The National Agenda for 2003 was established after review of the reports of the 2002 Fall Regional meetings and National CODE Meetings. Thank you to the Regional CODE Directors and membership for making recommendations to establish the National Agenda.

Each Region is encouraged to also have a Regional Agenda. Each school attending the Regional Meetings are to bring their responses to the National Agenda in writing.

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Continue to invite your colleagues, who are Dental Licensure Board examiners and your Military and Public Health Service colleagues who head/instruct in dental education programs, to your Regional meetings.

It is strongly suggested that each Region select next year’s meeting site, date or tentative date at the close of your Fall Regional CODE meeting. This information is published in the Annual National Agenda Final Report. Early notification may permit additional participation from other member schools in your Region.

The Regional meeting reports are to be submitted to the national Director in publishable format as an attachment to e-mail.

The required format and sequence will be:
1. CODE Regional Meeting Report Form**
2. Summary of responses to the National Agenda.
3. Individual school responses to the National Agenda
4. The Regional Agenda summary and responses.
5. CODE Regional Attendees Form**

** (Copies may be obtained from the Web site: http://netserv.unmc.edu/code/codeFrame.html).

Mail a hard copy of the report to the National Director. Both electronic and hard copy versions are to be submitted within thirty (30) days of the conclusion of the meeting.
2003 NATIONAL CODE AGENDA

(Please include a summary of the Regional Responses to the National Agenda questions, before listing individual Regional Responses).

(Please cite the evidence were applicable)

I. KaVo PREPassistant - system for measuring and evaluating preparations in dental training.

Is your school using this system?

How long has your school been using this system?

How and where is it being used (i.e. preclinic operative/ fixed/ other)?

What are the strengths and weaknesses of this system?

What are your recommendations/ summative evaluation of this system?

Are devices which provide immediate quantitative feedback the way of future preclinical education? Please explain.

II. KaVO Diagnodent/other caries detection devices:

Are you utilizing current technology based caries detection methods/systems in student clinics?

Which systems are you using and how frequently are you using them?

What are your opinions as to sensitivity/specificity?

Do you have knowledge of other technologies in development but not yet
released? Please describe/explain these systems.

III. CAD\CAM - CEREC 3:

Are you currently utilizing this system for student clinics and how frequently are you using it?

What is your evaluation as to accuracy/marginal fit?

Is the system utilized in your Graduate Program and Faculty Practice?

What is your opinion as to the overall clinical acceptability of these restorations produced from student clinics?

What are the strengths and weaknesses of this system?

IV. Educational Philosophies:

What is your educational philosophy as to learning preps first on the bench and then to a mounted dentoform or simulation system vs. going immediately to a mounted dentoform or simulation system?

What is the value of quantity and repetition requirements before evaluation for competency?

Does competency replace the need for quantitative repetition?

In addition to the restoring of ivorine teeth in the preclinic courses, how are natural teeth being utilized (if your school uses them)?

Are you utilizing simulators/DentSim for teaching operative dentistry? Describe how you are utilizing these educational aids and their effectiveness.
Have current technological simulation labs helped with earlier transition to clinic and what impact have they made on faculty numbers?

Describe how your school relates biomedical scenarios to preclinic operative dentistry?

Have community out-reach programs impacted your student’s education, either positively or negatively? Please describe.

Describe your current philosophies/protocols of caries risk/caries management/non-invasive treatment of carious lesions?

Which of these programs is the most effective?

What are the strengths and weaknesses of this system?

V. Initially CODE was known as The Consortium of Operative Dentistry Educators. The CODE advisory committee and others have responded to a suggestion that CODE again be know by this more descriptive definition. The consensus was for the change to take place effective January 1, 2004 unless the Regions advise otherwise. Do you agree with this name change? If not, please explain.

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Regional CODE Agenda
(Please report on responses from all participants).

National CODE Meeting
The meeting will be held Thursday, February 19, 2004 from 4:15 pm to 6:00 pm at the Fairmont Hotel in Chicago, Illinois. This is in conjunction with the annual meeting of the Academy of Operative Dentistry. Please submit 1 - 2 items for consideration for the ‘agenda’ of the National Meeting. Suggestions as to how to make this brief meeting productive and efficient are needed.

Suggestions for CODE.
What can the organization do to improve its effectiveness?

What is suggested to improve the Web site?
REMINDEERS:
National Directory of Operative Educators:
The CODE National Office maintains the National Directory of Operative Educators as a source for other professionals to access Regional information regarding the schools that are participating in CODE. It is imperative that the information be as current as possible. The National Director also uses this information to assist in any functions relating to CODE, its agendas and fellow members.
The current format may be downloaded from the web site. Access the CODE website and ‘click’ on forms. Locate the CODE Directory Update Form and download in Word, Word Perfect or PDF format. Complete the information requested and e-mail the form to the Webmaster.

Please have each school in your Region update the following information for the National Directory of Operative Educators:
- School name and complete mailing address
- Individual names: (full time), phone #, fax #, e-mail address of faculty who teach operative dentistry.
- (This could be individuals in a comp care program, etc. if there is no defined operative section of department.
- If any individuals do not want their phone #, fax # or e-mail shared, please indicate that on the form.)

Include this information with the Regional Report by mailing of a hard copy to the National Office of CODE.

All update information received by mail will be forwarded by the National Office to the Webmaster for inclusion on the Web site.

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