



## SINGAPORE DENTAL COUNCIL

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SDC 8:4 Vol 3

17 May 2013

To: All Registered Dental Professionals

Further to our earlier note on some new and important changes, I would like to announce the following:

### A. NEW PROFESSIONAL REGISTRATION (PR) SYSTEM AND CONTINUING PROFESSIONAL EDUCATION (CPE) SYSTEM

1. As part of Government's ongoing efforts to promote e-Services, the Singapore Dental Council will be launching two new systems to replace the current PR and CPE systems. The new systems aim to provide an easy and convenient means for the public and all dental professionals to communicate with the Council through the Internet.
2. To facilitate the changeover, the Professional Registration (PR) and Continuing Professional Education (CPE) systems will be **temporarily shut down from 28 May to 2 Jun 2013**.

Dental professionals are reminded not to submit the following during this period:

- online CPE claims,
  - online request for Letter of Good Standing or
  - online payment
3. The new systems are targeted to be launched on **3 Jun 2013**.
  4. The new systems will enable you to make online requests, such as:
    - Request to change password
    - Request to renew practising certificate
    - Request for Letter of Good Standing
    - Request to submit Continuing Professional Education Points
    - Update of personal particulars
    - Payment for fees
  5. To facilitate access and use of these systems, user manuals (PRS-User manual and CPE-User manual) will be mounted on SDC's website at <http://www.sdc.gov.sg>.

**B. NEW USER ID**

1. In line with the new systems, a new User ID will be created by adding a prefix “D” to your current DCR Number:

Please refer to the following table for the **NEW FORMAT** Registration Number:

	CURRENT REGISTRATION NUMBER	NEW FORMAT REGISTRATION NUMBER	Password
<b>Full, Conditional or Temporary Registration Number</b>	12345X	D12345X	No Change

2. You can log into the new system via your **NEW** Registration Number and existing password or SingPass.

**C. GUIDELINES ON AESTHETIC FACIAL PROCEDURES FOR DENTAL PRACTITIONERS**

The Council wishes to announce the launch of the **Guidelines on Aesthetic Facial Procedures for Dental Practitioners** from 3 Jun 2013. This is to ensure that dental practitioners are trained and have attained sufficient levels of competency to perform and manage complications when performing such aesthetic procedures.

We have enclosed a copy of the **Guidelines on Aesthetic Facial Procedures for Dental Practitioners (in Annex 1), Notification Form To Perform List A Aesthetic Facial Procedure (Annex 2A) and Notification Form To Perform List B Or Other Aesthetic Facial Procedures (Annex 2B)** for your information.

Dental practitioners who wish to perform procedures that fall within the definition of Aesthetic Practice in these guidelines but are not listed in List A or List B should apply to the SDC in writing.

Aesthetic Practice is not regarded as a specialty or subspecialty. The title of aesthetic oral and maxillofacial surgeon or aesthetic dental surgeon is therefore NOT allowed.

We look forward to your cooperation in ensuring a smooth ‘roll-out’ of these systems and we certainly hope to serve you better with the launch of these e-Services.

Thank you.

Sincerely

Clin A/Prof Patrick Tseng  
Registrar  
Singapore Dental Council

*This letter is computer-generated, hence, no signature is required.*

## **GUIDELINES ON AESTHETIC FACIAL PROCEDURES FOR DENTAL PRACTITIONERS**

### **INTRODUCTION**

1. This document serves as a guideline on aesthetic facial procedures for dental practitioners. It does not include aesthetic dental procedures such as teeth whitening, veneers, etc.
2. This document is based on
  - The Guidelines of Aesthetic Practices for Doctors, issued by the Singapore Medical Council, dated 28 October 2008
  - Consultation and views of the College of Dental Surgeons, Academy of Medicine, Singapore
  - Consultation and views of the Singapore Dental Council

### **DEFINITION OF AESTHETIC PRACTICE**

3. There is currently no internationally accepted definition of Aesthetic Practice. For the purpose of these guidelines, the definition of cosmetic surgery developed by the UK Cosmetic Surgery Interspecialty Committee<sup>1</sup> shall be adopted as the definition for Aesthetic Practice. Hence, Aesthetic Practice is defined as an area of practice involving

“Operations and other procedures that revise or change the appearance, colour, texture, structure, or position of bodily features, which most would consider otherwise to be within the broad range of ‘normal’ for that person.”

### **DESIGNATION OF AESTHETIC PRACTICE – AN AREA OF PRACTICE NOT A SPECIALTY OR SUBSPECIALTY**

4. Aesthetic Practice is not regarded as a specialty or subspecialty. The title of aesthetic oral and maxillofacial surgeon or aesthetic dental surgeon is therefore NOT allowed. All registered dental practitioners are to comply with the Singapore Dental Council’s (SDC) Ethical Code and Guidelines, as well as with Section 31 of the Dental Registration Act when displaying or using any qualification, title, or designation for publicity purposes.
5. A dental practitioner who is an oral and maxillofacial surgeon who provides and performs aesthetic facial procedures will still call himself “oral and maxillofacial surgeon”.

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<sup>1</sup> This definition was also used by the UK Expert Group on the Regulation of Cosmetic Surgery in its report to the Chief Medical Officer .

6. A dental practitioner who is a general dental practitioner who provides and performs aesthetic facial procedures should still call himself a dental surgeon or general dental practitioner.

## **PROFESSIONAL RESPONSIBILITY**

7. The guiding principles in any medical treatment must be it is effective and there is due cognizance given to patient safety. In the context of aesthetic practice, it must go beyond the “Do No Harm” principle and be seen to benefit the patient positively. The dental practitioner must be trained to perform such aesthetic procedures and be able to manage complications that could arise. The oral and maxillofacial surgeon must be trained in aesthetic facial surgery.

8. Under the SDC’s Ethical Code and Guidelines, dental practitioners are to treat patients according to generally accepted methods.<sup>2</sup> A dental practitioner shall not offer to patients, management plans or remedies that are not generally accepted by the profession, except in the context of a formal and approved clinical trial (Ministry of Health, 23 March 2008).<sup>3</sup>

## **CLASSIFICATION OF AESTHETIC TREATMENT AND PROCEDURES**

9. Based on currently available scientific evidence, aesthetic treatment and procedures are classified administratively into:

- List A – Moderate to high level of evidence; and/or  
Local medical expert consensus that procedure is well-established and acceptable
- List B – Low or very low level of evidence; and/or  
Local medical expert consensus that procedure is neither well-established nor acceptable

More information on the levels of evidence is attached at [Appendix](#).

## **LIST A AESTHETIC PRACTICES**

10. This list reflects the aesthetic treatment and procedures that are supported by moderate to high level of scientific evidence and/or have local dental expert consensus that the procedures are well-established and acceptable. They are grouped into non-invasive, minimally invasive, and invasive.

### Non invasive (includes but is not limited to) :

- Chemical peels
- Microdermabrasion
- Lasers (Medical)
- Intense pulsed light
- Radiofrequency, Infrared and other devices e.g. for skin tightening procedures
- Photodynamic / Photopneumatic therapy
- External Lypolysis (heat / ultrasound)

Minimally invasive (includes but is not limited to) :

- Botulinum toxin injection
- Filler injection
- Sclerotherapy
- Thread lifts
- Laser (vascular lesions, skin pigmentation and skin rejuvenation)

Invasive<sup>#</sup>: (to be performed only by oral and maxillofacial surgeons who have the appropriate surgical training)

- Blepharoplasty (including double eyelid)
- Brow lift
- Free fat grafting
- Hair transplantation
- Implants (excluding dental implants)
- Liposuction
- Rhinoplasty
- Rhytidectomy (Facelift)
- Dermabrasion (Mechanical)
- Otoplasty

# In time to come, these procedures may be subject to specific licensing conditions.

11. Table 1 shows the minimum level of competence required of the provider in List A aesthetic treatment and procedures.

TABLE 1. LIST A : Evidenced based aesthetic treatment and procedures

Type of treatment and procedure	Minimum level of competence required *	Appropriate premises at which procedure can be done
<u>Non-invasive</u>		
Chemical or pressurized gas/liquid peels	BDS (COC)	Clinic
Microdermabrasion	Oral and Maxillofacial Surgeon	OT / Clinic
Intense pulsed light (IPL)	Oral and Maxillofacial Surgeon	OT / Clinic
Radiofrequency, Infrared and other light-based devices e.g. for skin tightening or hair removal	Oral and Maxillofacial Surgeon	OT / Clinic
Lasers (non-ablative) for hair removal	Oral and Maxillofacial Surgeon	OT / Clinic
Photodynamic/ photopneumatic therapy	Oral and Maxillofacial Surgeon	OT / Clinic
External lipolysis (heat/ ultrasound)	Oral and Maxillofacial Surgeon	OT / Clinic

Type of treatment and procedure	Minimum level of competence required *	Appropriate premises at which procedure can be done
<u>Minimally invasive</u>		
Botulinum toxin injection**	BDS (COC)	Clinic
Filler injection	BDS (COC)	Clinic
Sclerotherapy	Oral and Maxillofacial Surgeon	OT / Clinic
Thread lifts	Oral and Maxillofacial Surgeon	OT / Clinic
Lasers for - treating vascular lesions and skin pigmentation - skin rejuvenation (eg fractional lasers)	Oral and Maxillofacial Surgeon	OT/ Clinic
<u>Invasive</u>		
Blepharoplasty (including double eyelid)	Oral and Maxillofacial Surgeon	OT / Clinic
Brow lift	Oral and Maxillofacial Surgeon	OT
Free fat grafting	Oral and Maxillofacial Surgeon	OT / Clinic
Hair transplantation	Oral and Maxillofacial Surgeon	OT / Clinic
Implants (excluding dental implants)	Oral and Maxillofacial Surgeon	OT / Clinic
Lasers (ablative eg. CO <sub>2</sub> / YAG) for skin resurfacing	Oral and Maxillofacial Surgeon	OT / Clinic
Liposuction + (traditional/water assisted / VASER / laser)	As per MOH special licensing conditions for liposuction	As per MOH special licensing conditions for liposuction
Rhinoplasty	Oral and Maxillofacial Surgeon	OT / Clinic
Rhytidectomy (facelift)	Oral and Maxillofacial Surgeon	OT
Dermabrasion (mechanical)	Oral and Maxillofacial Surgeon	OT / Clinic
Submental Liposuction	Oral and Maxillofacial Surgeon	OT / Clinic
Otoplasty	Oral and Maxillofacial Surgeon	OT / Clinic

Type of treatment and procedure	Minimum level of competence required *	Appropriate premises at which procedure can be done
<p>COC: Certificate of Competence achieved through attending accredited specialised courses in the respective area of interest, approved and recognised by the SDC.</p> <p>* Minimum level of competence means competence necessary to carry out the procedure and manage the anticipated serious complications.</p> <p>** This does not include treatment for TMD.</p> <p>+ excluding submental liposuction</p> <p>OT/Clinic – As a general principle, procedures requiring local anesthesia and sterile conditions may be performed in a clinic with appropriate facilities and staff. Procedures that require intravenous sedation/ general anesthesia should be performed in OT.</p> <p>'OT' – refers to operating theatres in hospitals and ambulatory surgery centres.</p> <p>'Clinic' – refers to clinics with appropriate facilities and staff. This means that the clinic must be equipped and staffed to a level commensurate with the procedure performed.</p>		

12. Dental practitioners (except oral and maxillofacial surgeons) who perform aesthetic facial procedures must have acquired a certificate (overseas or local training courses) and should submit the List A notification form (together with copies of their certificates) to the SDC to be verified whether this constitutes a certificate of competence (COC). The List A notification form is available on SDC's website.

13. Oral and maxillofacial surgeons who perform aesthetic facial procedures need to submit the List A notification form to the SDC. These oral and maxillofacial surgeons can continue to practice.

14. Dental practitioners are strongly encouraged to engage in a quality framework or peer review and case discussions on a regular basis if they perform or intend to perform aesthetic procedures. Dental practitioners who perform or intend to perform List A aesthetic procedures should do so only in accordance with these guidelines, further directions of the SDC and requirements set by the Ministry of Health (MOH), if any.

## **LIST B AESTHETIC PRACTICES**

15. List B contains aesthetic treatments and procedures that are currently regarded as having low / very low level of evidence and / or being neither well-established nor acceptable. These are:

- (a) Mesotherapy
- (b) Carboxytherapy
- (c) Microneedling dermaroller
- (d) Skin whitening injections
- (e) Stem cell activator protein for skin rejuvenation
- (f) Negative pressure procedures (e.g. Vacustyler); and

- (g) Mechanised massage (eg. “slidestyler”, endermologie” for cellulite treatment)

16. It is recommended that dental practitioners should not perform these procedures.

## **ADMINISTRATION OF EXISTING AND NEW AESTHETIC TREATMENT AND PROCEDURES**

17. Dental practitioners who wish to perform procedures that fall within the definition of Aesthetic Practice in paragraph 3 of these guidelines but are not listed in List A or List B should **apply to the SDC in writing and submit a copy of Certificate of Competence (COC)**. SDC may then decide on the classification of the procedure and / or further dictate how the dental practitioner should proceed. Dental practitioners are advised not to perform any such procedures until the procedures have been classified.

## **COMPLIANCE WITH THESE GUIDELINES**

18. Any dental practitioner who performs any aesthetic procedure that is not in accordance with these guidelines or with any requirements set by the SDC or MOH will be deemed by the dental profession as unethical and bringing disrepute to the profession. Such a dental practitioner may be liable for disciplinary action by the SDC.

## APPENDIX

### Levels of evidence for aesthetic procedures<sup>1</sup>

Level of evidence	Quality of evidence and definitions
High	Further research is very unlikely to change our confidence in the estimate of effect.
Moderate	Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate.
Low	Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate.
Very low	Any estimate of effect is very uncertain.

<sup>1</sup> GRADE Working Group. Grading quality of evidence and strength of recommendations. BMJ 2004;328:1490 ; Guyatt GH et al. GRADE: an emerging consensus on rating quality of evidence and strength of recommendations. BMJ 2008;336:924-6.



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Notification Form No.: \_\_\_\_\_  
(for official use)

**NOTIFICATION FORM TO PERFORM LIST A AESTHETIC FACIAL PROCEDURE**

*Dentists who have started or intend to start performing aesthetic facial procedures from 3 June 2013 must acquired a certificate of competency (overseas or local training courses) and submit this List A Notification Form (together with copies of their certificates) to the SDC for verification whether it could be considered a certificate of competence (COC).*

*Please fill in the required information clearly and use capital letters only. Also to tick \_ the boxes (where appropriate):*

**1. PERSONAL PARTICULARS OF DENTIST**

FULL NAME (NRIC) : \_\_\_\_\_

DCR NUMBER : \_\_\_\_\_

CLINIC'S NAME : \_\_\_\_\_

CLINIC'S ADDRESS : \_\_\_\_\_

RESIDENTIAL ADDRESS : \_\_\_\_\_

TELEPHONE NUMBERS : \_\_\_\_\_ (H) \_\_\_\_\_ (O)  
\_\_\_\_\_ (HP) \_\_\_\_\_ (Fax)

EMAIL ADDRESS : \_\_\_\_\_

**2. INFORMATION ON DENTAL MALPRACTICE INSURANCE**

**Note:** It is recommended that dentists who have been performing aesthetic facial procedures have sufficient and appropriate dental malpractice insurance to safeguard patients' interests.

NAME OF INSURANCE PROVIDER : \_\_\_\_\_

TYPE OF INSURANCE : \_\_\_\_\_

START DATE OF INSURANCE : \_\_\_\_\_

PERIOD OF INSURANCE : \_\_\_\_\_

PREMIUM AMOUNT : \_\_\_\_\_

### 3. DECLARATION TO PERFORM LIST A AESTHETIC TREATMENTS & PROCEDURES

*Please attach with this notification form, a copy of the certificate obtained (overseas or local training), details of training courses, organisers, trainer(s)' name and CV, details of hands-on experience, duration of course, examinations / tests, course fees and details of sponsorship (if sponsored).*

Type of treatment and procedure	Minimum level of competence required *	*Tick	No. of Procedures Performed	Title of Certificate Obtained
<b><u>Non-invasive</u></b>				
Chemical or pressurized gas/liquid peels	BDS (COC)			
Microdermabrasion	Oral and Maxillofacial Surgeon			
Intense pulsed light (IPL)	Oral and Maxillofacial Surgeon			
Radiofrequency, Infrared and other light-based devices e.g. for skin tightening or hair removal	Oral and Maxillofacial Surgeon			
Lasers (non-ablative) for hair removal	Oral and Maxillofacial Surgeon			
Photodynamic/ photopneumatic therapy	Oral and Maxillofacial Surgeon			
External lipolysis (heat/ ultrasound)	Oral and Maxillofacial Surgeon			
<b><u>Minimally invasive</u></b>				
Botulinum toxin injection**	BDS (COC)			
Filler injection	BDS (COC)			
Sclerotherapy	Oral and Maxillofacial Surgeon			
Thread lifts	Oral and Maxillofacial Surgeon			
Lasers for - treating vascular lesions and skin pigmentation - skin rejuvenation (eg fractional lasers)	Oral and Maxillofacial Surgeon			
<b><u>Invasive</u></b>				
Blepharoplasty (including double eyelid)	Oral and Maxillofacial Surgeon			
Brow lift	Oral and Maxillofacial Surgeon			
Free fat grafting	Oral and Maxillofacial Surgeon			
Hair transplantation	Oral and Maxillofacial Surgeon			
Implants (excluding dental implants)	Oral and Maxillofacial Surgeon			

Type of treatment and procedure	Minimum level of competence required *	*Tick	No. of Procedures Performed	Title of Certificate Obtained
Lasers (ablative eg. CO <sub>2</sub> / YAG) for skin resurfacing	Oral and Maxillofacial Surgeon			
Liposuction + (traditional/water assisted / VASER / laser)	As per MOH special licensing conditions for liposuction			
Rhinoplasty	Oral and Maxillofacial Surgeon			
Rhytidectomy (facelift)	Oral and Maxillofacial Surgeon			
Dermabrasion (mechanical)	Oral and Maxillofacial Surgeon			
Submental Liposuction	Oral and Maxillofacial Surgeon			
Otoplasty	Oral and Maxillofacial Surgeon			

COC: Certificate of Competence achieved through attending accredited specialised courses in the respective area of interest, approved and recognised by the SDC.

\* Minimum level of competence means competence necessary to carry out the procedure and manage the anticipated serious complications.

\*\* This does not include treatment for TMD.

+ excluding submental liposuction

OT/Clinic – As a general principle, procedures requiring local anesthesia and sterile conditions may be performed in a clinic with appropriate facilities and staff. Procedures that require intravenous sedation/ general anesthesia should be performed in OT.

'OT' – refers to operating theatres in hospitals and ambulatory surgery centres.

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Notification Form No.: \_\_\_\_\_  
(for official use)

**NOTIFICATION FORM TO PERFORM LIST B OR OTHER AESTHETIC FACIAL PROCEDURES**

*Please use capital letters only.*

**1. PERSONAL PARTICULARS OF DENTIST**

FULL NAME (NRIC) : \_\_\_\_\_

DCR NUMBER : \_\_\_\_\_

CLINIC'S NAME : \_\_\_\_\_

CLINIC'S ADDRESS : \_\_\_\_\_

RESIDENTIAL ADDRESS : \_\_\_\_\_

TELEPHONE NUMBERS : \_\_\_\_\_ (H) \_\_\_\_\_ (O)  
\_\_\_\_\_ (HP) \_\_\_\_\_ (Fax)

EMAIL ADDRESS : \_\_\_\_\_

**2. INFORMATION ON DENTAL MALPRACTICE INSURANCE**

**Note: It is recommended that dentists who have been performing aesthetic facial procedures or intend to do so have sufficient and appropriate dental malpractice insurance to safeguard patients' interests.**

NAME OF INSURANCE PROVIDER : \_\_\_\_\_

TYPE OF INSURANCE : \_\_\_\_\_

START DATE OF INSURANCE : \_\_\_\_\_

PERIOD OF INSURANCE : \_\_\_\_\_

PREMIUM AMOUNT : \_\_\_\_\_

**3. NOTIFICATION TO PERFORM LIST B OR OTHER AESTHETIC FACIAL PROCEDURES**

**(A) Please tick the appropriate box(es):**

**List B**

<input type="checkbox"/>	Mesotherapy
<input type="checkbox"/>	Carboxytherapy
<input type="checkbox"/>	Microneedling dermaroller
<input type="checkbox"/>	Skin whitening injections
<input type="checkbox"/>	Stem cell activator protein for skin rejuvenation
<input type="checkbox"/>	Negative pressure procedures (e.g. Vacustyler); and
<input type="checkbox"/>	Mechanised massage (eg. "slidestyler", endermologie" for cellulite treatment)

**(B) Other aesthetic facial procedure(s) (please specify):**

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**(C) Experience with the Aesthetic Facial Procedure(s) as indicated in 3(A) and 3(B)**

(please tick and fill in the required information accordingly)

Yes, I have been performing the List B / Other Aesthetic Facial Procedure(s) since \_\_\_\_\_ (dd/mm/yyyy).

No, I am intending to provide the List B / Other Aesthetic Facial Procedure(s) with effect from \_\_\_\_\_ (dd/mm/yyyy).

**4. DECLARATION**

I declare that the information provided in this notification form is true and authentic and herein remains unchanged to-date. To the best of my knowledge and belief, I have not withheld any material fact. I understand that my practice may be audited and that I may be required to provide more information.

\_\_\_\_\_  
Signature and Name of Dentist

\_\_\_\_\_  
Date

Please submit your notification form to:

**SINGAPORE DENTAL COUNCIL  
16 College Road #01-01  
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