



All Ontario dentists with the required education and training may apply to the College to prescribe, order and take dental CT scans, and to install and operate a dental CT scanner.

The most commonly asked questions regarding this process appear below. We trust this information will be of assistance to you.

Q: WHAT TYPES OF DENTAL CT SCANNERS CAN BE USED BY ONTARIO DENTISTS?

The College's Standard of Practice sets out two types of dental CT scanners, based on the size of the image or field of view generated:

DA-SCANNER – Dentoalveolar CT scanner with a field of view of 8 centimetres or less.

A small field of view is useful for imaging the teeth, their supporting structures, the mandible and the maxilla up to the floor of the nose.

CF-SCANNER – Craniofacial CT scanner with a field of view of over 8 centimetres.

In addition to dentoalveolar structures, a large field of view may include intracranial structures, the base of the skull, the temporomandibular joint, the paranasal sinuses, the cervical spine, the neck and the airway spaces.

Q: ARE ALL DENTISTS ABLE TO USE BOTH TYPES OF DENTAL CT SCANNERS?

The short answer is no. Dentoalveolar CT scanners may be used by any dentist who meets the educational requirements set out in the Standard of Practice and registers with the College. Craniofacial CT scanners may only be used by oral and maxillofacial radiologists and those oral and maxillofacial surgeons who have completed a mentoring program with an oral and maxillofacial radiologist or qualified medical radiologist.

Q: WHAT ARE THE EDUCATIONAL REQUIREMENTS TO USE A DENTOALVEOLAR CT SCANNER?

All dentists who wish to prescribe, order and take dental CT scans must register with the College as a prescribing dentist and have successfully completed a theoretical and practical training program designed to produce competency in the ordering, taking, interpreting and reporting of dental CT scans with respect to the field of view generated.

For dentoalveolar scans, this means successful completion of a course of instruction of at least two days duration that is affiliated with an accredited university, organized and taught by dentists certified in oral and maxillofacial radiology, and has a post-course examination.

The curriculum for this course must include theoretical and practical components, addressing radiation physics and protection, indications and contraindications for dental CT scans, patient positioning, selection of parameters, development and implementation of protocols, and processing, interpreting and reporting of images.

A certificate or other evidence of satisfactory completion of the course, as well as a written description of the program signed by the course director, must be submitted to the College for consideration.

Q: WHAT ARE THE EDUCATIONAL REQUIREMENTS TO USE A CRANIOFACIAL CT SCANNER?

Dentists who have successfully completed a formal postgraduate program in oral and maxillofacial radiology, suitable for certification in the province of Ontario, are able to register with the College as a prescribing dentist to use a craniofacial CT scanner.

Dentists who have successfully completed a formal postgraduate program in oral and maxillofacial surgery, suitable for certification in the province of Ontario, **AND** who have successfully completed a mentoring program with an oral and maxillofacial radiologist or qualified medical radiologist are also able to register with the College as a prescribing dentist to use a craniofacial CT scanner.

The mentoring program must involve the interpreting and reporting of at least 50 craniofacial CT scans. A letter or other evidence of satisfactory completion of the mentoring program and attesting to the competence of the candidate, signed by the mentor, as well as a written description of the program, must be submitted to the College for consideration.

Q: ARE THERE ANY OTHER EDUCATIONAL OR PROFESSIONAL REQUIREMENTS?

Yes there are. In addition to the above specified training, all prescribing dentists ordering and taking dental CT scans must receive on-site training in the safe operation of the equipment at the time of installation.

As well, prescribing dentists are expected to include courses and/or other educational programs related to the ordering, taking, interpreting and reporting of dental CT scans in their personal continuing dental education planning.

NEED TO KNOW: In accordance with the College's Standard and the regulatory amendments to the HARP Act, other than a qualified prescribing dentist, the only staff persons who may expose patients to dental CT scans are qualified medical radiation technologists who are registered with the College of Medical Radiation Technologists of Ontario and acting under the on-site supervision of a qualified prescribing dentist.

Q: I UNDERSTAND THAT I MUST REGISTER WITH THE COLLEGE AS A PRESCRIBING DENTIST AND APPLY FOR A FACILITY PERMIT BEFORE I CAN INSTALL AND OPERATE A DENTAL CT SCANNER. HOW DO I BEGIN THIS PROCESS?

All dentists who wish to prescribe, order and take dental CT scans must register with the College as a prescribing dentist. This includes all dentists who are specialists in oral and maxillofacial radiology and all dentists who practise in hospital dental departments. The registration form for prescribing dentists can be downloaded from our website at www.rcdso.org/Members/DentalCTScanners/ApplicationProcess.

In addition, every dental facility where a dental CT scanner is installed and operated must have a facility permit issued by the College. The facility permit application form can also be downloaded from our website at www.rcdso.org/Members/DentalCTScanners/ApplicationProcess.

Please be advised that the process for approving a facility permit application takes about 6-8 weeks.

Q: IN ADDITION TO COMPLETING THE NECESSARY REGISTRATION AND FACILITY PERMIT APPLICATION FORMS, WHAT ELSE MUST I DO?

Once you have submitted the above-mentioned application forms to the College the process will be as follows:

1. You will receive written confirmation from the College confirming receipt of your application form and outlining your next steps.
2. You must forward a copy of College's Application Approval letter to the X-Ray Inspection Service (XRIS) at the Ministry of Health and Long-Term Care (Ministry) with the requisite Ministry application forms to install and operate a dental CT scanner.
3. You must provide the College with a copy of your letter of approval and letter of designation issued by the Ministry.
4. A Provisional Facility Permit will be issued by the College. It will clearly designate the type of dental CT scanner that has been approved for use in that particular facility. It is important that you do not use your dental CT Scanner until all approvals are obtained. Please refer to the Checklist of Requirements for Dental CT Scanner Facility Permit found on our website for further information.

Unless extended, a Provisional Facility Permit will expire in six (6) months from the date of its issuance. Within this period, the Facility Permit Holder must provide the College with the specified information set out in the Checklist of Requirements for Dental CT Scanner found on our website and be subject to an on-site inspection of the facility to confirm that it is in full compliance with all aspects of the Standard of Practice.

Q: ARE THERE ANY FEES ASSOCIATED WITH THE FACILITY PERMIT PROCESS?

Yes. The College's by-laws set out two different fees associated with the facility permit process. They are:

- An application fee of \$850 which must be submitted with the facility permit application form. This fee covers the cost of the provisional facility permit, the on-site inspection and the annual facility permit.
- An annual facility permit renewal fee of \$400, which is payable by October 31 of each year. This fee covers the cost of re-inspections that will be conducted on a three-year staggered cycle.

There is no separate fee for registering multiple prescribing dentists at the same facility.

CONTACT INFORMATION

If you have any questions or concerns, please contact:

Standard of Practice:

Dr. Michael Gardner
Manager, Quality Assurance
416-934-5611
1-800-565-4591
mgardner@rcdso.org

Registration / Facility Permit Application Process:

Siobhán Richards
Intake Administrative Assistant, Registration
416-961-6555, ext. 4307
1-800-565-4591
Fax: 416-922-1507
srichards@rcdso.org