

Resolution No.	13B	New <input type="checkbox"/>	Substitute <input checked="" type="checkbox"/>	Amendment <input type="checkbox"/>
Submitted By:	Board of Trustees			
Date Submitted:	April 11, 2025	Reference Committee <input checked="" type="checkbox"/>	Direct to House <input type="checkbox"/>	
Total Financial Implication:	\$ none			
Amount One-time	\$ none	Amount On-going	\$ none	

Modification of Dental Scope of Practice

Background: In May 2024, the New York State Education Department issued the following guidance related to the use of injectable fillers by dentists:

*NYS Education Law does not specify modalities of practice and does not limit the practice of dentistry to any specific methods of treatment. As a result, Education Law does not prohibit a NY State licensed dentist from using botulinum toxin type A or dermal fillers in the oral and maxillofacial area consistent with Section 6601, as long as it is related to restoring and maintaining dental health. For example: a dentist who is completing orthognathic surgery to correct a jaw discrepancy, and wishes to do an allograft of the chin, or to administer filling materials such as Botox or Restylane, would be considered to be within the scope, if trained. **However, to administer these regimens as stand-alone procedures for esthetics or facial recontouring without parallel dental reconstructive work on either the teeth themselves or jaws is not within scope.** [emphasis added]*

This proposal to expand the scope of practice to permit dentists to administer injectable fillers, including botulinum toxin (Botox®) and hyaluronic acid-based products (e.g., Restylane®), within the maxillofacial region reflects the evolving nature of dental practice and the critical role dentists play in comprehensive oral and facial care, including esthetics.

Dentists receive extensive education and clinical training in head and neck anatomy, facial musculature, pharmacology, and the management of injections in anatomically complex regions. This foundational expertise positions them as competent providers for procedures involving the perioral and facial areas, both from a functional and esthetic standpoint.

Injectable agents such as Botox® and dermal fillers have well-established therapeutic applications in dentistry, including the management of temporomandibular joint disorders (TMD), bruxism, myofascial pain, and orofacial dystonia. In addition, esthetic use—such as correction of perioral asymmetries, lip augmentation, and reduction of dynamic facial lines—can be a natural extension of treatment planning, particularly in practices focused on prosthodontics, orthodontics, and cosmetic dentistry.

Allowing qualified dentists to perform these procedures under appropriate training and regulatory frameworks would enhance patient access to safe, evidence-based care while maintaining high professional standards. It would also bring regulatory alignment with jurisdictions that already recognize this aspect of dental scope and support the profession's ability to respond to patient needs in a modern, integrated healthcare environment.

This measure seeks to affirm the role of dentistry in the provision of injectable therapies within the dentist's area of clinical expertise and supports the continued advancement of the profession in serving both therapeutic and esthetic patient outcomes.

Accordingly, the following resolution is submitted for consideration:

13. Resolved, that NYSDA supports modifying the scope of practice to allow dentists to administer injectable pharmacologics for cosmetic and/or functional enhancement of the oral maxillofacial region; and be it further

Resolved, that a dentist may administer an injectable pharmacologic only after having completed a Board-approved postdoctoral continuing education course that may includes but is not limited to the following elements:

- biochemistry of injectables;
- neurophysiology of injectables;
- all relevant head and neck anatomy;
- dosing ranges;
- reconstitution of neurotoxins and proper product handling and storage;
- patient assessment;
- prevention, recognition, and management of adverse events; and
- review of informed consent protocols

the intent of which is to provide sufficient knowledge and skill for a dentist to safely and effectively administer injectable pharmacologics in the oral and maxillofacial region.

BOARD RECOMMENDATION: VOTE YES

name	yes	no	abst ain	abse nt	name	yes	no	abst ain	abse nt	name	yes	no	abst ain	abse nt
Casper-Klock	x				Greenberg	x				Korkosz	x			
Cuomo	x				Hills	x				Miller	x			
Demas	x				Jackson	x				Rothas	x			
Edwards	x				Jacobo	x				Samuels	x			
Gamache	x				Jonke	x				Scharoff	x			
Giordano	x									Stacy	x			
										Res #13				