

FDI POLICY STATEMENT

BASIC DENTAL EDUCATION

Revised version adopted by the General Assembly: 2026, Prague, Czech Republic.

Original version Adopted by the FDI General Assembly: 24 September 2015, Bangkok, Thailand

CONTEXT

The revision of this Policy Statement on Basic Dental Education (BDE) is proposed to reflect the evolving needs of oral health education in the 21st century. The visible global momentum to elevate oral health on the global health agenda, advances in technology—including the rapid development of artificial intelligence (AI)—changing societal expectations, the integration of evidence-based practice, and the growing importance of interprofessional collaboration all necessitate an updated approach, with the aim of preparing a more competent oral health workforce capable of addressing population needs through prevention-oriented, integrated, and evidence-based care.

SCOPE

This Policy Statement addresses the principles and objectives of Basic Dental Education (BDE), namely basic oral health education, which constitutes the foundation for safe, ethical, and competent dental practice, socially accountable and sustainable dental practice, as well as clinical and research work.

It covers:

- The educational framework preparing students for independent dental practice.
- The competencies and ethical standards expected of dental graduates.
- The responsibility of educational institutions and regulatory bodies in ensuring quality and consistency.

In this context, the Policy Statement underlines the importance of including areas that newly graduated dentists should be able to master upon entering clinical practice, as well as the fundamental competencies that all clinicians should continuously demonstrate and further develop through continuing professional education.

DEFINITIONS

Basic Dental Education (BDE) refers to the formal undergraduate or graduate education that provides future dentists with the knowledge, skills, attitudes, and values required to deliver safe, ethical, and person-centered care, and to engage in career-long professional development.

PRINCIPLES

Basic Dental Education (BDE) must be grounded in ethical, evidence-based, and patient-centered practice, in accordance with national rules and regulations. BDE should be inclusive, equitable, and adaptable to societal needs and health system priorities.

POLICY

FDI encourages national dental associations (NDAs), educational institutions and regulatory bodies to adopt and periodically review competency-based curricula aligned with international standards. This ensures that new graduates:

- possess core competencies for safe, ethical, evidence-based and effective dental practice;
- understand the importance of dental research
- understand the link between oral health, overall health, and quality of life;
- **understand the need for and importance of preventive strategies and oral health promotion initiatives at both the individual and community levels**
- are aware of specific local public health needs and how to incorporate these needs in their clinical practice;
- provide ethical, evidence-based treatment without harming patients;
- responsibly integrate scientific and clinical innovations, digital technologies, and artificial intelligence while maintaining clinical judgment and patient interaction;
- develop clinical readiness through a well-defined balance between theoretical learning and practical/clinical training;
- demonstrate digital and AI literacy and the ability to critically assess emerging technologies;
- develop critical thinking, problem-solving, and lifelong learning skills to support evidence-based and patient-centered decision-making;
- learn "data privacy and cybersecurity" as a core digital competency for graduates.

FDI encourages increased harmonization of key curricular elements across countries to promote consistency in educational outcomes and levels of competence among graduates according to the legislation in each one of the member countries:

- Dental education institutions should promote interprofessional collaboration and integrate behavioral and communication sciences throughout the curriculum.
- Faculty development, quality assurance, and assessment mechanisms should support continuous improvement and evaluate technical competence, professionalism, ethics, and communication skills.
- Assessment methods should be aligned with competency-based principles and evaluate not only knowledge and technical skills, but also clinical decision-making, communication, and professional behavior.
- Educational institutions should define transparent minimum standards for simulation based, practical, and clinical training in line with internationally accepted guidelines.
- Alignment with national legislation and accreditation frameworks is essential for consistent educational outcomes.
- Educational institutions should incorporate innovative teaching methods, simulation-enhanced training, and digital learning technologies, supported by formative and summative assessment approaches that promote continuous feedback and competency development.

KEYWORDS

Basic dental education, Competencies, Ethics, Career-long learning

DISCLAIMER

The information in this Policy Statement is based on the best scientific and educational evidence available at the time of adoption. It may be interpreted to reflect prevailing cultural sensitivities and socio-economic conditions.

REFERENCES

1. FDI World Dental Federation. (2015, revised 2018). *FDI Policy Statement on Basic Dental Education*. Available from: https://www.fdiworlddental.org/sites/default/files/2020-11/fdi_world_dental_federation_-_basic_dental_education_-_2018-06-15.pdf [Accessed 7 January 2026].
2. World Health Organization. (2023). *Global Oral Health Action Plan 2023–2030*. Available from: <https://iris.who.int/server/api/core/bitstreams/022cde3b-a0d8-440e-8b5e-7ab5a90f89e6/content> [Accessed 7 January 2026].
3. Koole, S., Van Den Brulle, S., Christiaens, V., et al. (2017). Competence profiles in undergraduate dental education: A comparison between theory and reality. *BMC Oral Health*, 17(1), 109.
4. American Dental Association. (2024). *Trends in U.S. Dental Schools 2024*. Available from: https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/research/hpi/trends_us_dental_schools_2024.pdf?rev=12c8e3fbda7e470887674a484f452d24&hash=33AB962C75F4F70BE27E4537A05DD382 [Accessed 7 January 2026].

5. American Dental Education Association (ADEA). (2024–2025). *Trends in Dental Education 2024–2025*. Available from: https://www.adea.org/docs/default-source/adea-main/publications/adea-trends/adea_trends_2024_25.pdf?sfvrsn=1384b8f6_3 [Accessed 7 January 2026].
6. Zitzmann, N. U., Matthisson, L., Ohla, H., & Joda, T. (2020). Digital undergraduate education in dentistry: A systematic review. *International Journal of Environmental Research and Public Health*, 17(9), 3269.
7. Australian Dental Council. (2021). Accreditation Standards for Dental Practitioner Programs. Available from: https://www.adc.org.au/files/accreditation/standards/ADC_DCNZ_Accreditation_Standards.pdf [Accessed 7 January 2026].
8. Annamma, L. M., Rama Varma, S., Abuttayem, H., et al. (2024). Current challenges in dental education – a scoping review. *BMC Medical Education*, 24, 1523.
9. Association for Dental Education in Europe (ADEE). (2017). *The Profile of Undergraduate Dental Education in Europe*. Available from: [Undergraduate-Dental-Education-The-European-Perspective-Consultation.pdf](https://www.adee.org/undergraduate-dental-education-the-european-perspective-consultation.pdf) [Accessed 7 January 2026].
10. Council of European Dentists (CED). (2023). Profile of the Dentist of the Future – Key Driving Forces in Dentistry. Available from: <https://www.cedentists.eu/wp-content/uploads/2023/11/CED-DOC-2023-027-FIN-E.pdf> [Accessed 7 January 2026].