AACD DENTIST FELLOWSHIP
REQUIREMENTS AND PROTOCOL
May 2023

DEFINITION:

The membership category of "Fellowship" is the highest level of achievement recognized by the American Academy of Cosmetic Dentistry® members. The status of "Accredited Fellow" of the AACD is granted after the successful completion of all requirements.

PURPOSE:

To provide the highest level of achievement for members in accordance with the AACD's mission of education and excellence. Additionally, to provide a means for the Accreditation/Fellowship Committees to evaluate the continuation of clinical excellence and commitment to cosmetic dentistry of its Accredited members.

ELIGIBILITY AND RECEPTION:

Only Accredited members are eligible and may apply for Fellowship. Accredited members may send their required digital images to the AACD Executive Office for examination **only** after fulfilling **all** other requirements. When cases are received by the executive office, any name will be removed and a number will be assigned. This will ensure that the applicant's identity remains anonymous throughout the exam. The AACD is not responsible for damage done to digital images or hard drives during shipping. Fellowship submissions will not be accepted for examination between December 1st of each year and the annual scientific session. You will receive written notifications that your application has been received, processed, and you will need to schedule a time for your exam. Slots are limited and fill up quickly.

REQUIREMENTS:

1. Fellowship application must be completed and submitted with fee to the Executive Office to hold a submission date. Cancellation or rescheduling an assigned date is a forfeiture of your application and fees.
2. Payment of application fee: $600 (USD) - Non-refundable
3. Clinical requirements: 50 cases must be submitted to the executive office. Each case must be of a different patient.

PROTOCOL: The 50 cases must be submitted according to format.

1) In digital format

2) The AACD will not define specific equipment requirements, however, the AACD has outlined criteria to produce image quality equal to, or better than, 35mm slide film. The protocol and equipment recommendations are expected to evolve with advances in technology.
   a. Two BEFORE and two AFTER images for each case. All cases must be demonstrated on maxillary teeth and can also show treated mandibular teeth. Views must be frontal 1:2 (1:3), smile and retracted. Retracted view must show all treated teeth completely including gingiva. If frontal views do not fully demonstrate the work, the lateral views must be provided.
   b. Images must be grouped and numbered in numerical order of required cases below. The 15 elective cases must be last.   Briefly list teeth treated and treatment on the template that the AACD will provide to you via e-mail. Type all information in the AACD template (electronic file) and e-mail back to the AACD Credentialing Department. No other explanations, except what would help examiners understand treatment chosen.

3) Image Criteria: Digital image quality is contingent upon five distinct factors related to the image itself.   Proper setup and use of your camera and adjunctive photographic equipment maximizes results.
   - Correct Color
   - Correct Exposure
   - Depth Of Field
   - Good Tonal Range
   - Image Sharpness

4) Capture Equipment Criteria: **Professional grade digital cameras** are recommended.
   - An example of a professional grade camera would be a Single Lens Reflex Digital Camera with a macro lens capable of manual focus and selectable magnification ratio with a lens mounted flash. The digital camera should be capable of capturing at least 5 Megapixels and be able to capture images as "RAW" files.
   - Many consumer grade digital cameras capture images that are visibly degraded due to small capture chips and internal firmware. They may also lack the ability to control exposure and depth of field during macro image capture.

5) Camera Set-Up
   - Variables are set in the camera menus

6) Set internal clock to correct time.

7) Capture images as **RAW** files. (Required)
   - Different camera manufactures use different names for this type of file.

8) Select lens magnification ratio as shown in the AACD "Photographic Documentation and Evaluation in Cosmetic Dentistry" (A Guide to Accreditation Photography). Make any necessary magnification conversions to produce an image magnification comparable to the

images illustrated in the photography guide. Typically a conversion is necessary between the ratios dictated for a film camera to produce the same result with a digital camera. Once the ratio has been determined, that ratio or magnification should be consistently maintained throughout the before and after photographic series. The lens magnification conversion that is needed for most digital SLR cameras is 1.5 (Cameras with sensor size of 14mm x 9.3mm).
- Magnification of (1.5) x (The setting on the lens barrel)
- 1:2 views set the lens on a digital camera to 1:3

9) Maximize depth of field using high f-stops (minimized aperture).

10)   Managing Images on a Computer:
- Set internal clock to correct time.
- Transfer the RAW camera image files from the camera directly to your computer hard drive.
- NOTE: Scanned images will not be accepted for submission.

11) Submission:
Candidates need to submit RAW images and widescreen PowerPoint files with JPEG images for each case on an external USB hard drive sufficient in size (approximately 10-20GB) to accommodate all files and formatted for PC. The drive should be labeled with AACD member number. Create two folders on the hard drive:
a. RAW :
  i.   RAW with subfolders containing each case labeled 1-50. In each subfolder create a subfolder labeled Preoperative and Postoperative.
b. Power Point:
c. PowerPoint in a widescreen format that should contain the appropriate before and after images arranged side by side. No frames, labels or other additions should be included with the images.
  i.   Create a compressed JPEG image file by copying the RAW image file.
    - Choose a software tool to make compressed JPEG files of all the   "RAW" files. Either use software from the camera manufacturer or an after-market software tool of your own choice. (i.e. PhotoShop, ThumbsPlus, acdsee)
    - Open the RAW image with the software. Go to: file> save as> JPEG compressed> Quality> Maximum (100%, best quality, etc., Minimum Compression). **Image quality must be more than adequate to judge the dentistry; free of saliva and debris, properly exposed, framed and focused (see the Guide to Accreditation Photography for additional recommendations).**
    - Some cameras have settings that create both a RAW and a high quality JPEG at the same time. Make sure the camera is set to the highest JPEG setting when using this feature.
  ii. Arrange JPEG BEFORE and respective AFTER images side by side in Widescreen PowerPoint for each case (this includes required radiographs). Be sure to label the PowerPoint slide with both the case number (1-50) and case type. Two views are required for each of the required 50 cases. Views must be frontal 1:2 digital equivalent, smile and retracted. Retracted view must show all treated teeth completely, including gingiva. If frontal views do not fully demonstrate the work, the lateral views must be provided. Please limit extra PowerPoint slides. All cases

must be demonstrated on maxillary teeth and can also show treated mandibular teeth. Instructions and the PowerPoint 2003/2007 Template for widescreen needed for image submission can be downloaded from the AACD website in the member's section under Accreditation. Visit: Visit: http://www.aacd.com/AccreditationResources (#5 to download PowerPoint Template.

1. Open PowerPoint template in PowerPoint 2003/2007.
2. Complete information in Title and Treatment Slide.
3. Slides must be arranged in the exact order specified in diagram #2 of Accreditation Protocol; pre-ops on left and post-ops on right.
4. Left click on slide #2 in left side of screen
5. Edit > Copy
6. Edit > Paste
7. Edit > Repeat Paste (Repeat for total # of slides needed)
   (For Fellowship also copy and paste slide #1 as needed)
8. Click on Insert Picture icon in lower left corner of PowerPoint slide > find the appropriate pre-op image from file and highlight with a left click > Insert.
9. Repeat for the appropriate complimenting post-op image and position in the right half of the PowerPoint slide.
10. The images should be about the same size as the template box. If not, the click and drag the corner of the image to resize to match the size of the template box.
11. (Instructions are a guide and not intended as a substitute for continuing education in digital photography and use of computer hardware and software.)
12. Widescreen PowerPoint slides must be grouped in numerical order of required cases below. The 15 elective cases must be last. Briefly list teeth treated and treatment on the template that the AACD will provide to you via e-mail. Type all information in the AACD template (electronic file) and e-mail back to the credentialing department. No other description is required; except explanations that help examiners understand the chosen restorative treatment.

   iii. Image Editing
   - No global, focal, fixed point or spot editing is allowed.
   - Global, focal, fixed point or spot editing is strictly prohibited and considered fraudulent. This means even innocent changes such as cleaning up dust spots, cropping, rotating, resizing or eliminating red eye is not allowed.

12) Required cases:
a. 15 indirect cases (crowns, veneers or combinations of both) of which five cases include teeth #6-11 or more.
b. 15 direct placement cases on anterior teeth (veneers, Class IV on a natural tooth replacing at least 10% of the facial surface or diastema closure 1 mm or greater, which involves placement of direct resin on two adjacent teeth), including two cases of six or more veneers, and five cases of Class IV restorations - not diastema closures.
c. Five Cases - Tooth replacement (options: laboratory fabricated bridge or implant)
   - Bridge: at least one pontic must be replacing an upper incisor and/or canine

- Implant: must involve placement of an implant root form into an upper anterior edentulous space. The edentulous space is defined as being devoid of any root structure. (Pre-op x-ray must show edentulous space or failing tooth **prior** to implant placement.) Post-op periapical radiograph is required for this case. Replacement of a crown on an existing implant is not acceptable for this case type. Implant: must involve placement of an implant root form into an upper anterior edentulous space. The edentulous space is defined as being devoid of any root structure. (Pre-op x- rays and photographic views must show edentulous space or failing tooth prior to implant placement.) Replacement of a crown on an existing implant or the use of Pink Porcelain/Composite is not acceptable for this case type. Implant cases that do not meet this criteria may be used in the elective section.

    d. 14 elective cases may be any of the above.

    e. One "Give Back a Smile" (GBAS) case or after one year, cleared through the AACD Credentialing Department, a pro-bono case if no existing candidates are available in their area in the GBAS program. A broad range of treatment solutions will be considered acceptable for treating this particular case, including complete dentures, partial dentures and conventional fixed restorative procedures.

        i. Non-restorative procedures such as whitening, cosmetic contouring, orthodontics, etc. must be combined with other procedure(s).

13) Previously passed Accreditation cases may be submitted but not identified as such. Current Accreditation protocol will not guarantee passing of older Accreditation cases.

14) An external hard drive and written report are to be sent to the executive office. The Fellowship Chair will then assign two examiners who will examine the images and independently score each case presented. If the work is recognized by an examiner, the examiner will disqualify himself/herself. If the Fellowship Chair's score is used in case of a disqualification, the identification of the candidate must remain anonymous.

15) Chair will respond with an evaluation of the submitted cases. Criteria for evaluation are the same as Accreditation.

16) In case of failure, a new application and fee must be submitted. Cases must be submitted according to current Fellowship protocol. Cases previously passed are not guaranteed to be successful if resubmitted.

17) 45 out of 50 cases must be deemed successful in order to attain Accredited Fellow status. A successful case is one that receives at least two passes by the three Fellow examiners. If two of the three examiners give it a failing grade, the case fails. Candidate must pass HALF of the required cases. (Indirect cases – 3 of 5 must pass; direct cases – 1 of 2 six or more veneers and 3 of 5 Class IV must pass; bridge or implant cases – 3 of 5 must pass).

18) Note: the quality of the images and the quality of the work must be up to Accreditation standards.

19) There are no appeals on any Fellowship cases.

BANKING SUBMISSIONS

If you are unsuccessful with your first attempt, you may submit a second application and fee and bank your successful cases if you have passed 30 cases or more. You can only bank your cases for a one - time use and you must successfully complete the process within a five - year period of your original examination. Your successful cases will be kept at the executive office until the completion of your second submission. Your second submission will be those cases that were unsuccessful in your original presentation and viewed by the Fellowship chair for proper case submissions. If you are not successful on your second presentation and have used the banking system, you will be required to submit a new application and fee and begin again with 50 cases.

Maintaining Accredited Member or Accredited Fellow Member Active Status

The Accreditation process has become recognized as the gold standard in cosmetic dentistry. It represents an intensely calibrated measurement of those specific clinicians and laboratory technicians that have applied themselves to a vigorous level of examination and evaluation of their skills and knowledge relative to cosmetic dentistry by a jury of their peers. The credential is the accomplishment of a single provider and is not necessarily a reflection of the practice or laboratory within which the provider performs. The acknowledgement of this credential is beyond reproach and identifies those leaders in the field of cosmetic dentistry.

Although the tribute to these talents and accomplishments are achieved at a single point in time, this proficiency requires continual dedication to education, advances in cosmetic dentistry and excellence in current patient care. Because of these ongoing requisites, there are requirements in maintaining **Active Status** for the protection of the credential. The purpose of these maintenance requirements is to assure the esteem and integrity of the credential to the profession and the public at large.

To maintain **Active Status** as Accredited or Accredited Fellow, Accredited members and Accredited Fellow members must to the satisfaction of the American Board of Cosmetic Dentistry (ABCD):

1. Maintain active and continuous membership in the AACD.

2. Maintain active and continuous hands-on patient **clinical practice. These activities and procedures may include the management of diagnosis and treatment planning, mentoring or even over the shoulder care, but must include hands-on patient care in the role of delivering intraoral treatment as the clinician or technician fabricating restorations within the past six months with routine frequency to the satisfaction of the ABCD.

** Clinical practice for our purposes is defined as actual handling of the patients' dental needs through preparation, impressions and delivering of restorations, etc. It is not considered clinical practice if no direct patient care is being performed. It is not considered clinical practice if one is only reading x-rays, working up patient treatment plans, presenting treatment plans, and consulting or advising for patient care.

3. Uphold the integrity of the credential to a recognized level of ethics.

4. Satisfy one of the following requirements once every three years:
- o   Attend the Annual AACD Scientific Session
- o   Serve as an editor, editorial reviewer of contributing editor in a recognized aesthetic dental publication
- o   Author a published article in a recognized aesthetic dental publication
- o   Participate as a coordinator or lecturer in an aesthetic dentistry continuum
- o   Attend the Criteria Workshop or lecture portion of the Advanced Accreditation Workshop (registration required)
- o   Serve as a board or committee member in the AACD
- o   Examiners only - Attend Examiner Calibration

Forms for verification on requirements are available at the AACD Executive Office. Submission of these forms is the responsibility of each individual who is Accredited. Five percent will be randomly reviewed and proof of verification will be required.

RECOGNITION OF ATTAINMENT:
Accredited Fellow status will be recognized with an award superior to the Accreditation award. This award will be presented at the next annual scientific session after passing the fellowship examination.