Position Classification Standard for Dental Officer Series, GS-0680

Table of Contents

SERIES DEFINITION .................................................................................................................................... 2
BACKGROUND ............................................................................................................................................ 2
TITLES .......................................................................................................................................................... 3
GRADE-LEVEL EVALUATION CRITERIA .................................................................................................. 3
NOTES ON THE USE OF THE STANDARDS ............................................................................................. 4
GRADE-LEVEL GUIDELINES ..................................................................................................................... 6
  DENTAL OFFICER, GS-0680-11 ............................................................................................................. 6
  DENTAL OFFICER, GS-0680-12 ............................................................................................................. 7
  DENTAL OFFICER (APPROPRIATE SPECIALIST TITLE), GS-0680-13 .............................................. 8
  DENTAL OFFICER (APPROPRIATE SPECIALIST TITLE), GS-0680-14 .............................................. 9
SERIES DEFINITION

This series includes positions which involve advising on, administering, supervising, or performing professional and scientific work in the field of dentistry. Dentistry is concerned with the prevention, diagnosis and treatment of diseases, injuries and deformities of the teeth, the jaws, organs of the mouth, and other structures and connective tissues associated with the oral cavity and the masticatory system. The work of this series requires the degree of Doctor of Dental Surgery or Doctor of Dental Medicine.

This standard supersedes the standard for this series which was originally issued in May 1947 under the code P-510. Also superseded is the fly sheet issued in April 1964.

BACKGROUND

Significant developments in the profession of dentistry have occurred in the past two or three decades. Dentistry's role as a health service has expanded. Currently, dentistry "is concerned with the comprehensive management of oral, facial and speech defects and with the oral structures and tissues as they relate to the total health of the individual."¹ Preventive dentistry is increasingly emphasized, and the relationship of dentistry to emotional stability and social adjustment as a part of total health is widely recognized. Advances in scientific knowledge and technology applicable to dentistry and improvements in dental techniques contributed greatly to these developments. Dental specialties, similar in concept to the specialties in medicine, have emerged. Since 1947 eight dental specialties were approved by the American Dental Association for recognition through the Board certification process:

- Dental Public Health
- Endodontics
- Oral Surgery
- Oral Pathology
- Orthodontics
- Pedodontics
- Periodontics
- Prosthodontics

This division of dentistry into special areas of practice is based to a great extent on different biological, psychological, and physiological approaches to diagnoses or treatment, involving

knowledge and skills beyond-those which are normally used in general practice. Board certification as a diplomate (expert) in a special area of practice requires an advanced training program of 5 years or more.

It is estimated that In 1963 roughly 1 out of every 16 active dentists in the United States was a qualified specialist in one of the recognized areas of practice. This ratio is expected to increase significantly.

The same developments in dentistry which led to the establishment of the dental specialties have had an impact on the general practice of dentistry also. The competent general practitioner today must have a greater knowledge and understanding of the form, function, and growth of tissues in the oral region; disease processes in the oral area; oral manifestations of systemic disease; effects of systemic disease on oral disease; and drugs, their actions and side effects, and how to use them. Moreover, he must continually increase his knowledge in these areas.

**TITLES**

_Dental Officer_ is the authorized basic title for all nonsupervisory positions not requiring the amount and kind of advanced professional experience and training needed for specialization.

The only other approved titles for nonsupervisory positions are titles with a parenthetical modifier identifying a specialty officially recognized by the American Dental Association. For example:

Dental Officer (Oral Surgery)
Dental Officer (Pedodontics)
Dental Officer (Public Health)

Dental officer positions which include supervisory responsibilities (over other dental officers) of such significance as to require supervisory qualifications will be identified by the addition of the prefix "Supervisory" to the title.

**GRADE-LEVEL EVALUATION CRITERIA**

This standard provides grade-level guides for dental officer clinical positions at the GS-11, 12, 13 and 14 levels. These guides use three factors in setting forth the characteristics of each of the grade levels. The factors are identified and briefly discussed in the following paragraphs.

---

2 The Statement of Policy on Special Areas of Dental Practice, Certifying Boards, Diplomates and Specialists in Dentistry by the American Dental Association (1959) discusses the basis for the division of dentistry into special area.
Assignment characteristics

This factor takes into consideration the scope of the professional duties performed and aspects which affect the inherent difficulty of those duties. There is a great range in the difficulty of professional tasks, i.e., in the problems encountered in diagnosing and treating successfully the many different dental health conditions. The difficulty may be reflected in and/or affected by the type and extent of the disease, injury or abnormality; the behavior of patients dealt with; and the general health of such patients. There is a distinct correlation between difficulty of cases handled and the amount of experience and training required; therefore, this factor and the third factor are closely related.

Guidance and assistance required

This factor measures the extent to which the dental officer needs to seek or receive help from others in completing professional dental work on the patients he treats. It has its principal significance where cases of greater-than-usual difficulty are involved.

Qualifications required

This factor considers the extent of professional experience and training in dentistry and the knowledge and skills needed to carry out the assigned professional dental duties.

NOTES ON THE USE OF THE STANDARDS

1. Trainee positions as such are not covered by this standard. Each level discussed in the standard requires a dentist fully trained for professional practice. Each level requires the dentist to perform independently the predominant portion of the professional work involved.

2. This standard is not intended for use in the evaluation of positions engaged in basic and applied research. The Research Grade Evaluation Guide should be used to evaluate research positions requiring professional education in dentistry.

3. This standard provides guidelines only for dental officer positions in a clinical setting. It is not geared for the direct evaluation of dental officer positions requiring advanced professional training in the specialized area of dental public health. (There are very few such positions covered by the Commission's classification standards.) However, the guidelines for the specialist level positions (GS-13 and GS-14) and other portions of this standard will be helpful in assessing such positions.

4. Positions In which supervisory responsibilities are an important factor are evaluated by reference to the General Schedule Supervisory Guide. Positions with both specialist duties and full supervisory responsibilities, should be evaluated by reference to both this standard and Supervisory Guide.
5. Grade level GS-14 is the highest level to which nonsupervisory clinical positions are classified under this standard. This does not preclude evaluating supervisory or managerial or non-clinical dental officers to higher levels than GS-14 when such evaluation can be supported by reference to other Commission standards and guides and sound classification principles.

6. Patient-behavior and communication problems have significance at some levels. Such problems are distinguished from the "patient-management" problems discussed in the next paragraph. Behavior and communication problems are those which impede diagnosis and treatment because of the patient's inability or reluctance to cooperate. When, for example, a patient cannot follow directions, assume a suitable position, provide simple useful information, remain still for more than a few seconds, etc., greater than usual dental skills and interpersonal relationship skills are demanded.

7. "Patient-management" is an important descriptive term used a number of times in the standards. It denotes a more serious problem than a patient-behavior and communication problem because of the real or potential dangers involved. It refers to cases requiring special care and treatment, special understanding, and special knowledge about unusual problems. Conditions in a patient which may bring about a patient-management problem include:

- unusual sensitivity-to drugs;
- high susceptibility to infection;
- low threshold to emotional and physical stress;
- the presence of some type of serious systemic disease;
- an extensive injury in the oral region;
- unusual self-control problems;
- a substantially greater mortality risk than that existing for the average dental patient; and
- involvement of tissue that does not repair readily.

8. There is not a sharp line of demarcation between cases which are handled by the general dental practitioner and the specialist. By virtue of talents, interests, experience and education not fitting an established format, a particular general practitioner may acquire considerable competence in dealing with some especially difficult cases, including those normally referred to a specialist. Because of this, it is essential to evaluate a dental officer position on the basis of its total requirements and characteristics, and not by reference to just some of the cases involved.

9. For clinical positions, specialization (if any) is determined by the character of the total practice of the dental officer. Whether it is a specialist position depends not only upon the category of cases dealt with (e.g., pedodontic, prosthodontic, periodontic), but also upon the difficulty of cases, the level of knowledge and understanding required, the degree of diagnostic skills required, and other elements describing total practice.
10. This standard requires coordination and makes possible a meaningful integration of the qualifications review and the classification review. The standard encourages the direct involvement of dental program officials in the integrated review.

GRADE-LEVEL GUIDELINES

(Clinical Positions Only)

DENTAL OFFICER, GS-0680-11

Assignment characteristics

The GS-11 dental officer serves as a practicing dentist who performs a full range of professional dental duties in connection with the treatment of commonly encountered dental diseases or dental health problems requiring standard corrective, restorative, or preventive measures.

Professional dental work at this level includes such duties as:

- making oral and radiographic examinations of the oral cavity, and a diagnosis of pathological or irregular conditions;
- performing restoration of simple and compound cavities with standard and prescribed material (cement, amalgam, silicate, etc.);
- administering local anesthesia;
- performing single and relatively uncomplicated multiple extractions of teeth;
- practicing prosthetic dentistry by studying patient's mouth to determine type of restoration required; taking mouth impressions and bite registrations for crowns, jackets, dentures and bridges; trying temporary setups in patient's mouth, and fitting and inserting the finished appliances;
- performing uncomplicated pulp canal therapy;
- scaling of calculus, and curettage;
- treating mouth and gum infections; and
- recognizing symptoms of an assortment of systemic diseases and referring cases for medical diagnosis.

GS-11 dental officers may occasionally perform difficult oral surgery such as extraction of an impacted tooth where there is a complicating aspect, a difficult alveolectomy in connection with fitting of denture or other appliance, or other difficult dental procedures.
Guidance and assistance received

The GS-11 dental officer works under the general direction of supervisory dental officer or a supervisory medical officer. He/she independently examines, diagnoses, and treats the commonly encountered dental diseases or dental health problems. Occasionally, he/she independently treats patients having dental health problems of greater than usual difficulty. In the bulk of cases of unusual dental health problems encountered, he either consults with another dental health officer or refers the case for treatment by others. A dental officer at this level (as well as at every level) consults with a physician when there is a medical as well as dental problem involved. His/her work is reviewed in terms of the overall efficiency and adequacy of the dental services he/she renders.

Qualifications required

As a minimum, the work requires the level of knowledge, skill and ability represented by graduation from an accredited school of dentistry and licensure to practice as a dentist in a State, territory or commonwealth of the United States or in the District of Columbia.

DENTAL OFFICER, GS-0680-12

Assignment characteristics

The GS-12 dental officer is a general dental practitioner who performs the full range of professional dental tasks described for the GS-11 level. His/her work, however, differs from the GS-11 dental officer in two important ways:

1. He/she regularly encounters, diagnoses, and administers treatment for dental diseases and dental health problems of greater-than-usual difficulty; and

2. He/she regularly deals with dental health cases presenting patient-behavior and communication problems.

His/her duties typically include performing several of the following kinds of professional work, or comparable dental work:

- removing unerupted and impacted teeth, residual root tips, and teeth with exostosed roots;
- removing localized foreign bodies from the gingival tissues and alveolar sockets;
- performing prosthetic work involving complicating conditions such as:
  - Lack of bone support for dentures;
  - jaws which are irregularly formed;
substantial changes in oral formation because of long years without teeth; and 
surgery on the bone and tissue in the supporting structure for the teeth.

- applying corrective treatment in cases of abnormal formation where proper occlusion is
difficult to attain;
- performing root canal therapy on the anterior teeth of both children and adults;
- treating cases of rampant caries in children;
- treating acute cases of cellulitis associated with dental pathology;
- treating diseases of salivary glands and their ducts; and
- performing muco-gingival surgery.

Many of the patients present actual or potential behavioral problems which require skills in
patient handling on the part of the dental officer. Behavioral problems may occur because the
patients are very young (e.g., pre-school or early school age), aged, under psychiatric care, or
they are socially maladjusted inmates of a prison.

Guidance and assistance received

The GS-12 dental officer independently performs professional dental work in many cases where
the dental health problems are of greater-than-usual difficulty. However, because of the range
and severity of the diseases and abnormalities that he encounters, he consults with, and/or refers
cases to, other dental officers (especially those with extensive experience in specialized areas of
dentistry) in a number of situations.

Qualifications required

The work demands advanced professional knowledge and experience in diagnosis and treatment
of cases presenting out-of-the-ordinary dental health problems. It also requires skills in the
handling of patients with behavioral problems. Normally, two or more years of professional
dental experience and training are required.

DENTAL OFFICER (APPROPRIATE SPECIALIST TITLE), GS-0680-13

Assignment characteristics; guidance received

The GS-13 dental officer performs professional dental work in one specialized area of dentistry
(e.g., oral surgery or prosthetics) for a preponderant portion (i.e., more than half) of his time. He
diagnoses and treats in very difficult cases with very little or no guidance or consultation. He
occasionally consults with an expert (e.g., a Board-certified oral surgeon or prosthodontist), and
only in exceptionally difficult cases. His duties include the types of professional dental work
appropriate to his specialty shown in the GS-12 level guides and may include some of the types of cases described for the GS-14 level below. His work includes cases in which there are both patient-behavior and patient-management problems.

*Qualifications required*

The work of the GS-13 dental officer demands extensive, advanced professional knowledge and a high order of diagnostic and dental skills in a specialized area of dental practice. It requires a thorough understanding of the relationships and applications of the basic sciences\(^3\) underlying dentistry to the dental health problems associated with his specialty. It requires skills in handling patients with special behavioral problems and in dealing with patient-management problems. Ordinarily, several years of experience and training in a specialized area are required.

**DENTAL OFFICER (APPROPRIATE SPECIALIST TITLE), GS-0680-14**

*Assignment characteristics*

The GS-14 dental officer is a recognized expert in a professional dental specialty. He performs diagnoses and treatments for the full range of cases and problems encountered in his specialty, including the most difficult. He serves as a consultant to other dental officers on difficult or unusual cases in the area of his specialty.

Dental officers deal with the types of cases illustrated in the following for each of three dental specialties:

**Oral surgery:**

- removal of an impaction in the maxillary sinuses;
- cleft palate surgery\(^4\);
- cleft lip surgery\(^4\);
- open reduction of jaw or cheekbone fracture;
- surgery done in connection with reconstruction of jaw and face;
- surgery where there is severe laceration of face, lips, or bones of face;
- removal of stones from salivary glands and ducts;
- removal of cancerous tissue or other destructive growth lying wholly within the oral region;
- any type of oral surgery involving a great patient-management problem.

\(^3\) These sciences include anatomy, physiology, biochemistry, embryology; microbiology, pharmacology, and pathology.

\(^4\) Oral clefts often involves a team approach in which professional personnel from several disciplines participate.
Prosthetics:

- design, construction, and fitting of a prosthetic device for an inoperable cleft palate;
- development of prosthetic devices to correct a severe congenital deformity in the oral region;
- prosthetic work involving bony implants;
- development of a prosthetic device to correct a special malocclusion problem;
- any prosthesis in cases of major loss of structural parts of mouth or face; and
- any prosthesis involving a great patient-management problem.

Periodontics:

- diagnosis and treatment planning in malocclusion cases where the masticatory function is severely impaired;
- diagnosis and treatment of degenerative diseases affecting the supporting tissues;
- diagnosis and treatment of complex malocclusion involving a joint problem; and
- any periodontal disease case involving a great patient management problem.

Guidance and assistance received

As this is the expert level, GS-14 dental officers generally give rather than receive professional guidance and assistance. There may be occasions when the expert dental officer may consult with another professional colleague who is an expert in the same specialty. In cases requiring a team approach to dealing with a health problem (as in maxillo-facial surgery) he consults with other dental officers and physicians on the team.

Qualifications required

The GS-14 dental officer is required to have:

(1) a knowledge and understanding in great depth of the relationships and applications of the basic sciences underlying dentistry to the dental health problems associated with his specialty;

(2) a very highly developed diagnostic skill (derived from both a deep understanding of scientific phenomena involved and extensive case experience);

(3) an expert treatment planning ability with respect to his specialty; and

(4) considerable skill in administering treatment.

The knowledge, skill and ability required is normally gained through 5 years or more of professional experience and training pertinent to the specialty.