

Position Summary

Dentists must be able to prescribe, dispense, supply or administer any appropriate drugs for patients for the purposes of oral healthcare. Dentists should consider the risks of misuse and dependency issues when prescribing certain medications including opioids and anxiolytics.

Background

- 1.1. Dentists have had independent prescribing privileges for many years.
- 1.2. Dentists may prescribe medications including analgesics, antibiotics and anxiolytics for the purpose of oral healthcare.
- 1.3. The National Prescribing Service (NPS) Prescribing Competencies Framework describes the competencies that are expected of prescribers to ensure medicines are used judiciously, appropriately, safely and effectively in the Australian healthcare system.
- 1.4. University programs for student dentists include appropriate biomedical sciences to support safe prescribing.
- 1.5. Governments regulate the prescribing of medications and the regulations in each state and territory and can vary significantly.
- 1.6. Medication safety is an important professional standard recognised and supported by legislation, guidelines and resources.
- 1.7. Inappropriate prescribing can lead to ineffective or unsafe treatment, prolong or exacerbate illness, distress or harm the patient, decrease the effectiveness of antimicrobial medications and be costly.
- 1.8. Inappropriate prescription of certain medications including opioids and anxiolytics may lead to misuse and dependency.
- 1.9. Real time prescription monitoring systems for monitored medicines are in place for each state and territory in Australia.
- 1.10. Electronic prescribing is a component of Australian Government eHealth initiatives.
- 1.11. The scope of practice and training of allied dental personnel does not include prescribing or dispensing of medications.
- 1.12. The principles and current recommendations about the use of medications in dentistry are published in Therapeutic Guidelines, Oral and Dental.¹

Definitions

- 1.13. BOARD is the Dental Board of Australia.
- 1.14. DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.
- 1.15. DENTIST is an appropriately qualified dental practitioner, registered by the Board to practise all areas of dentistry.

¹ Oral and dental expert group. Therapeutic Guidelines: Oral and Dental. Version 3..

¹ This Policy Statement is linked to other Policy Statement: 6.17 Sedation in Dentistry.

2. Position

- 2.1. The education of dentists must continue to meet the standards of the NPS Prescribing Competencies Framework.
- 2.2. Strategies for medication safety include accessing appropriate educational resources and liaising with other treating health providers.
- 2.3. Dentists must comply with all legal requirements pertaining to prescribing or dispensing medications.
- 2.4. Dentists must be able to prescribe, supply or administer any appropriate drug (including opioids) for dental patients for the purposes of oral healthcare.
- 2.5. Dentists must be given access to the relevant real time prescription monitoring system when prescribing any medications captured by the system.
- 2.6. Dentists should consider the risks of misuse and dependency issues when prescribing certain medications including opioids and anxiolytics.
- 2.7. Dental software should facilitate electronic prescribing.
- 2.8. The scope of practice and training of allied dental personnel does not and should not include prescribing or dispensing of medications.
- 2.9. There should be uniform medications and poisons legislation in Australia.

Policy Statement 6.23

Adopted by ADA Federal Council, November 15/16, 2012.

Amended by ADA Federal Council, April 14/15, 2016.

Amended by ADA Federal Council, April 6/7, 2017.

Amended by ADA Federal Council, April 24, 2020

Amended by ADA Federal Council, November 20, 2020

Amended by ADA Federal Council, November 17, 2023