mentioned in the new bill.</p> <p>As per section 3.10 of The Revised Dentist (Code of Ethics) Regulations, 2014 of the Dentist Act 1948, a dentist had been given the power to issue death certificates and that provision is seen omitted in the new bill, so that provision must be added in the new bill.</p>	
	Draft Bill	Suggestions
Page - 21 Section 33 - 1 (b)	hold office as a dentist or any other office, by whatever name called, which is meant to be held by a dentist;	hold office as a dentist in a dental clinic, which is meant to be held by a dentist;
Page - 21 Section 33 - 1 (c)	be entitled to sign or authenticate a medical or fitness certificate or any other certificate required by any law to be signed or authenticated by a duly qualified dentist;	be entitled to sign or authenticate a medical or fitness certificate, death certificate or any other certificate required by any law to be signed or authenticated by a duly qualified dentist;

CHAPTER VIII MISCELLANEOUS	
Power to make regulations	
Explanatory	Separate regulations should be made by the Commission for the purpose of maintenance of Live Registers and the formalities for updating them periodically.
	Draft Bill
	Suggestions
Page - 30 Section 55	The Commission may, after previous publication, by notification, make regulations consistent with this Act and the Rules made thereunder to carry out the provisions of this Act.
Inclusion sought	The procedure for maintaining and renewing live National Register and State Register.
OMMISSIONS	
OMISSION - 1	<p>As per the Indian dentist act 1948, section 51(1) clearly states that “except as hereinafter provided, the profession of dentistry shall not be carried on by a company of other corporate bodies” if this is not added in the new bill, then the corporates who have no association with dentistry will start dental clinics and this will have a detrimental effect on the practising dental surgeons in India. So the provisions in the parent act must be retained in the new bill and the rights and interest of the practising dentist in India must be protected.</p> <p>1. The new bill has not mentioned the company and body corporate carrying on the profession of dentistry.</p>
OMISSION - 2	<p>Section 36 of the new bill says that the dental qualification granted by any “statutory or other body in India” which are listed in the Schedule shall be recognized for the purposes of this Act. This provision may have drastic effect as it will permit anybody in India to start courses in dentistry and issue certificates.</p> <p>The Indian Dental Association should be permitted as the sole provider and the only Agency for providing such certificate courses for continuous dental educational accreditation & upgradation of dental professionals, i.e., Oral Healthcare Professionals.</p>