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Oral Surgeons as Cosmetic Surgeons and Their Scope of Practice

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Background: In recent years, the practice of cosmetic surgery has expanded to include oral and maxillofacial surgeons. The groundwork for this scope-of-practice expansion was laid in part by the American Dental Association's definition change of the practice of dentistry. This change modified the scope of dentistry from the earlier "teeth and surrounding and supporting structures" to the maxillofacial area and beyond. A number of states adopted this new definition into legislation, giving practitioners the premise on which to perform cosmetic and other medical procedures on the face and potentially other parts of the body. This expansion has created legal and regulatory issues over scope and truth in advertising. The authors hypothesize that this is confused by a lack of federal guidelines and state-by-state variations in scope-of-practice laws for oral and maxillofacial surgeons.

Methods: This article provides a brief overview of the key legal issues and their impact on legislation in some of the battleground states. The authors review the national distribution of scope of practice for oral and maxillofacial surgeons.

Results: The most successful path to expanded scope for dentistry has been through control of certification and credentialing. This has marginalized medicine boards from contributory oversight, thus circumventing any arguments over practice parameters. The scope-of-practice dispute is further complicated by the existence of dual-degree oral and maxillofacial surgeons.

Conclusions: With increasing demand for cosmetic surgical interventions, establishing scope-of-practice standards for single-degreed oral and maxillofacial surgeons is critically important. As physicians, the oral and maxillofacial surgery graduates of the dual M.D./D.D.S. degree programs have no such scope-of-practice restrictions. Furthermore, if plastic surgery is to effectively argue against expanded scope of practice for oral and maxillofacial surgeons, more objective data will be necessary. (*Plast. Reconstr. Surg.* 143: 872e, 2019.)

s the field of health care has metamorphosed, legal issues regarding scope of practice have risen to the forefront. Driven by a range of underlying social, economic, and political forces, oral surgeons have sought to expand their scope of practice into areas that, until now, have been restricted to physicians. Oral and maxillofacial surgery is one such dental subspecialty, with single- and dual-degree practitioners—D.D.S. and M.D./D.D.S., respectively. These oral and maxillofacial surgeons have fought to legally

include surgical cosmetic procedures into their scope of practice.²

The groundwork for this push was laid in part by the American Dental Association's definition change of the practice of dentistry to "the treatment of diseases, disorders and/or conditions of the oral cavity, maxillofacial area, and or the adjacent and associated structures and their impact on the human body." The previous definition defined the practice of dentistry as the treatment of "...teeth and surrounding and

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Received for publication January 27, 2017; accepted September 10, 2018.

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DOI: 10.1097/PRS.000000000005447

Disclosure: The authors have no financial interest to declare in relation to the content of this article. This publication received no specific grant or contribution from any funding agency in the public, commercial, or not-for-profit sector.