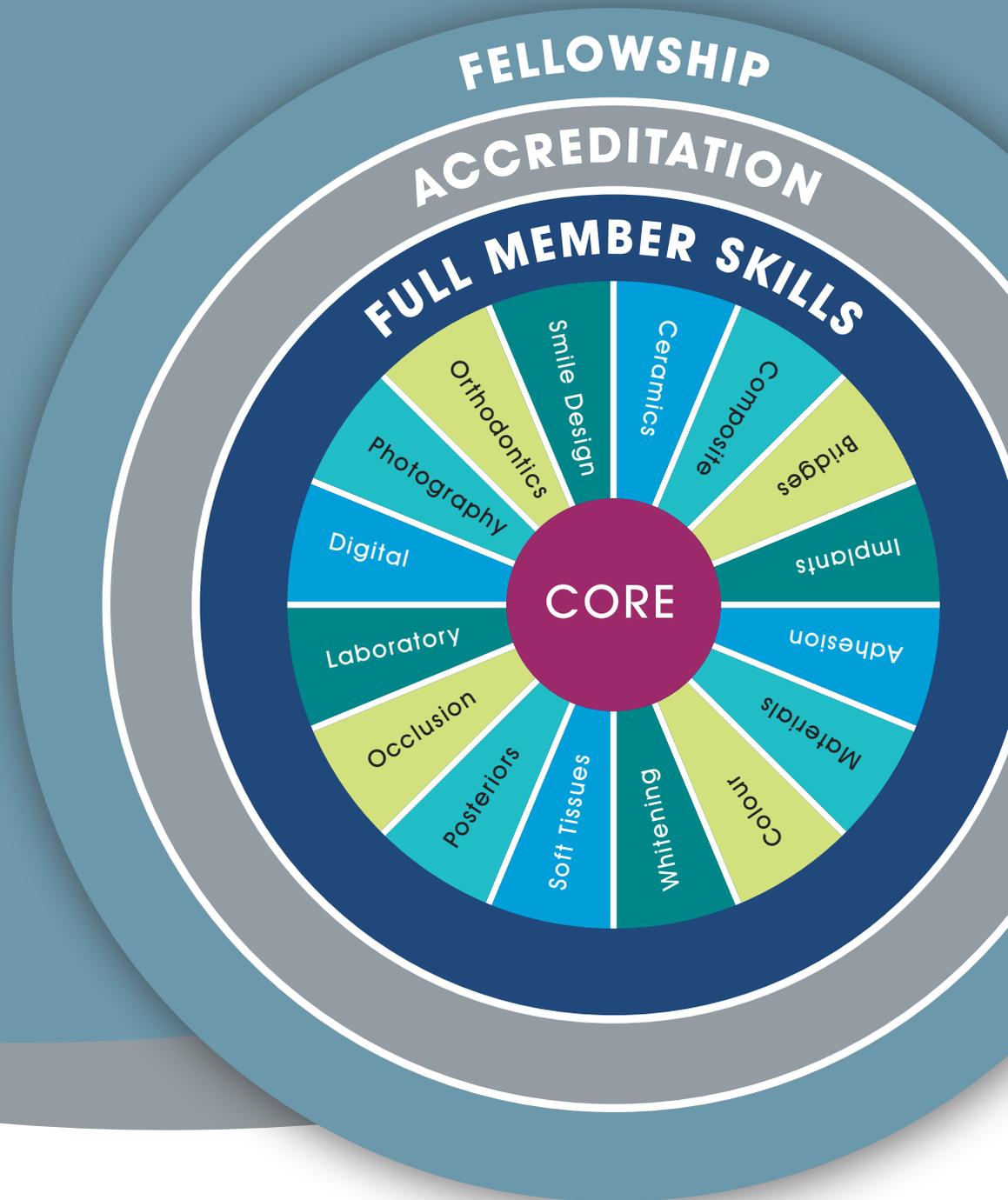


# BACD Accreditation Protocol



British Academy of  
Cosmetic Dentistry

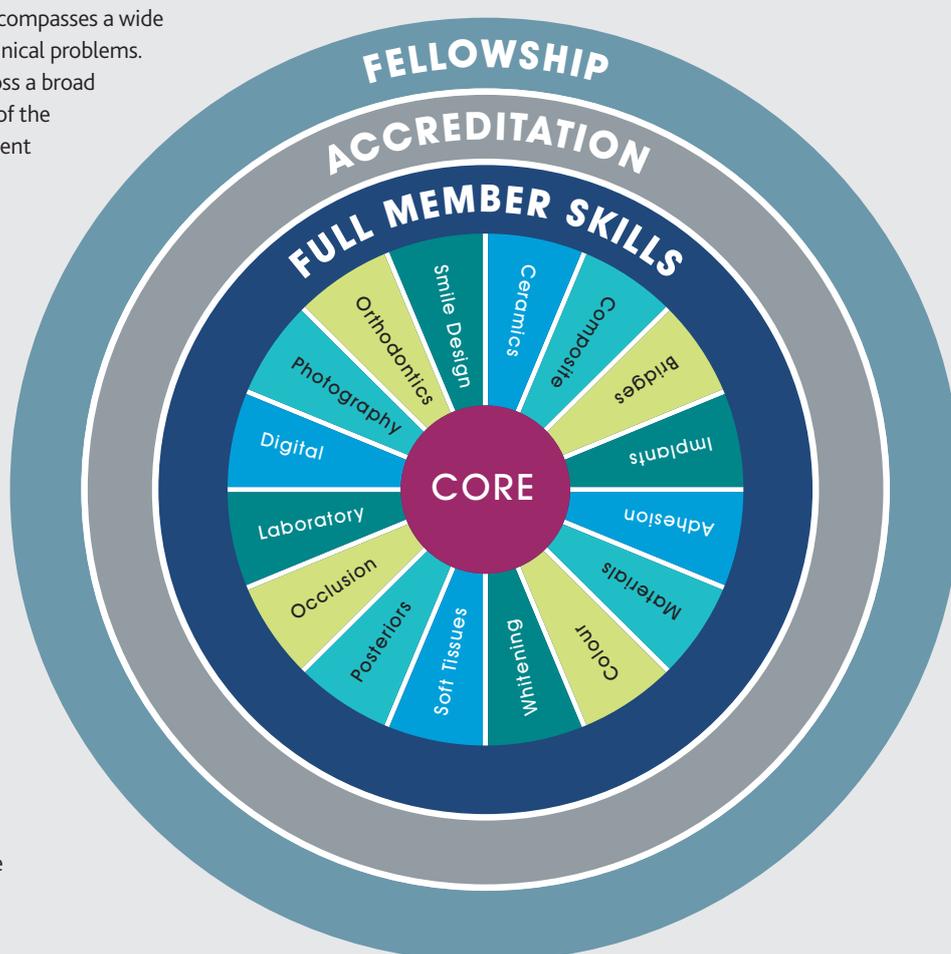
Visit the website [www.bacd.com](http://www.bacd.com)  
for information on how to enter the process

# Aims of BACD Accreditation

The aim of the BACD Accreditation process is to allow dentists to demonstrate that they have the ability to diagnose, plan and execute cosmetic dental treatment of the highest standard, safely, ethically, and competently.

The skill set to be demonstrated encompasses a wide range of commonly encountered clinical problems. Demonstration of competence across a broad base of clinical skills is a core value of the Accreditation process. The assessment process will include demonstration of the ability to gain valid consent for the procedures and prescribe appropriate post-treatment maintenance.

Technicians should be able to demonstrate that they have the ability to plan and produce restorations of the highest standard and be an active member of the dental team delivering cosmetic dentistry through superior communication skills, and knowledge of materials and clinical techniques. The skill set to be demonstrated encompasses a wide range of commonly encountered clinical problems. Demonstration of competence across a broad base of clinical skills is a core value of the Accreditation process.



## Entry to the process

Candidates must be BACD members in good standing.

It is strongly recommended that potential candidates watch the online resources provided by the Credentialing Committee, relating to the process itself and the individual Case Types.

Candidates who achieve a total of **100 points** from the activities listed below are invited to attend a viva examination.

## Stages to becoming an Accredited Member of the BACD

There are three stages to the process:



### STAGE 1:

Clinical case submission / gaining points from other activities



### STAGE 2:

Viva Examination



### STAGE 3:

Maintenance of Accredited Member status

## Submission of clinical cases

At least **80 points** should come from patient case presentations. A variety of clinical case types demonstrating a range of commonly encountered aesthetic challenges may be presented as:

**Full cases:** a complete set of before and after images with a detailed case report.

**Short cases:** a greatly reduced set of before and after images and a short case summary.

**Dentist Candidates must present:**

- One Full case of case type 1 (smile makeover), plus
- At least one of each case types 2, 3, 4 and 5 either as full cases (CT 1, 2, 3, 5) or short cases (CT 1-5) within the limits specified. Submission of Case types 6, 7 & 8 is optional.
- Each patient may only be used for one submission, regardless of other treatment carried out.

**Technician Candidates must present:**

- One Full case of case type 1 (smile makeover), plus
- At least one of each case types 2, 3 and 4 either as full cases (CT 1, 2, 3) or short cases (CT 1-4) within the limits specified.
- Each patient may only be used for one submission, regardless of other treatment carried out.

The required treatment must have been carried out by the candidate working independently. Patients treated as part of any form of "hands on" course, mentored programme, etc., may not be submitted.

## Other activities

Candidates also have the option to participate in other activities for a maximum of **20 points** of the total.

This category encompasses a range of activities where the candidate is sharing their knowledge and experience with members of BACD or the wider dental profession. This category of activities also recognises knowledge gained from approved postgraduate programmes as well as full/active / accredited membership of other clinically focused organisations.

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 1 Smile Makeover

Full (20 pts) / Short (4 pts)

**Major skills assessed through this Case type:**

Smile design, Treatment planning, Dentist-technician communication, treatment delivery.

**Other skills which may be relevant:** Soft tissue management, Occlusal management, Specialist communication if part of the treatment plan (e.g. gingival surgery) was referred out.

The clinical cases suitable for this case type are any treatment which demonstrates the major skills being assessed. This includes, but is not limited to:

- Ceramic smile makeover cases (i.e. veneer or crown cases) treating permanent upper anterior teeth.
- Composite smile makeover cases (i.e. direct composite veneers or edge bonding) treating permanent upper anterior teeth.
- Combination crown and denture cases where strategies such as retentive elements in the crowns were used to hide the denture clasps and make the denture appear as discrete as possible.

- Full-arch implant cases where artificial pink gingival material was used (Misch FP3-type) may be used for this case type.

**Notes about this Case Type**

- Minor orthodontic pre-alignment or periodontal plastic surgery may have been carried out before the restorations were placed but the major change in the smile will result from the restorations.
- The restorative component of the case should be of sufficient complexity for the examination. In the past this case type was represented by 6 or more indirect units, and this remains as a yardstick for the level of clinical complexity required. The credentialing chair will have sole discretion as to whether a case meets the required standard of complexity.
- It is acceptable for the clinical result to have been delivered by more than one clinician, e.g. crown lengthening treatment referred to a colleague. In this instance, the case report must clearly state which aspects of the case were not carried out by the candidate, and how the communication was managed. The case report should emphasise what the Candidate personally did to ensure the desired clinical outcome was achieved.



## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



10 direct composite veneers were used to improve shapes and close small spaces



A combination of orthodontic treatment and 4 direct composite veneers were placed in this example

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



10 porcelain veneers and bleaching were used to improve shapes and alignment.

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 2 Indirect Shade Matching

Full (20 pts) / Short (4 pts)

**Major skills assessed through this Case type:**

Shade matching, Restoration selection, Dentist-technician communication

**Other skills which may be relevant:**

Smile design, Soft tissue management, Occlusal management, Specialist communication if part of the treatment plan (e.g. gingival surgery) was referred out.

Suitable clinical cases for this type include:

- One or two anterior crowns or veneers treating permanent upper incisors with natural teeth adjacent to them. Some cases may require addition of composite resin to adjacent teeth to ensure symmetrical tooth sizes after treatment.

**Notes about this Case Type**

- Upper incisor teeth are ideal for this case type. Candidates wishing to submit lower teeth for this case type should bear in mind that assessment of the quality of the colour match is harder for the examiners if lower anterior teeth are used.



Two veneers were used to mask discolouration and improve shape

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



A single crown was placed on the left lateral incisor and composite was added to the right central incisor to make the teeth symmetrical



Two porcelain veneers were used to restore the central incisors; composite was also added to the incisal edge of the UR2

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 3 Tooth Replacement With Natural Gingival Architecture

Full (20 pts) / Short (4 pts)

**Major skills assessed through this Case type:**

Soft tissue management (implant emergence / pontic site development), support of tissues following extraction or recreation of lost gingival architecture

**Other skills which may be relevant:**

Occlusal management, shade matching, specialist communication if implant placement was referred to a colleague

Suitable clinical cases for this type include:

- Single tooth adhesive or conventional bridges replacing permanent incisor or canine teeth with natural teeth beside;
- Multiple missing teeth including at least one permanent incisor or canine where a bridge was placed.
- Single tooth implants replacing teeth replacing permanent incisor or canine teeth with natural teeth beside.

- Two missing teeth in the aesthetic zone managed with two implants or a single implant and a pontic;
- Multiple implant cases where no artificial pink Material has been used (Misch FP1 type).

**Notes about this Case Type**

- For clarity, FP3 type cases including artificial pink material are not suitable for submission as this case type but may be suitable as a case type 1. Some larger implant cases may also be more suitable as submission as a Case Type 1. In cases of doubt, the decision of the Credentialing Chair shall be final.
- It is acceptable for the clinical result to have been delivered by more than one clinician, e.g. implant placement / ridge augmentation referred to a colleague. In this instance, the case report must clearly state which aspects of the case were not carried out by the candidate, and how the communication was managed. The case report should emphasise what the Candidate personally did to ensure the desired clinical outcome was reached.



A replacement bridge combined with veneers to improve appearance and close spaces

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



An implant was used to replace the UR1 following trauma



Patient has congenitally absent lateral incisors and canines are in lateral incisor position. Following orthodontic treatment implants were placed in the canine sites and veneers used to disguise the natural canines as lateral incisors.

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 4 Posterior Aesthetics

#### Short (4 pts)

##### Major skills assessed through this Case type:

Case selection for direct / indirect restorations, contact point management, creation of natural morphology for direct restorations, material selection and blending of margins for indirect restorations

##### Other skills which may be relevant:

Masking amalgam discolouration, occlusal management, shade matching, lab communication.

Suitable clinical cases for this type include:

- Two or more permanent premolars / molars in the same quadrant requiring treatment. Teeth do not necessarily have to have any previous restorations.
- At least one of the teeth treated should have or require a class II cavity, i.e. at least one interproximal contact point should be restored as part of the treatment. For the avoidance of doubt, this means that at least one contact must be restored in the treatment presented – e.g. a disto-occlusal restoration with no adjacent tooth contact does not fulfil the requirement if it is the only class II restoration in the case presented.
- All teeth may be treated directly, indirectly or a combination. The case report should justify the clinical decision made for each tooth.



A combination of direct and indirect restorations was used to replace old amalgam restorations

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



Direct resin restorations to replace old amalgams



Direct resin restorations to replace old amalgams



3 ceramic inlays were used to replace old amalgams and address cracks within the teeth

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 5 Complex Direct Composite Bonding

Full (20 pts) / Short (4 pts): Dentist Only

**Major skills assessed through this Case type:**

Direct composite skills – colour matching, morphology, blending margins

**Other skills which may be relevant:**

Soft tissue skills if diastema closure carried out, occlusal management.

Suitable clinical cases for this type include:

- One class IV restoration treating permanent incisors where at least 20% of the coronal tooth tissue needs to be restored;
- Multiple class IV restorations treating permanent anterior teeth including at least one incisor where at least 20% of the coronal tooth tissue needs to be restored;
- Disguising of peg shaped lateral incisor(s) with composite resin;
- Diastema closure treating permanent incisors where the diastema is at least 2mm wide;

- Use of composite resin to close black triangles between at least two teeth following periodontal disease or orthodontic treatment;

**Notes about this Case Type**

- Special attention will be given to gingival health for diastema closure / black triangle cases.
- It is strongly recommended that diastema closure / black triangle cases are photographed after sufficient healing time has elapsed following placement of the composite.
- Some diastema closure / black triangle cases may require a post op radiograph which should be submitted if taken.
- For some cases, minor orthodontic pre-alignment may have been carried out before the restorations were placed but the major change in the smile will result from the restorations.
- Candidates are recommended to treat upper anterior teeth for this case type.
- The degree of change to the smile may mean that some composite bonding cases will be more suitable for submission as Case Type 1. In cases of doubt, the decision of the Credentialing Chair shall be final.



A class IV composite was placed following trauma

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



A class IV composite was placed following trauma



A class IV composite was placed following trauma

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES



A combination of internal bleaching and direct composite resin was used here.

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Types for BACD Accreditation

### Case Type 6 Periodontal Plastic Surgery

#### Short (4 pts): Dentist Only

##### Major skills assessed through this Case type:

Soft tissue management skills

Clinical cases for this type would typically be:

- Crown lengthening / gingival grafting / ridge augmentation, where carried out alone within the canine-canine zone.
- It is strongly recommended that post-treatment images are taken after sufficient healing time has elapsed following the procedure.

### Case Type 7 Minimally Invasive Techniques

#### Short (2pts): Dentist Only

##### Major skills assessed through this Case type: Minimal invasive management of discolouration

##### Other skills which may be relevant:

Clinical cases for this type would typically be:

- Cases treating one or more anterior teeth using microabrasion
- Cases treating one or more anterior teeth using resin infiltration
- Cases using a combination of the above with or without air / macro-abrasion

### Case Type 8 Complex Whitening

#### Short (2 pts): Dentist Only

##### Major skills assessed through this Case type: Complex whitening, typically involving non-standard discolouration

##### Other skills which may be relevant:

Clinical cases for this type would typically be:

- Cases treating a single dark anterior tooth, with or without bleaching of other teeth to match
- Cases treating significant generalised discolouration, e.g. tetracycline staining

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Submission

### FULL CASES

20 points each

At a minimum, all candidates must present at least one case type 1 as a Full case.

Note that after 30th April 2022, CT4 (posterior aesthetics) can only be submitted as a Short case.

### Case Types 1, 2, 3 & 5

The Candidate will submit:

- 15 before and 15 after photographs in jpeg format
- Pre-treatment radiograph(s) appropriate for the treatment presented
- Post-treatment radiographs of implants after restoration
- Other Post-treatment radiographs where clinically appropriate
- Before and after images loaded into the PowerPoint or Keynote exam template
- A Case Report of 1500-2500 words in Microsoft Word format including references
- After images should also be available in RAW format if requested by the Examiners – see note below on Verification of Cases.
- It is strongly recommended that all photographs to be taken with either a ring or a "naked" twin flash i.e. no bouncers, soft boxes, or diffused light. So as not to disadvantage candidates with cases in progress, submissions with images taken under diffused light sources will be accepted until 31st December 2023. From 1st January 2024, all submitted photographs to be taken with either a ring or a "naked" twin flash.



Anterior smile view  
(1:3 on most digital cameras)



Right smile view  
(1:3 on most digital cameras)



Left smile view  
(1:3 on most digital cameras)



Full face  
(close to infinity on most macro lenses)



Anterior retracted view, teeth parted  
(1:3 on most digital cameras)



Right retracted view, teeth parted  
(1:3 on most digital cameras)



Left retracted view, teeth parted  
(1:3 on most digital cameras)



Upper occlusal view  
(1:3 on most digital cameras)



Anterior retracted view, teeth in occlusion  
(1:3 on most digital cameras)



Right retracted view, teeth in occlusion  
(1:3 on most digital cameras)



Left retracted view, teeth in occlusion  
(1:3 on most digital cameras)



Lower occlusal view  
(1:3 on most digital cameras)



Anterior closeup view  
(1:1.5 on most digital cameras)



Right closeup view  
(1:1.5 on most digital cameras)



Left closeup view  
(1:1.5 on most digital cameras)

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Submission

### SHORT CASES

#### 2 - 4 points each

Candidates may submit any of the following Case Types in any combination, subject to the following limits:

- A maximum of 40 points may be gained from Short Case Type 1 submissions. This is in addition to the 20 points from the compulsory Full Case CT1 above.
- A maximum of 20 points may be gained from Short Case Type 2 submissions
- A maximum of 20 points may be gained from Short Case Type 3 submissions
- A maximum of 20 points may be gained from Short Case Type 4 submissions
- A maximum of 20 points may be gained from Short Case Type 5 submissions
- A maximum of 20 points may be gained from Short Case Type 6 submissions
- A maximum of 10 points may be gained from Short Case Type 7 submissions
- A maximum of 10 points may be gained from Short Case Type 8 submissions

From 1st January 2024, all photographs to be taken with either a ring flash or a "naked" twin flash i.e. no bouncers, soft boxes, or diffused light.

### Case Types 1, 2, 5, 6, & 8

#### The candidate will submit

- 4 photos in jpeg format: 2 before & 2 after photos
- Pre-treatment radiograph(s) appropriate for the treatment presented
- a 500-word (i.e. 1-2 pages) case summary, no references needed.



Anterior smile view  
(1:3 on most digital cameras)



Anterior retracted view, teeth parted  
(1:3 on most digital cameras)

### Case Types 3 & 6

#### The candidate will submit

- 8 photos: 4 before / 4 after photos). Lips must be sufficiently well retracted to show gingivae and emergence profiles in all retracted shots.
- Pre-treatment radiograph(s) appropriate for the treatment presented
- Post-treatment radiographs of implants after restoration
- a 500-word (i.e. 1-2 pages) case summary, no references needed.



Anterior smile view  
(1:3 on most digital cameras)



Anterior retracted view, teeth parted  
(1:3 on most digital cameras)



Right retracted view, teeth parted  
(1:3 on most digital cameras)



Left retracted view, teeth parted  
(1:3 on most digital cameras)

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Case Submission

### Case Type 4

#### The candidate will submit

- a. 6 photos in jpeg format: 2 before / 2 after photos of the quadrant & direct / indirect buccal views
- b. Pre-treatment radiograph(s) appropriate for the treatment presented
- c. a 500-word (i.e. 1-2 pages) case summary, no references needed.

#### 1. Treated arch: one of the following, as appropriate:



Upper occlusal view  
(1:3 on most digital cameras)



Lower occlusal view  
(1:3 on most digital cameras)

#### 2. Treated side: one of the following, as appropriate:



Right retracted view, teeth parted  
(1:3 on most digital cameras)



Left retracted view, teeth parted  
(1:3 on most digital cameras)

#### 3. Quadrant shot: one of the following, as appropriate:



Upper left quadrant view, teeth parted  
(1:1.5 on most digital cameras)



Lower left quadrant view, teeth parted  
(1:1.5 on most digital cameras)



Upper right quadrant view, teeth parted  
(1:1.5 on most digital cameras)



Lower right quadrant view, teeth parted  
(1:1.5 on most digital cameras)

### Case Type 7

#### The candidate will submit

- a. 6 photos in jpeg format: 2 before & 2 after photos plus technique shots if a resin infiltration case is being presented.
- b. Pre-treatment radiograph(s) appropriate for the treatment presented
- c. a 500-word (i.e. 1-2 pages) case summary, no references needed.



Anterior smile view  
(1:3 on most digital cameras)



Anterior retracted view, teeth parted  
(1:3 on most digital cameras)

#### Additional images for resin infiltration (ICON) cases:



Dehydrated photo after etching



Image showing wet ethanol (ICON dry) in place

### Radiographic Documentation

**Clinically appropriate Pre-operative radiographs must be submitted for Case types 1, 2, 3, 4, 5, and 6.**

For Case Type 3, pre-operative and post-restorative radiographs are required if an implant has been placed. Radiographs must be of diagnostic quality and clearly show the implant site and the interface between the implant and the restoration.

For case type 8, pre-treatment radiographs are only required if they were taken to assess a single dark tooth prior to whitening.

If radiographs were taken for a Case Type 7, they should be submitted but it is recognised that there may be many clinical situations where pre-treatment radiographs would not be appropriate for the treatments included in this case type.

Other clinically appropriate post-treatment radiographs that were taken during treatment should be submitted. In this context, "clinically appropriate" means that radiographs which would normally be taken as part of treatment outside the examination setting should be taken and submitted. Additional radiographs should not be taken solely for the purposes of examination submission.

Digital radiographs should be exported in jpeg or TIFF format from the radiograph software and incorporated into the presentation. Film radiographs should be scanned (or photographed on a light box) prior to incorporation.

### Submission of Additional Photographs (Technique shots)

**Candidates may submit additional material for additional credit. These could include some or all of the following:**

- Treatment planning workup – digital planning / design, waxups, virtual setups
- Orthodontic treatment stages
- Photographs of lab stages (restorations being designed with CAD CAM and / or being fabricated on plaster or printed models, layered / stained, glazed etc)
- Tooth preparations
- Temporary restorations
- Models / scan of preps / adjusted temporary restorations
- Videos showing lip phonetics
- Additional standard photographic views (for Short cases only)

Note that **none** of the above items are a substitute for the required material for case submission. In other words, items from the above list will not make up for missing case photographs.

Additional images should be added to the case presentation template. Original files should also be submitted in jpeg format, in a similar way to the other case photographs. It is the candidate's responsibility to ensure that the material is presented in an organised manner and that all files can be opened easily by the examiners.

Additional credit is at the discretion of the Credentialing Chair, whose decision in all matters is final.

In general, submission of additional material will gain an extra 5 points for a Full case submission and an additional 2 points for a Short case submission.

## Guidance on Writing Case Reports

- Candidates should submit the case report in Microsoft Word or Pages format.
- Patients should be identified by their initials only.
- For all case reports, Candidates should demonstrate how they have kept invasiveness to a minimum.
- Candidates should not embed photographs into the Word file. They should be submitted separately.
- Candidates should avoid embedding their name in the case reports as marking is carried out anonymously.
- The level of detail should allow the examiners to understand what treatment was carried out and why.

### Full cases

#### Suggested structure for Dentist candidates

- Recommended length: between 1500 and 2500 words
- Bullet point summary of treatment provided
- Introduction and main complaint
- History - medical and dental
- Examination findings
- Diagnosis and possible treatment options
- Details of discussion with patient and rationale for treatment selected
- Description of detailed treatment planning
- Description of clinical stages of treatment including products used (not exhaustive armamentarium)
- References to literature pertaining to the treatment prescribed

#### Suggested structure for Technician candidates

- Recommended length: between 1500 and 2500 words
- Bullet point summary of treatment provided
- Introduction and patient's main complaint
- Summary of clinical information: medical and dental history, diagnosis, treatment plan and treatment carried out
- Description of technical aspects of treatment:
  - o Description of preparation design
  - o Copy of lab prescription including shading diagram
  - o Discussion of material chosen and reasons for choosing it
  - o Description of production of model
  - o Description of design and production of framework or ceramic patterns / coping(s)
  - o Description of finishing and layering of ceramic
- References to literature pertaining to the treatment prescribed

### Short cases

- For a Short case, a 500-word summary is required. The level of detail should allow the examiners to understand what treatment was carried out and why.
- References are not needed for Short case reports.

### Mechanism for Case Submission

Candidates should contact BACD Central Office before submission of any cases for advice on how to submit their material.

**Preferred method for submission:**

Use of Dropbox, WeTransfer or similar.

**Secondary method:**

Placing all material onto a memory stick and positing it to BACD Central Office;

### General Comments on Marking Policy

**All treatment presented must be of a high standard and uphold with the Academy's overall mission to promote ethical cosmetic dentistry. Patients must have been treated in an appropriately conservative manner, in line with prevailing clinical opinion within the profession as a whole.**

It is strongly recommended that Candidates allow sufficient time for maturation of soft tissues around restorations before taking photographs for case submission.

Candidates should be aware that all treatment carried out may be assessed by the examiners if it is visible in the photographs submitted. All treatment carried out should be of a suitably high standard, not just the required items for a particular case submission.

Similarly, Candidates should establish oral health prior to carrying out elective aesthetic treatment. Needed treatment which appears to have been omitted may be a concern for the examiners.

This issue can cause a lot of confusion and as with any clinical situation, there are no black-and-white rules. Whilst the marking scheme is weighted towards the skills being assessed by the relevant Case Type, in case of doubt the Credentialing Chair will have final authority on the significance of any issues raised by the Examiners in determining whether a submission will be successful or not.

Where especially complex or specialist treatment has been carried out, the Examiners reserve the right to seek appropriate external opinions from suitably qualified persons to assist them in reaching a decision on the outcome of a clinical case submission.

### Verification of cases

**The examiners reserve the right to request submission of additional photographs for any reason, including but not limited to, verification of authenticity of images or better assessment of the treatment presented.**

The BACD knows that few would resort to unethical behaviour as altering images. However in order to protect the integrity of the Accreditation process, at the examiners' sole discretion, candidates may be asked to submit material for case verification. On the request of the examiners the candidate should produce an additional set of "After" photographs along with the associated RAW format files.

Alternatively, if such material is unavailable, the candidate may present the patient in person to a group of examiners (at the candidate's expense) in a location specified by the examiners.

Where verification materials are requested, they must be supplied within 28 days, or arrangements made for personal presentation, or the candidate will be deemed to have withdrawn the case.

# STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

## Other activities

**Maximum 20 points total from any / all of this list**

We recognise that there are many ways of demonstrating competence and also additional ways of contributing to the professional community as a whole. Therefore a proportion of the points needed to achieve Accredited member status may be gained in one or more of the following ways:

ITEM	POINTS	MAX POINTS
<b>Presentation of lectures / workshops at BACD Conference / Study groups or BACD webinars</b>	2 pts / CPD hr	Max 10 pts total
<ul style="list-style-type: none"> <li>• Activity must be within 3 years of date of requesting credit. Candidates should submit a request in writing to the BACD Executive Administrator, who will check against the records of events held.</li> <li>• Where a lecture was given by more than one presenter, the Credentialing Chair will have final authority on how much credit is awarded to each speaker.</li> </ul>		
<b>Presentation of independent lectures at other cosmetic dentistry events</b>	1 pt / CPD hr	Max 5 pts total
<ul style="list-style-type: none"> <li>• Activity must be within 3 years of date of requesting credit. The event should meet BACD's educational criteria.</li> <li>• Candidates should submit proof of the activity (e.g. a copy of the event programme) and other details to the Credentialing Chair. The decision of the Chair as to whether the event meets BACD's Educational Criteria or not is final.</li> <li>• Where a lecture was given by more than one presenter, the Credentialing Chair will have final authority on how much credit is awarded to each speaker.</li> </ul>		
<b>Presentation of lectures / courses on behalf of a company</b>	0.5 pt / CPD hr	Max 5 pts total
<ul style="list-style-type: none"> <li>• Activity must be within 3 years of date of requesting credit. The event should meet BACD's educational criteria.</li> <li>• Candidates should submit proof of the activity (e.g. a copy of the event programme) and other details to the Credentialing Chair. The decision of the Chair as to whether the event meets BACD's Educational Criteria or not is final.</li> <li>• Where a lecture was given by more than one presenter, the Credentialing Chair will have final authority on how much credit is awarded to each speaker.</li> </ul>		
<b>Clinical articles published in IJCD</b>	5 points each	Max 10 pts total
<ul style="list-style-type: none"> <li>• Candidates should submit a request in writing to the BACD Executive Administrator, who will check the journal.</li> <li>• Case report articles based solely on a successful Accreditation Full Case submission may not be used for additional credit in this manner.</li> </ul>		
<b>Articles published in other peer-reviewed journals on a topic of cosmetic dentistry</b>	5 points each	Max 10 pts total
<ul style="list-style-type: none"> <li>• Candidates should submit a copy of the article in electronic form to the Credentialing Chair. The decision of the Chair as to whether the publication meets the required standard or not is final.</li> </ul>		
<b>Articles published in other non-peer-reviewed journals on a topic of cosmetic dentistry</b>	2 points each	Max 10 pts total
<ul style="list-style-type: none"> <li>• The decision of the Chair as to whether the publication meets the required standard or not is final.</li> </ul>		

## STAGE 1: CASE SUBMISSION / OTHER ACTIVITIES

ITEM	POINTS	MAX POINTS
<b>Essays on specified topics</b>	5 points each	Max 10 pts total
<ul style="list-style-type: none"> <li>Candidates should contact the BACD Executive Administrator for details of topics available.</li> </ul>		
<b>Accreditation / Active membership of another approved organisation</b>	20 points	
<ul style="list-style-type: none"> <li>This kind of membership equates to a level of where the Candidate will have presented clinical work to the other organisation in some way. Organisations include, but are not limited to, AACD, EAED, SCAD, BAAD.</li> <li>Candidates should submit proof of their membership status to the Credentialing Chair, who may request submission of the presented material. The decision of the Chair as to whether the other organisation of the nature of the submission meets the required standard or not is final.</li> </ul>		
<b>Approved PGDip / MSc aesthetic (restorative) dentistry</b>	20 points	
<ul style="list-style-type: none"> <li>Candidates should submit a copy of the programme syllabus and proof of their completion to the Credentialing chair, who may request additional information as he/she sees fit. The decision of the Chair as to whether the programme meets the required standard or not is final.</li> </ul>		

## STAGE 2: VIVA EXAMINATION

Once the candidate has attained the correct number of points, he/she will be invited to take the final viva examination. This will consist of a review of some or all of the candidate's clinical cases and a discussion. Candidates will present their clinical cases to the examiners and will answer questions about the treatment methods chosen and the materials used, alternative treatments etc.

The viva for Technician candidates will have an emphasis on technical aspects, communication with a dentist carrying out the treatment and material choices.

All candidates should note that the discussion may extend to all aspects of aesthetic and restorative dentistry and not be limited to the treatment presented.

### Outcome of Viva Examination

The Candidate must be a BACD Full member in good standing at the time they are invited to attend the Viva Examination.

The examiners will meet following the viva examination and agree on a pass/fail mark for the candidate.

Once the viva examination has been passed, the candidate automatically becomes an Accredited member of the Academy with the associated rights and privileges attaining thereto.

### Presentation of Accreditation plaque

Candidates who have passed the accreditation will have their plaques presented to them during the subsequent BACD Annual conference.

### Announcement of Accredited status

Accredited members will be permitted to make the statement "Accredited Member of the British Academy of Cosmetic Dentistry" in any professional communication and will be entitled to use an approved version of the BACD logo for the same purpose.

## STAGE 3: MAINTENANCE OF ACCREDITED STATUS

### Maintenance of Accredited Status

The aim of these requirements is to ensure that Accredited members stay up to date with evolving standards and treatment methods.

To maintain Accredited member status, members must:

1. Maintain BACD Full member status. This includes good financial standing and on-going CPD requirements.
2. During a rolling 3-year cycle, Accredited members must achieve **30 points** from the following:
  - a. attend the BACD Annual Conference at least once every three years: **10 points**
  - b. attend BACD Examiners training workshop at least once every three years: **5 points**
  - c. serve as an Accreditation examiner, examining at least 2 cases per year: **5 points per case to a max of 15**
  - d. write an article for the IJCD: **5 points per article to a max of 15**
  - e. submit a Short case of any case type, to be examined and passed in the normal way: **5 points per case to a max of 15**
  - f. give a lecture / workshop for the BACD Conference or a BACD Study group or BACD Webinar: **2 points per CPD hour, max of 15**





British Academy of  
Cosmetic Dentistry