

Dental Ethics: Navigating Dilemmas and Ensuring Well-Being in Daily Practice

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American Society for Dental Ethics a Section of the American College of Dentists

ASDE is an organization of diverse professionals with interests and expertise in dental ethics and professionalism, serving dental education, professional societies, and practitioners.

Objectives



Define ethics, professionalism, and well-being.



Discuss and explain provider and team well-being and their relationship to ethical practice.



Explore an ethical decision-making model addressing common ethical dilemmas in clinical practice.

Why Do We Have Ethical Codes?

Every profession owes society the responsibility to regulate itself, which is achieved largely through the influence of professional societies and codes.

All dental providers must observe its rules of ethics and professionalism.



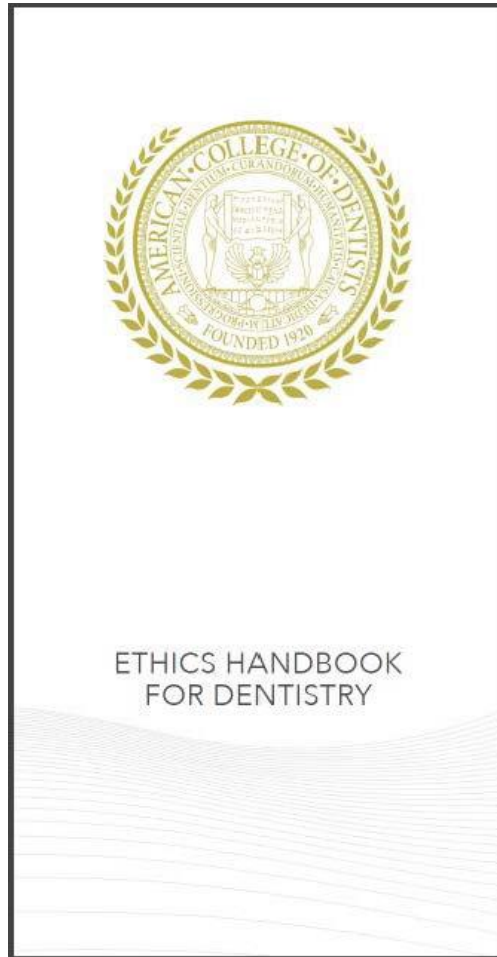
Principles of Ethics and Core Values



TABLE 1. Core Values Established by the American Dental Hygienists' Association¹

- **Autonomy:** Treat patients with respect; patients have the right to informed consent
- **Confidentiality:** Respect confidentiality of patient information
- **Societal trust:** Value patient trust and understand that public trust in the profession is based on clinician actions and behaviors
- **Nonmaleficence:** Protect patients and minimize risk of harm
- **Beneficence:** Promote the well-being of individuals and the public
- **Justice and fairness:** Support the fair and equitable distribution of health care resources
- **Veracity:** Tell the truth

Principles of Ethics and Core Values



- **A**ccountability
- **C**ompetence
- **D**ignity

- **C**ollaboration
- **A**dvocacy
- **R**eflection
- **E**mpathy
- **S**tewardship



Professionalism

- Professionalism extends ethics to encompass the **conduct, aims, and qualities** that define a professional and a profession.
- It relates to the **behavior** expected of individuals in a learned profession.
- Professionalism reflects **positive habits of conduct, judgment, and perception**, demonstrated by both individuals and professional organizations.
- Professionals and their organizations prioritize the well-being and self-determination of the patients they serve.
- True professionalism is the quality of conduct and character that uses **superior knowledge, skill, and judgment for the benefit of others — placing service above self-interest.**

A Reimagined Professionalism

Scholars across various health professions sectors have called for a reimagination of professionalism.

“Key to that reframing is an expansion of previous definitions to allow for intervention mechanisms, systems, and practices – not simply refraining from doing harm but actively interfering or taking action if wrong is being witnessed.”

Professionalism and professional identity formation in dental students: Revisiting the professional role orientation inventory (PROI)

Carlos S. Smith DDS, MDiv, FACD^{1,2} | Spiro C. Stilianoudakis PhD³ |
Caroline K. Carrico PhD^{1,3,4}

¹Department of Dental Public Health and Policy, Virginia Commonwealth University, Richmond, Virginia, USA

²Oral Health Equity Core, Institute for Inclusion, Inquiry and Innovation, Virginia Commonwealth University, Richmond, Virginia, USA

³Department of Biostatistics, Virginia Commonwealth University School of Medicine, Richmond, Virginia, USA

⁴Oral Health Research Group, Virginia Commonwealth University, Richmond, Virginia, USA

Correspondence

Carlos S. Smith, DDS, MDiv, FACD, Department of Dental Public Health and Policy, VCU School of Dentistry Affiliate Faculty, Oral Health Equity Core, VCU Institute for Inclusion, Inquiry and Innovation 1101 E. Leigh Street, P.O. Box 980566, Richmond, Virginia 23298-0566, USA.

Email: cssmith2@vcu.edu

Abstract

Objective: Professionalism is a hallmark of health professions education. Professional identity formation is a growing field of exploration in medical education, and the dental literature is sparse on just how professional identity formation is developed and assessed within dental education.

Methods: The validated professional role orientation inventory (PROI) was administered to 2nd year dental students during a spring semester ethics course. The PROI includes four 10-item scales representing four attitudinal factors: Authority, Responsibility, Agency, and Autonomy.

Results: When compared to a historical sample of dental students in the early 1990s, dental students today scored significantly higher on Responsibility ($p = 0.0309$) and lower on the Agency factor ($p = 0.0001$). Authority scores in the current sample of dental students were significantly associated with age and race, with an increase in age associated with a decrease in Authority ($p = 0.0504$) and Caucasian respondents demonstrating significantly higher scores than Asian or Other races. Debt was associated with differences in Autonomy ($p = 0.0683$) and Agency ($p = 0.0106$), with those in the 100k–300k anticipated debt range demonstrating lower levels of both Autonomy and Agency. Race was marginally associated with Responsibility with those in the Other race category (Hispanic, Black/African American, Other/Multiracial) demonstrating higher levels than Caucasian ($p = 0.0513$).

Conclusion: Dental students' scores denote a continued commitment to others yet a feeling of less sense of control as a practicing professional. A redefining of professionalism to include social activism and advancing health equity is required given their altruism and commitment to others, which remains high.

HEALTH

Prioritizing Well-being to Advance Dental Education



(pictured from left)
Sophia G. Saeed, DMD, MBA, FACD
Associate Dean of Clinical Affairs and Professor
School of Dental Medicine, UConn Health

Hubert K. Chan, DDS, FACP
Associate Dean for Integration of Technology,
Curriculum and Learning Environments, and Professor
College of Dental Medicine, Western University Health Sciences

Carlos S. Smith, DDS, MDiv, FACD
Associate Dean for Inclusive Excellence,
Ethics and Community Engagement, and Associate Professor,
Department of Dental Public Health and Policy
Virginia Commonwealth University School of Dentistry

Ramesh P. Nalliah, DDS, MHCM, FACP
Associate Dean for Patient Services and Clinical Professor of Dentistry
University of Michigan School of Dentistry

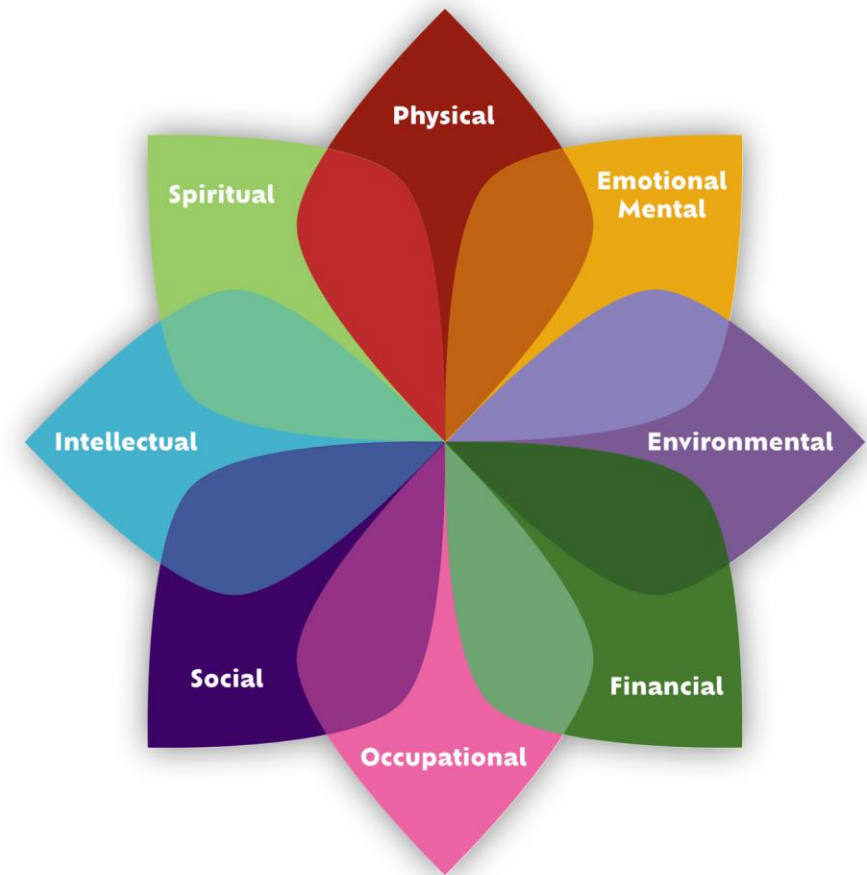
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Defining Well-Being and Wellness

- **The World Health Organization** defines health as a state of complete physical, social, and mental well-being, and not merely the absence of disease or infirmity. It goes on to state that *"well-being is a positive state experienced by individuals and societies. Similar to health, it is a resource for daily life and is determined by social, economic, and environmental conditions."*
- **Well-being as 'the state of being or doing well in life; a happy, healthy, or prosperous condition; the moral or physical welfare (of a person or community); and wellness as 'the state of being well or in good health'.** Thus, both terms speak to some level of improvement towards healthier living. For our purposes, we will use the term wellbeing in its broadest sense, implying far more than encompassing just good health (wellness).

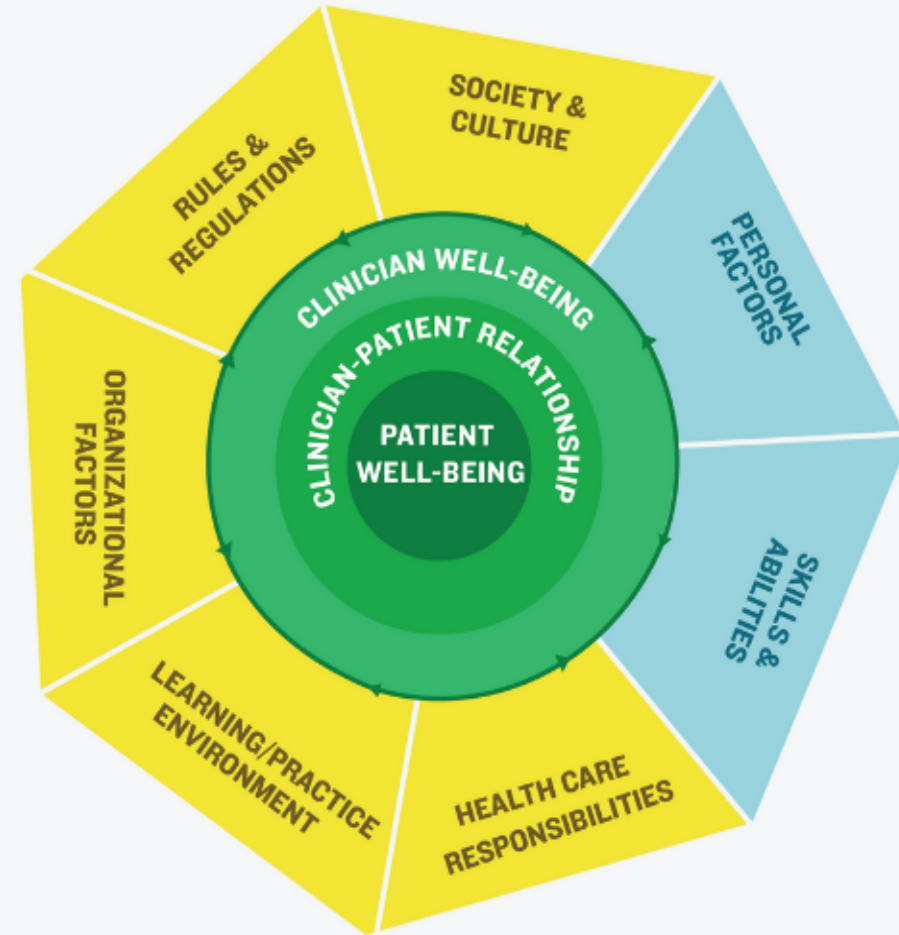
Eight Dimensions of Well-Being



Well-Being as a Missing Piece from Professionalism

FACTORS AFFECTING CLINICIAN WELL-BEING AND RESILIENCE

Conceptual Model



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Empathy for Patients, Peers, and Team Members

Empathy is the ability to recognize, understand, and share the thoughts and feelings of another...



Developing empathy is essential for building relationships and fostering compassionate behavior. It involves understanding and experiencing another person's perspective, rather than focusing solely on one's own. Empathy encourages prosocial, voluntary helping behaviors that arise from genuine concern, rather than obligation.

What Is an Ethical Dilemma?

An ethical dilemma occurs when a person faces a situation in which two or more ethical principles, values, or duties are in conflict, and choosing one course of action may compromise another. It requires careful judgment to determine the most ethical path forward when no option clearly satisfies all ethical responsibilities.



Sexual Harassment

Hostile Environment: *Occurs when any type of unwelcome sexual behavior creates an offensive or hostile environment. The harassment does not have to result in tangible or economic job consequences.*

Quid Pro Quo: *Includes unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a nature or submission to them is basis for hiring, firing or advancement.*



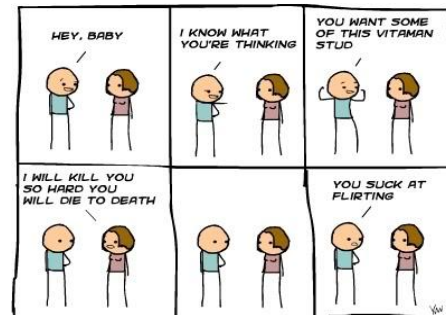
Which Is It?

Sexual Harassment:

- Feels "bad"
- Is one-sided
- Makes you feel unattractive
- Is degrading
- Makes you feel powerless
- Is power-based
- May include negative touching
- Is unwanted
- Is illegal
- Makes you feel sad/angry

Flirting

- Feels "good"
- Is shared
- Makes you feel attractive Is a compliment
- Makes you feel in control Is based on equality
- May include positive touching
- Is wanted
- Is legal
- Makes you feel happy



Sample of Ethical Dilemmas in Private Practice

- **Interactions with staff**
 - Disrespectful
 - Sexual or gender harassment
 - Incivility and Bullying
 - Inappropriate or illegal delegation
- **Relationship with patients**
 - Observed overtreatment or undertreatment
 - Failure to get informed consent or informed refusal
 - Ignoring patient autonomy
 - Failure to report abuse, e.g., child, adult
- **Advertising and marketing ethics**



Examples

- Unsolicited or unwelcome flirtations, advances or proposals
- Ill-received jokes or offensive gestures
- Intrusive questions about an employee's personal life
- Suggestive facial expressions
- Abuse of familiarities or diminutives
- Unnecessary, unwanted physical contact such as hugging or touching
- Suggestive comments about clothing
- Questions about sexual fantasies, sexual preferences or sexual activities

The image shows a document titled "SEXUAL HARASSMENT COMPLAINT FORM". Below the title, it states "ALL INFORMATION WILL BE KEPT CONFIDENTIAL." The form contains several fields for data entry, including "VICTIM'S NAME (Last)", "Address (Mailing Address)", "Phone (Home)", "Phone (Cell)", "City", "State", "Zip", "Middle Initial", "Home Telephone", "Other Telephone", and "Occupation".

Bullying

One person or a group of people in a workplace single out another person for unreasonable, embarrassing, or intimidating treatment.

When it is repeated over time and becomes a pattern, it's called Horizontal Violence in Health Care.

Contributing Factors:

- Person in a position of authority feels threatened by victim.
- Co-worker who is insecure or immature.
- A single individual acting as a bully.
- In person or electronic media; cyberbullying.
- May rise to the level of harassment.



Disruptive Behavior

- **Disruptive behavior** is interactions among dentists, dental hygienists, dental assistants, and other staff that interfere with patient care.
- **The ADA Principles of Ethics and Code of Conduct** specifically addresses disruptive behavior in section 3.F.1.
- The section of the code indicates that dentists who engage in **disruptive behavior** in the workplace risk undermining professional relationships among team members, decreasing the quality of patient care provided, and undermining the public's trust and confidence in the profession.

Examples of disruptive behavior

- Profane or disrespectful language
- Throwing charts or instruments
- Comments that undermine a patient's trust and confidence
- Sexual comments, racial or socioeconomic slurs
- Angry outbursts or yelling and name-calling
- Retaliation against any one person who has reported disruptive behavior

Ethical Dilemma Discussion

Influencing Factors for Ethical Decision Making

- Personal experience and upbringing
- Religious/spiritual beliefs
- Professional training and experiences
- Practice locations
- Patient expectations
- Social customs
- Societal norms

Decision-making



Resources for Ethical Decision Making

- Models for ethical decision making
- Codes (professional codes, specialty groups)
- Principles of professionalism
- Court decisions
- Professional disciplinary actions
- Previous experience with the same/similar situation
- Community context(s)
- Personal standards and values



Desired Outcomes

- What is best for the patient?
- What is best for the dental provider?
- What is best for all stakeholders?
- Consider principles, obligations, and values.
- Strive for excellence.



The Outspoken and Biased Patient

Mrs. Jackson is an established patient at a multi-doctor group dental practice. Her usual provider, Dr. Q, is currently on maternity leave.

During a recall exam and prophylaxis appointment, Mrs. Jackson comments to her hygienist:

“So, which different doctor am I seeing today? I know Dr. Q is out — but she really needs to decide if she wants to be a dentist or a mother. Don’t we, as patients, come first? I just read an article about ‘patient-centered care’ being all the rage — do you all not believe in that here?”

She continues:

“I just don’t want someone so meek and small that they can’t handle the work. At the same time, I thought I saw a new guy who’s over six feet tall when I was updating my paperwork — I hope he’s not one of those rough, no-gentle-giant types!”

How do we navigate this potential ethical dilemma?

Potential Abuse

When completing a routine dental hygiene appointment, Ms. Rivera, a licensed dental hygienist, notices multiple bruises on the arms and face of her 8-year-old male patient. When asked gently about the bruises, the child shrugs and seems anxious while giving inconsistent explanations.

Ms. Rivera documents her findings and brings her concerns to the attention of Dr. Stevens, her employer. However, Dr. Stevens advises her, ***“Don’t get involved. It’s probably nothing, and we don’t want to upset the family or bring trouble to the practice.”***

Ms. Rivera knows that as a licensed dental hygienist and health care professional, **she is a mandated reporter under state law**. Failure to report suspected child abuse can result in legal penalties and professional disciplinary action. She struggles with balancing loyalty to her employer with her legal and ethical obligation to protect the child and report her suspicions to the appropriate child protection agency.

How do we navigate this potential ethical dilemma?

The Eager International Mission Volunteer

An experienced dentist has long had a passion for international mission work, participating in and leading trips to various low- and middle-income countries, particularly in the Caribbean region. **These trips often include** eager pre-dental undergraduate students and, occasionally, outstanding high school students — typically children of well-connected neighbors or close family friends. The temporary clinic locations frequently serve communities with few, if any, practicing dentists nearby. The team routinely treats individuals suffering from pain and infection, many of whom have never received dental care.

During one trip, a gregarious student, who reminded the dentist of their younger self, was assisting chairside. After the dentist administered local anesthetic to a patient requiring an extraction, the dentist held out the dental forceps to the student and asked if she would like to extract the tooth. **Excited and enthusiastic, the student accepted — and the dentist allowed her to perform the extraction.**

How do we navigate this potential ethical dilemma?

The Horizon – Ethical Challenges

- Public health crises
- Telehealth
- Mounting inequities and disparities
- Evolving technologies
- Licensure pathways
- Expanding roles oral team members
- Oral health misinformation – e.g., fluoridation
- **Your thoughts?**



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References and Works Cited

1. American College of Dentists. Ethics Handbook for Dentistry. American College of Dentists; 2024. <https://www.dentaethics.org/resources/ethics-handbook-for-dentistry/>
2. Ozar, Sokol and Pathoff Dental Ethics at Chairside, 2018
3. Jonsen AR, Siegler M, Winslade WJ. Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine. 6th ed. New York, NY: McGraw-Hill; 2006.
4. Smith, CS, Stilianoudakis, SC, Carrico, CK. Professionalism and professional identity formation in dental students: Revisiting the professional role orientation inventory (PROI). J Dent Educ. 2022; 1- 8. <https://doi.org/10.1002/jdd.13159>
5. Saeed SG, Chan HK, Smith CS, & Nalliah RP, Prioritizing Well-being to Advance Dental Education. J Am Col Dent 2024; 91 (1): 25-33. https://issuu.com/college1920/docs/ejacd_vol91-no1_09-24_final
6. World Health Organization. (2021). "Health promotion glossary of terms."
7. McMahon, A. T., Williams, P., & Tapsell, L. (2010). "Reviewing the meanings of wellness and well-being and their implications for food choice." *Perspectives in Public Health*, 130(6), 282-286.
8. Linton, M. J., Dieppe, P., & Medina-Lara, A. (2016). "Review of 99 self-report measures for assessing well-being in adults: exploring dimensions of well-being and developments over time." *BMJ open*, 6(7), e010641.
9. Trudel-Fitzgerald, C., Millstein, R. A., von Hippel, C., Howe, C. J., Tomasso, L. P., Wagner, G. R., & VanderWeele, T. J. (2019). "Psychological well-being as part of the public health debate? Insight into dimensions, interventions, and policy." *BMC public health*, 19(1), 1-11.
10. Factors Affecting Clinician Well-Being and Resilience – Conceptual Model
11. Stern, DT. Measuring Medical Professionalism. Oxford University Press, 2006.
12. Goleman, D., & Boyatzis, R. (2005). Harvard Business Review. América Latina.
13. Smith, S. G., Banks, P. B., Istrate, E. C., Davis, A. J., Johnson, K. R., & West, K. P. (2022). Anti-racism structures in academic dentistry: Supporting underrepresented racially/ethnically diverse faculty. *Journal of public health dentistry*, 82, 103-113.
14. Binmadi NO, Alblowi JA. Prevalence and policy of occupational violence against oral healthcare workers: systematic review and meta-analysis. *BMC Oral Health*. 2019 Dec 12;19(1):279. doi: 10.1186/s12903-019-0974-3. PMID: 31830978; PMCID: PMC6909447.
15. Saeed, S. G. (2021). Combating sexism—the need for real inclusion in dental education. *eJACD*, 18, 18-24.
16. Zarkowski, P., Brady, M., & Saeed, S. G. (2022). Faculty diversity, equity, and inclusion in academic dentistry: Has dental education missed the call of# MeToo?. *Journal of Dental Education*, 86(9), 1174-1181.
17. Pennington A, Darby M, Bauman D, Plichta S, Schnuth ML. Sexual harassment in dentistry: experiences of Virginia dental hygienists. *J Dent Hyg*. 2000 Fall;74(4):288-95. PMID: 11314480.
18. Hunt, A. W., Bradshaw, B. T., & Tolle, S. L. (2020). Sexual Harassment Issues Among Virginia Dental Hygienists. *American Dental Hygienists' Association*, 94(3), 37-47.

Question and Answer

Submit questions for the panelists in the **Q&A box**

Pamela Zarkowski, JD, MPH

Provost and Vice President for Academic Affairs

University of Detroit Mercy

zarkowp1@udmercy.edu



Carlos Stringer Smith, DDS, MDiv, FACD

President

American Society for Dental Ethics

Associate Dean for Ethics and Community Engagement

Virginia Commonwealth University School of Dentistry

cssmith2@vcu.edu



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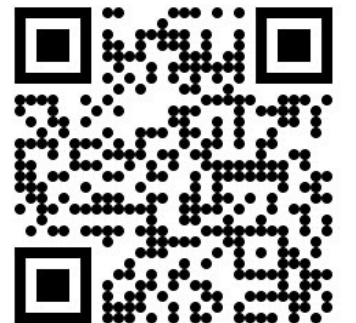
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