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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

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3 CONTEXT

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

13 SCOPE

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

18 It covers:

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

28 **DEFINITIONS**

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

33 **PRINCIPLES**

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

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

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

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

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

85 **KEYWORDS**

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

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88 **DISCLAIMER**

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

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