

Position Summary

Overseas elective dental treatment carries the risk of adverse oral and general health outcomes with long term problems which may be difficult to resolve on return to Australia. Australian residents should only seek elective dental care in Australia to ensure Australian standards are met, complications are managed promptly, and good oral health is maintained.

Australian promoters of health services in overseas countries should be required to indemnify consumers for all adverse outcomes of such treatment.

1. Background

- 1.1. Dental treatment may be promoted in conjunction with overseas holidays to entice people to have dental procedures performed at costs allegedly less than those that prevail in Australia. There is potential for delivery of treatment without full informed consent and at a different professional and regulatory standard than provided in Australia which can be detrimental to both oral and general health. The treatment may also require extensive and costly repair procedures on return to Australia.
- 1.2. In Australia:
 - Dental practitioners' training courses and assessment of overseas qualified dental practitioners by the Australian Dental Council ensure the maintenance of high levels of professional competence.
 - Dental practitioners are required to be registered by the Board and to comply with high standards.
 - Infection prevention and control standards are of international best practice level and are enforced by the Board.
 - Dental practices are supplied with safe water which is essential for satisfactory infection control.
 - Equipment and materials used comply with the highest international standards and are subject to rigid scrutiny and approval by the Therapeutic Goods Administration.
 - Patients' rights are protected by the Board, ADA Branch peer review and conciliation services, State health complaint authorities, and common law. Patients have easy access to their treating dental practitioners to remedy problems.
 - Dental practitioners are required to have professional indemnity insurance. This may not be the case in overseas clinics.
- 1.3. The diagnosis, treatment and maintenance of dental conditions is a complex process and the oral environment changes throughout life. This can be made even more complex due to language and cultural differences and time limits. Optimal ongoing oral health cannot be achieved in a single episode or short course of treatment and requires regular maintenance.
- 1.4. Ongoing and corrective treatment may be compromised, as the records and complete details of treatment obtained overseas are unlikely to be available to those providing subsequent treatment in Australia.
- 1.5. Complications to health from elective dental treatments (i.e., treatment that can be scheduled in advance) obtained while overseas are not always covered by travel insurance and the treatments may not be covered by Australian health funds.

This Policy Statement is linked to other Policy Statements: 2.2.7 Emergency Overseas Dental Treatment & 5.5 Funding Agencies

Page 1 | ADA Policies

1.6. Infection prevention and control standards in overseas dental clinics may not meet Australian standards leading to increased risk of disease transmission to the individual and community.

Definitions

- 1.7. The AUSTRALIAN DENTAL COUNCIL (the ADC) is an independent authority assigned the accreditation functions for the dental profession by the Dental Board of Australia under the National Registration and Accreditation Scheme.
- 1.8. BOARD is the Dental Board of Australia.
- **1.9.** DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.
- 1.10. A DENTIST is an appropriately qualified dental practitioner, registered by the Board to practise all areas of dentistry.
- 1.11. FUNDING AGENCIES are third parties, which make contributions to the payment of the fees charged by dentists.
- 1.12. THERAPEUTIC GOODS ADMINISTRATION is the statutory body which is responsible for regulating therapeutic goods in Australia.

2. Position

- 2.1. Australian residents should only seek elective dental treatment in Australia to ensure Australian standards are met, complications are managed promptly, and good oral health is maintained
- 2.2. Australian residents should not seek elective treatment overseas due to the:
 - inability to maintain supportive maintenance dental visits;
 - possible communication difficulties with the practitioner and practice staff which may impact on informed consent;
 - risk of adverse oral and general health outcomes with potential long-term problems which may be difficult to resolve;
 - possible lack of insurance cover for complications;
 - lack of recourse for treatment and maintenance problems;
 - Inability to necessarily see the same dentist who provided the care on subsequent visits to that country for ongoing care;
 - lack of access to treatment records: and
 - potential to introduce new antimicrobial resistant organisms and disease transmission into Australia.
 - potential challenge of finding a dental practitioner to continue with, or repair, elective treatment started overseas due to concerns including incompatible product systems, techniques not consistent with Australian standards and materials not approved by the TGA.
- 2.3. Australian residents should carefully consider, before having treatment overseas, whether the following are equivalent to those in Australia:
 - the practitioner's qualifications;
 - infection prevention and control standards, including the quality of water supplied to dental clinics;
 - quality and compatibility of the materials used, treatment techniques and the potential outcome;
 - the ability to claim rebates from Funding Agencies; and

- complaint resolution mechanisms.
- 2.4. Promoters of health services in overseas countries should be required to indemnify consumers for all adverse outcomes caused by such treatment. This indemnity should not be time limited as adverse outcomes may not become apparent for a number of years after the provision of treatment.
- 2.5. Australian residents should seek the advice of an Australian dentist before considering or embarking on overseas dental treatment.

Policy Statement 2.2.6

Adopted by ADA Federal Council, April 12/13, 2007. Amended by ADA Federal Council, November 17/18, 2011. Amended by ADA Federal Council, November 13/14, 2014 Amended by ADA Federal Council, November 9/10, 2017. Amended by ADA Federal Council, November 20, 2020 Amended by ADA Federal Council, November 17, 2023