

Dental Corps

1. Description of the Dental Corps

a. The Dental Corps (DC) is a unique branch of the Army organized under the AMEDD. It is composed of Active and Reserve Component commissioned officers who are graduates of a dental school accredited by the Commission on Dental Accreditation. The Commission operates under the auspices of the American Dental Association (ADA) and is acceptable to TSG.

b. To practice dentistry, a dental officer must possess a Doctor of Dental Surgery (DDS) or Doctor of Dental Medicine (DMD) degree and a valid, current, active and unrestricted license from one of the 50 United States, a U.S. territory, or the District of Columbia. The unrestricted practice of dentistry requires individual privileging in accordance with AR 40–68. The DC comprises positions filled by officers in whom the knowledge and skills required and the services performed are associated with ensuring that each Soldier is in optimal oral health and prepared to deploy without becoming a non–combat, dental casualty. A secondary mission is to provide dental healthcare to eligible beneficiaries of the military community in accordance with Public Law and AR 40–3. During wartime, the mission of the DC is to conserve the fighting strength by the preservation and restoration of oral health and function, providing emergency and essential dental care, and by assisting in the emergency medical management of combat casualties. During both peacetime and wartime, the DC has the mission to support casualty identification through dental forensic identification operations. The principle functions performed by DC officers are: clinical dentistry, teaching, research, and command and staff. Teaching is identified as a separate function although it is a pervasive element of the profession of dentistry and is implied in each of the functional areas. There are a total of 10 dental AOCs. All newly appointed DC officers who have not had postdoctoral residency training are designated as General Dental Officers (63A). Once residency specialty training has been completed, the General Dental officer will acquire an advanced specialty designation in Comprehensive Dentistry (63B), Periodontics (63D), Endodontics (63E), Prosthodontics (63F), Public Health Dentistry (63H), Pediatric Dentistry (63K), Orthodontics (63M), Oral and Maxillofacial Surgery (63N), or Oral and Maxillofacial Pathology (63P). Each AOC has a consultant that advises the Corps Chief and TSG on issues that affect their area.

c. The operational element which implements DC policies concerning the career development of the Regular Army DC officers is the DC Branch at HRC, which coordinates military and civilian schooling, assignments, skill classification, career management assistance, and other personnel management actions. A primary objective of this branch is to assist each officer to attain career goals by providing appropriate assignments and ensuring objective consideration for educational opportunities. Reserve Component DC policies concerning career development are coordinated through the AMEDD Branch at HRC.

2. Officer characteristics required

DC officers must be leaders skilled in tactics, techniques, and procedures in order to understand and support the Warfighter; possess strong Army Values, leader attributes and skills and fully understand the key leadership actions that must be taken to ensure success. The linear battlefields of the past have disappeared and DC officers of the future must be prepared to face the tactical challenges of the non–linear battlefields of today and the future. Additionally, there are unique skills, knowledge, and attributes in each specialty area that require professional development.

d. *Competencies and actions common to all.* The DC offers a broad spectrum of opportunities. Every officer learns and trains to be a fully capable DC officer, gaining expertise and experience in diverse specialties and skills. Although there are many AOCs within the DC, there are common skill sets that every officer should develop and maintain: leadership, technical, and tactical.

e. *Unique officer skills.* As previously stated, the DC consists of 10 distinct AOCs. The DC officer typically starts out as a 63 A- General Dentist and seeks residency training for one of the nine dental specialty AOCs by their third year of service. DC officers provide direct patient care, serve as staff officers and perform as clinic and unit commanders. Command opportunities are available at the MAJ, LTC, and COL levels (detailed descriptions of each AOC are outlined in para. 4).

f. *Decision making skills.* DC officers often work in an environment where time available for problem analysis is constrained. DC officers need the ability to operate under stress and apply critical thinking skills while making decisions.

g. *Tactical, technical, and operational skills.* DC officers must be technically proficient with dental specific and mission unique equipment, tools, and systems. DC mission success requires proper balance between technical and tactical skills. These skills must be gained and developed through continuous professional study, self-development and operational assignments. DC officers must survive on a non-linear, non-contiguous battlefield and negotiate asymmetric threats to accomplish their missions.

h. *Unique knowledge.*

(1) Officers must possess expert knowledge in dental service management, combined arms and general support, and coordination principles. This knowledge includes practical experience in tactics, combined arms operations, and deployment operations.

(2) Officers gain this knowledge through a logical sequence of continuous education, training and experience sustained by mentoring.

(3) Individual officers sustain knowledge through institutional training and education, duty in operational assignments, continuous self-development, and progressive levels of assignments within their AOC and the DC.

(4) Officers must gain knowledge of other services' procedures and constraints while serving in company and field grade assignments.

i. *Unique attributes.*

(1) *Personal attributes.* DC officers uphold Army traditions and maintain the highest standards of personal and professional integrity. They must live the Army Values and enforce high standards of technical competence, training, physical fitness and discipline, embody the warrior ethos and are well-versed in medical support doctrine. However, they are also adaptable to changing environments and can apply non-textbook solutions in unique situations. Officers must recognize the importance of physical and mental fitness since high levels of stamina and vigor are critical to sustained endurance.

(2) *Multifunctional attributes.* DC officers must develop and use a diverse set of skills as they move between AOC specific assignments in force structure and force generating positions.

3. Dental Corps officer professional development

Professional development includes both clinical and military milestones. These milestones are depicted through assignment opportunities that can be expected during each phase of professional development and illustrate a progression of military education and professional training opportunities. Each phase has certain broad objectives and is flexible since the actual course of an officer's professional development and utilization will be influenced by Army requirements, the officer's own capabilities, and demonstrated performance. Gains in individual officer executive skills open many career paths.

a. Professional development phases.

(1) Company grade.

(a) *Institutional Domain.* Newly commissioned officers attend BOLC. A number of officers attend the Advanced Education in General Dentistry 12-Month (AEGD 12-Month) Program. All officers are encouraged to attend the Combat Casualty Care Course (C4) and Tactical Combat Medical Care Course. In addition, DC officers should strive to complete the Medical Management of Chemical Casualties Course (M2C3) and the required Chemical, Biological, Radiological/Nuclear, and Explosive Incidents Course (CBRNE). DC officers should attend the AMEDD CCC between the third and sixth year of service.

(b) *Operational Domain.* Officers will be assigned to a traditional table of organization and equipment (TOE) line unit or table of distribution and allowances (TDA) unit in training, garrison, and other strategic-level organizations. Some officers receive additional training at Airborne or Air Assault School if assigned to that type unit or if training opportunities are available. A few officers will have the opportunity to become the Officer in Charge of a small clinic. Assignments will be based on manning guidance and professional development requirements.

(c) *Self-development.* A DC officer who has a sound educational background may apply for a specialty training program in his or her desired AOC. These programs are highly competitive and selection is based on academic performance and potential for promotion. Airborne or Air Assault training

may be attended depending on current/projected assignments and available training opportunities. It is highly encouraged that officers compete for and obtain the Expert Field Medical Badge (EFMB).

(2) Field grade.

(a) *Institutional Domain*. Continued professional development with residency training following completion of the CCC is encouraged. ILE should be completed by this phase. ILE is designed to establish a common Army operational war fighting culture to prepare field grade officers for service in division, corps, echelons above corps, and Joint staffs. ILE is a very important educational milestone in the development of DC officers. Completion of ILE is not required for advancement to the rank of COL, but it is highly encouraged and will make the officer more competitive for promotion and for leadership positions. Completion of ILE is required for SSC consideration and attendance. The purpose of these courses is to prepare officers for higher level command and staff duties. Education during this phase contributes to the development of senior managerial skills and techniques and continued military professional development. The objective of the senior phase is maximum utilization of the officer's acquired professional and military abilities to include clinical expertise, managerial skills, and executive talents in positions of great responsibility.

(b) *Operational Domain*. Assignment opportunities will be in conjunction with the officer's respective AOC as described in paragraph 4. Assignments will be made to progressively more responsible and challenging positions and will require application of the officer's managerial expertise, leadership abilities, overall understanding of military and, more specifically, DC operations.

(c) *Broadening assignments*. Once an officer has demonstrated mastery of common core and branch skills, as well as knowledge and attributes that assure the strong professional development foundation essential for success in the senior field grades, they will have the opportunity to serve in career broadening jobs with the DC and across the AMEDD.

(d) *Self-development*. Upon completion of residency training, the DC officer should seek specialty board certification. An officer must also remain current in professional skills through clinical practice and Continuing Dental Education (CDE). Once the ranks of senior LTC and COL have been reached, the officer is encouraged to accomplish the career milestones to make themselves eligible for The Surgeon General's "A" Proficiency Designator, compete for command and key staff opportunities, and/or compete for fellowship training in his/her specialty.

b. Area of concentration designation process.

(1) *Proficiency designators*. Proficiency designators may be designated in conjunction with the AOC which indicates the officer's degree of proficiency in that particular AOC.

(2) Medical related skills.

(a) *Medical proficiency 9A*. Determination by TSG and referred to as TSG's "A" designator.

(b) *Medical proficiency 9B*. Certification by an ADA recognized dental specialty examining board or the American Board of General Dentistry and TSG.

(c) *Medical proficiency 9C*. Completion of an approved residency and/or academic program which meets the eligibility requirements of a specialty board approved by the ADA or the American Board of General Dentistry and TSG.

(d) *Medical proficiency 9D*. Completion of a formal training program accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA of at least 12 months duration to augment proficiency in AOC 63A.

(e) *Medical proficiency 9E*. Designates dental officers in residency training programs.

(f) *Medical proficiency 9F*. Completion of the Advanced Clinical Readiness Program (ACP). This is an additional, informal, advanced dental clinical training program established by the Army Dental Corps. Program is at least 12 months duration for 9D trained 63A DC officers. Must hold the medical proficiency of 9D in order to obtain this additional training.

4. Dental Corps areas of concentration

a. AOC 63A—General Dentist.

(1) *Description of duties*. Examines, diagnoses, and treats diseases, injuries, and defects of teeth, jaws, oral cavity, and supporting structures.

(2) *Description of positions.* Duty positions include General Dental Officer, MTOE Officer, Unit Dental Surgeon, and Clinic Chief.

(3) *Qualifications.* Must be able to perform duties described above and be a graduate of a dental school acceptable to TSG. Advanced Education Program in General Dentistry 12-Month Program or AEGD 12-Month Program will earn a "D" proficiency designator.

b. AOC 63B—Comprehensive Dentist.

(1) *Description of duties.* Provides comprehensive oral healthcare to include the teaching of diagnostic/management skills; develops and executes treatment plans involving multiple dental specialties.

(2) *Description of positions.* Duty positions include Comprehensive Dental Officer; Chief, General Dentistry Team; Program Director; Assistant Program Director; Training Officer, Advanced Education Program in General Dentistry; Instructor, Army Medical Center of Excellence; Comprehensive Dentistry Consultant; OTSG; Unit Dental Surgeon; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete an Advanced Education Program in General Dentistry (AEGD) 2-year program (Comprehensive Dentistry) of at least 2 consecutive years duration that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

c. AOC 63D—Periodontist.

(1) *Description of duties.* Examines, diagnoses, and treats or prescribes treatment for the supporting and surrounding tissues of the teeth or their substitutes and performs implantation or transplantation of teeth or their replacement analogues.

(2) *Description of positions.* Duty positions include: Periodontist; Program Director; Assistant Program Director; Senior Training Officer, Junior Training Officer, Advanced Specialty Education Program in Periodontics; Periodontics Consultant; OTSG; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Periodontics, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

d. AOC 63E—Endodontist.

(1) *Description of duties.* Concerned with the etiology, diagnosis, prevention and treatment of diseases and injuries of the pulp and associated periradicular conditions.

(2) *Description of positions.* Duty positions include: Endodontist; Program Director; Assistant Program Director; Senior Training Officer, Junior Training Officer, Advanced Specialty Education Program in Endodontics; Endodontic Consultant; OTSG; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Endodontics, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

e. AOC 63F—Prosthodontist.

(1) *Description of duties.* Examines, diagnoses, and treats or prescribes treatment for personnel who require management of complex occlusal problems or replacement of missing teeth and associated structures through the fabrication and placement of fixed, removable, or semi-fixed maxillofacial prostheses.

(2) *Description of positions.* Duty positions include: Prosthodontist; Maxillofacial Prosthodontist; Program Director; Assistant Program Director; Training Officer, Advanced Specialty Education Program in Prosthodontics; Director, Army Dental Laboratory; Instructor, Army Medical Center of Excellence; Prosthodontic Consultant; OTSG; Chief, Dental Laboratory Branch; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Prosthodontics, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

f. AOC 63H—Public Health Dentist.

(1) *Description of duties.* Conducts research, studies, and analyses of epidemiologic issues and dental care delivery systems. Makes recommendations on environmental/installation policies, public health programs, dental workforce composition, and processes of the dental health delivery system using broad knowledge and skills in public health administration, the prevention and control of oral diseases, and the delivery and financing of oral health care.

(2) *Description of positions.* Unique duty positions include: Dental Public Health Staff Officer; Dental Public Health Research Officer; Major Medical Command (MEDCOM) Public Health Dentist; Dental Public Health Consultant, OTSG; Tri Service Center for Oral Health Studies (TSCOHS); U.S. Army Public Health Center (PHC); OTSG G3/5/7 Dental Directorate Dental Public Health Staff Officer; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Dental Public Health, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

g. AOC 63K–Pediatric Dentist.

(1) *Description of duties.* An aged-defined specialty that provides both primary and comprehensive preventive and therapeutic oral healthcare for infants and children through adolescence and special needs patients of any age who demonstrate a medically or developmentally compromised condition.

(2) *Description of positions.* Duty positions include: Pediatric Dentist; Senior Training Officer, Junior Training Officer, Advanced Specialty Education Program in Pediatric Dentistry; Pediatric Dental Consultant; OTSG; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Pediatric Dentistry, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

h. AOC 63M–Orthodontist.

(1) *Description of duties.* Examines, diagnoses, treats, or prescribes treatment of the growing and mature dentofacial structures to include movement of teeth; treats malrelationships and malformations of the craniofacial complex; in conjunction with oral and maxillofacial surgery, attains and maintains physiological health of the patient.

(2) *Description of positions.* Duty positions include: Orthodontist; Program Director; Assistant Program Director; Senior Training Officer, Junior Training Officer, Advanced Specialty Education Program in Orthodontics; Orthodontic Consultant; OTSG; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Orthodontics, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

i. AOC 63N–Oral and Maxillofacial Surgeon.

(1) *Description of duties.* Examines, diagnoses, and provides surgical, non-surgical and adjunctive care for conditions involving disease, defect, or injury to the functional and/or esthetic aspects of the hard and soft tissues of the head, mouth, teeth, gums, jaws and neck.

(2) *Description of positions.* Duty positions include: Oral and Maxillofacial Surgeon; Training Officer, Program Director, Assistant Program Director, Advanced Specialty Education Program in Oral and Maxillofacial Surgery; Chief, Surgery Branch, Dental Research Unit; Oral and Maxillofacial Surgery Consultant; OTSG; Chief, Department of Dentistry; Clinic Chief; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Oral and Maxillofacial Surgery, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

j. AOC 63P–Oral and Maxillofacial Pathologist.

(1) *Description of duties.* Includes examination, diagnosis, research, and management of diseases affecting the oral and maxillofacial regions.

(2) *Description of positions.* Duty positions include: Oral and Maxillofacial Pathologist; Program Director, Advanced Education Program in Oral and Maxillofacial Pathology, Assistant Program Director; Advanced Education Program in Oral and Maxillofacial Pathology; Chairman, Department of Oral and Maxillofacial Pathology; Joint Pathology Center (JPC); Oral and Maxillofacial Pathology Consultant,

OTSG; Chief Forensic Odontology, Joint POW-MIA Accounting Agency (J P AA) ; Researcher, U.S. Army Dental and Trauma Research Detachment.

(3) *Qualifications.* Must complete Advanced Specialty Education Program in Oral and Maxillofacial Pathology, that is accredited by the Commission on Dental Accreditation, which operates under the auspices of the ADA and acceptable to TSG.

5. Branch immaterial positions

a. *Description of duties.* Executive Dentist (AOC 63R) is a duty position only and is considered AOC immaterial (IM). A dental officer in the rank of MAJ to COL assigned to this AOC functions in a variety of positions to include command and staff positions throughout the Army Dental Care System.

b. *Description of positions.* Duty positions include: Dental Health Activity (DENTAC) Commander; TOE Dental Unit Commander; Branch Chief, Dental Research Unit; Dental Staff Officer; OTSG; Army Medical Center of Excellence (Chief, Department of Dental Sciences); Capability Developer, Capability Development Integration Directorate (CDID); Personnel Proponent Officer, AMEDD Personnel Proponent Directorate (APPD); Chief, Graduate Dental Education; Dental Surgeon, ACOM; USARC Dental Surgeon; FORSCOM Dental Surgeon; JFHQ; Regional Dental Health Command Commander; Dental Directorate Staff Officer; HRC Branch Chief; Career Development Officer, HRC; Corps Specific Branch Proponent Officer (CSBPO); Forensic Dentist; U.S. Army DC Chief.

c. *Qualifications.* The officer must have been awarded a primary AOC as described in paragraph 4. The individual must maintain clinical proficiency in his/her specialty, should be a graduate of the AMEDD CCC, ILE (or equivalent), and have demonstrated success in previous leadership positions of increasing responsibility.

6. Reserve Component officers

RC officer development objectives and qualifications parallel those planned for their Regular Army counterparts. RC dental specialists are not trained in-house, but are acquired as trained specialists. Accession grade into the RC is determined IAW AR 135-101 and DoDI 6000.13. All RC dental officers should strive for institutional training, operational assignments and self-development that yield the same officer developmental opportunities as their Regular Army counterparts.

a. *Company grade.* This phase begins with appointment as a dental officer in the RC. Officers should attend BOLC or request a waiver for equivalent trained status through their chain of command. Officers begin to develop leadership/management styles, participate in problem solving and decision making, but, most importantly, learn to establish goals and manage time. Knowledge of common task training along with knowledge of TOE/TDA medical/dental systems is imperative for success. Officers are encouraged to serve as trainers for their subordinates/peers. Participation in a TPU, State Medical Detachment or IMA DC position is highly recommended. Officers should develop a knowledge base of mission and mobilization responsibilities.

b. *Field grade.* DC officers at the field grade level should seek to assume increasing levels of responsibility within the dental care system and military education. Effective leadership/management skills must be demonstrated. Officers should seek positions of higher responsibility either within a unit or within the IMA program to be successful in this phase. During this phase, every opportunity for advanced military and/or professional education should be pursued in accordance with career interests. Officers should be mentors for subordinates, displaying mission commitment and leading by example. The officer should review his/her overall career to include leadership, management abilities, decisiveness, and sound judgment. The officer must maintain clinical and military proficiency. He/she must develop a philosophy of organization/command with increased knowledge of mobilization readiness.

c. *Application.* A USAR dentist wishing to apply for the 63B AOC must submit a detailed application packet along with proof they have met the 63B AOC requirements.

(1) Minimum of seven years clinical experience in general dentistry and must meet one of the two criteria:

(a) Board certification by the American Board of General Dentistry.

(b) Mastership in the Academy of General Dentistry (AGD).

(2) Minimum of seven years of clinical practice and two of the following three criteria:

(a) Completion of an Advanced Education in General Dentistry 12-Month Program.

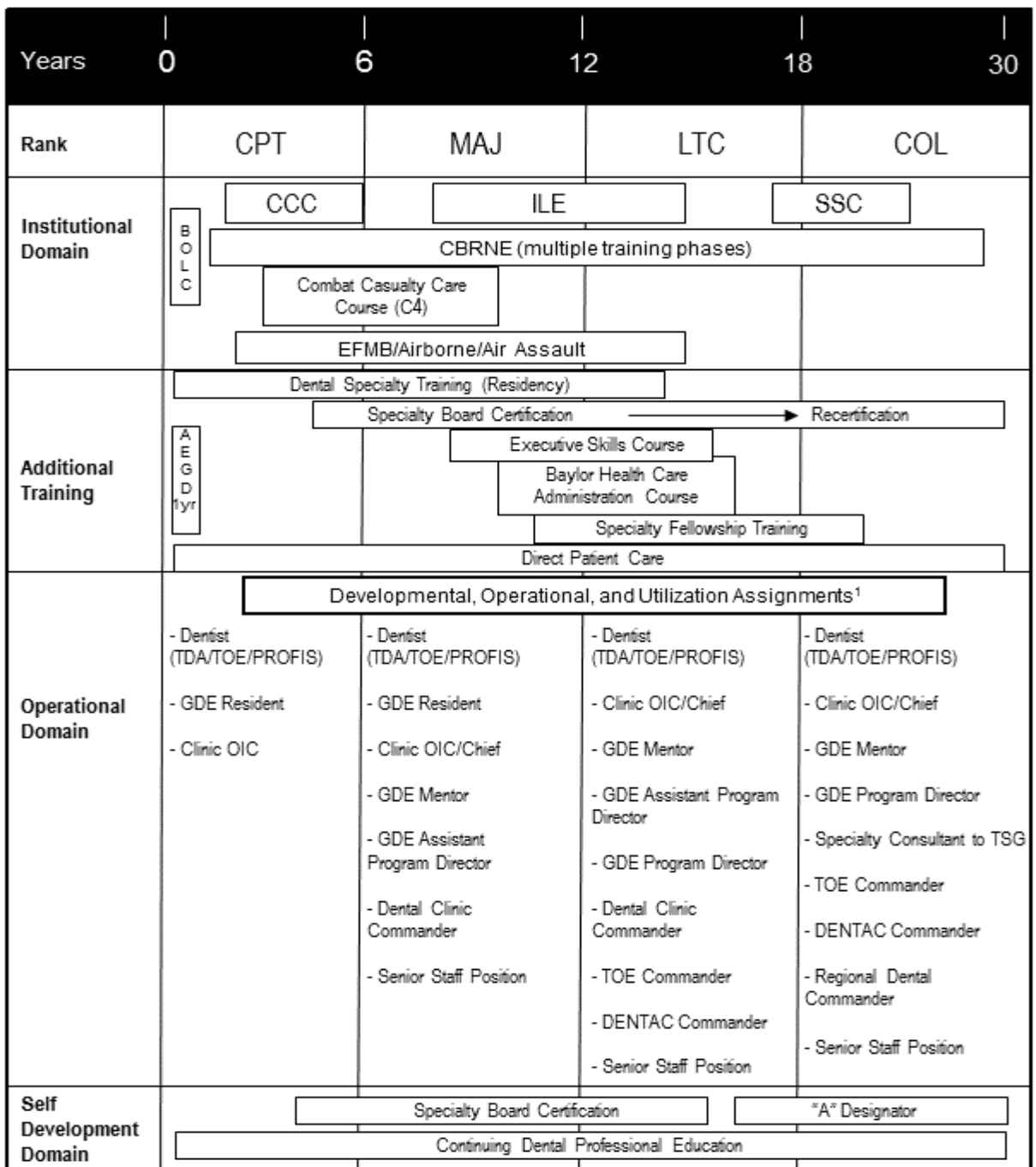
(b) Two years of ongoing teaching experience in a general dentistry educational program.

(c) Fellowship in the AGD. The application is forwarded to HRC. A board then meets to determine if the candidate meets the 63B AOC criteria. If the 63B AOC is awarded, HRC personnel are authorized to change the AOC, not the Army Reserve Clinical Credentialing Affairs (ARCCA) since they have no authority in determining an individual's AOC.

7. Dental Corps life cycle models

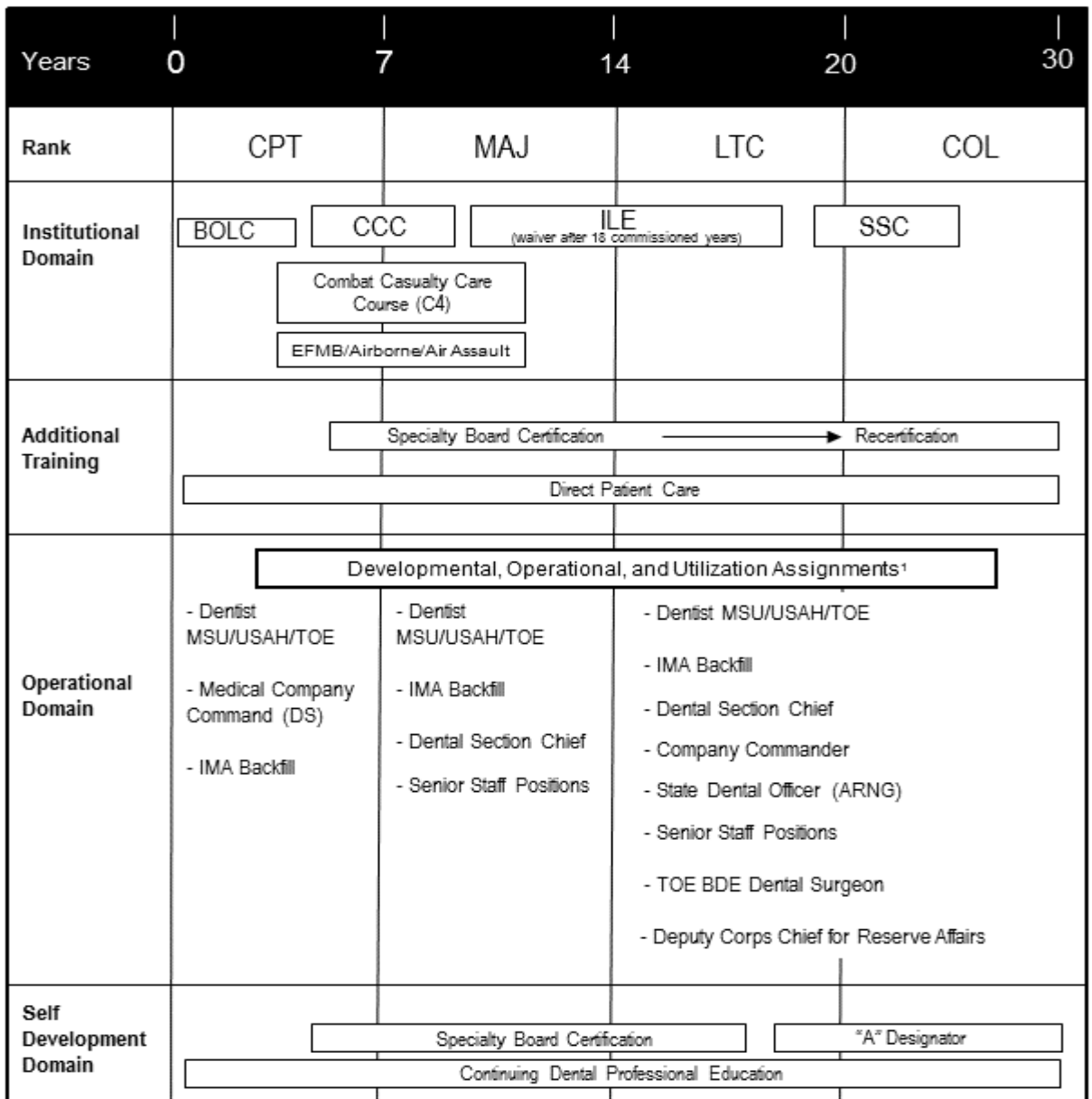
The life cycle model serves as a general framework for each individual officer's career plan. The model is not prescriptive, but serves to inform officers as to typical DC officer career milestones. The life cycle models do not include the entirety of available education, training and position opportunities that vary from year to year. For a more detailed look at each AC AOC's career milestones and successive assignments, refer to the Army Career Tracker (ACT). The numbers of service years on the life cycle model are provided as an approximation for due-course officers. Due-course officers, as defined by DA Pam 600-4 are those officers possessing the minimum entry level for a particular AMEDD Corps. Non-due-course officers are those officers possessing additional entry grade credit beyond the minimum entry level for a particular AMEDD Corps. Non-due course and RC officers should use rank to help guide their career progression

See figures 1 and 2.



¹Most assignments integrate several areas listed under the various development categories. These assignments are not intended to indicate specific tracks that dental officers should follow in career progression; rather, officers should seek a variety of challenging assignments commensurate with rank and experience.

Figure 1. Dental Corps Regular Army life cycle development and utilization



¹Computation of grade and time in grade varies by individual, based on entry grade credit calculations (the sum of any prior commissioned service credit and constructive credit) at time of appointment.

Figure 2. Dental Corps Reserve Component life cycle development and utilization