# Curriculum guidelines and standards for dental laser education

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# ABSTRACT

This paper reports on the revision of the Curriculum Guidelines and Standards for Dental Laser Education. The original Guidelines were developed at a workshop at the University of California, San Francisco School of Dentistry in 1992, presented at the January 1993 SPIE symposium, and published in SPIE Proceedings Vol. 1880. They have since been endorsed and implemented worldwide. The Guidelines define the standard of education for practitioners who use lasers, with a goal to enhance of student and practitioner understanding and knowledge of laser technology applications in dentistry. Four levels of education are outlined. Introductory Courses are designed to provide general information on lasers in dentistry. They are informational, without an assessment of the student's proficiency in laser use. Standard Proficiency, Advanced Proficiency, and Educator Courses have specific education with didactic, laboratory, and clinical exercises to be satisfactorily completed before using lasers clinically. Advanced Proficiency Courses increase this level of education to include a clinical case study requirement. Educator Courses define requirements for instructors of laser education in dentistry. Revision of the Guidelines ensures that they keep pace with technological developments and research findings.

Keywords: curriculum, laser education, dentistry

#### **1. STATEMENT OF PURPOSE**

This document provides guidelines to assure safe and efficacious use of lasers for the health and welfare of the patient. It establishes the standards of education in the use of lasers in dentistry and defines standards for the demonstration of competency. It is intended to provide guidance to practitioners and educators and to reassure the public on the issues of education, competency, and quality of care in the use of laser in dentistry. These Guidelines do not restrict, limit, or regulate the application of this technology. The curriculum outlined in this document is the standard of education in laser dentistry.

# **2. INTRODUCTION**

The curriculum guidelines for dental laser education were developed through a consensus process with members from dental laser organizations, academia, industry and private practice. The original document was developed at a workshop on the development of standards for dental laser education held at the University of California, San Francisco on July 25 and 26, 1992. It was revised most recently on October 3, 1998 at that same location with concurrent laser instructor certification. The purpose of these workshops was to provide the mechanism for the development and revision of the standard of education for the use of lasers in dentistry.

The document was developed using recommendations from a wide range of information that exists on the use of lasers and are appropriately referenced. The format of this document is in the style of curriculum guidelines as published by the American Association of Dental Schools. As a matter of course these guidelines are circulated among dental laser educators, researchers, practitioners, organized dentistry and members of industry. This document is widely distributed and updated periodically. Questions or suggestions may be addressed to the authors of this document.

Laser applications in dentistry have specific indications and contraindications for use in treatment. A working knowledge of dental laser basic, applied, and clinical science is essential.

The manufacture, marketing, and distribution of dental lasers are controlled throughout the world by various regulatory agencies; e.g., in the United States the U.S. Food and Drug Administration; in Germany, ordinances such as MPG et al. as well as regulatories given by the Berufsgenossenschaften (VBG); and in Brazil, by the Associacao Brasileira de Normas Tecnicas (ABNT). These regulatory bodies control dental laser manufacturers but do not regulate the dental practitioner in the use of

these devices. Hospitals and institutions have their own credentialing programs for use of specific devices in their facilities. The use of dental lasers does <u>not</u> comprise the basis for a dental specialty, but it does require a level of education for their safe use in dentistry.

## **3. EDUCATIONAL STRUCTURE**

The goal of these curriculum guidelines and standards of education is to enhance understanding and knowledge of the application of laser technology in dentistry.

There are four courses of dental laser education outlined in this document. Introductory Course offers general information but does not assess the enrollee's proficiency. Standard Proficiency Course offers a level of education including instruction, hands-on exercises, and examination. This course must be satisfactorily completed before independently using lasers. Advanced Proficiency Course offers a level of education including instruction, hands-on exercises, clinical case studies and examination. Educator Course offers instruction for teaching lasers in dentistry.

#### **4. EDUCATIONAL PARAMETERS**

Practitioners must have training with demonstrated proficiency, knowledge and skill for use of lasers in dentistry. Training must include specific objectives and requirements described below, with demonstration of knowledge and proficiency. Competency evaluation should include both written and clinical examination. Evaluation of competency of practitioners must be assessed by a trained educator.

Practitioner use of lasers must be limited to those devices in which the manufacturer has met the regulatory requirements such as Center for Devices and Radiological Health of the U.S. Food and Drug Administration for that product. Manufacturers must meet the requirements and regulations of the Food and Drug Administration. Manufacturers should provide both an operators manual and recommended clinical usage, supported by preclinical and clinical research. Practitioners should use these devices with a sound knowledge of indications and contraindications and within the scope of the practice based on competence as established by education, training and experience. Dental auxiliaries within their scope of education, training and experience must also have specific safety training and demonstrated proficiency in proper laser safety.

Practitioners must have a knowledge of basic laser physics, laser-tissue interaction, and specific laser safety requirements for the dental treatment area. They must also have a knowledge of the device and basic laser and biologic interactions including the safety recommendations outlined in the American National Standard for the Safe Use of Lasers and American National Standard for the Safe Use of Lasers in Health Care Facilities. And they must have a knowledge of laser properties including wavelength, absorption, reflection, transmission, scatter, emission modes, delivery systems, beam characteristics and divergence. Practitioners must furthermore demonstrate knowledge of photothermal, photochemical, photoacoustic, and biostimulation events, tissue absorption characteristics, and the effects of wavelength, spot size, power, exposure duration, energy density, and repetition rate.

Practitioners must know and demonstrate the treatment objective, such as ablation, coagulation, and excision. They must have demonstrated knowledge of appropriate settings to attain specific treatment outcomes supported by research. And they must be able to recognize successful treatment outcomes, manage adverse effects, and must have knowledge of the adverse effect reporting mechanism.

It is the responsibility of the dental practitioner to follow the standard of education as defined by these guidelines.

# **5. COURSE OUTLINES**

#### **5.1 Introductory Course**

Introductory courses are intended to be educational, informational and primarily didactic. This level of education is intended for anyone interested in lasers in dentistry.

- I. Introduction
  - A. Self-graded pre-test (optional)
- Fundamentals of lasers II.
  - A. Production of laser light
    - Quantum theory 1.
    - 2. Stimulated emission
  - B. Electromagnetic spectrum
    - Regions and boundaries 1.
      - a. Ultraviolet (1 - 400 nm)
      - Visible (400 750 nm)b.
      - Infrared (750+ nm) c.
    - 2. Laser wavelengths
  - C. Characteristics of laser light
    - Spatial and temporal 1.
      - coherency
    - 2. Monochromaticity
    - 3. Collimation
  - D. Laser requirements, delivery systems and emission modes
    - 1. Laser cavity
      - Active medium a.
      - Pumping mechanism b.
      - Optical resonator c.
    - 2. Delivery systems
      - fixed lens and mirror a.
      - articulated arm b.
      - Waveguide c.
      - Optical fiber d.
    - 3. Emission mode
      - Continuous wave a.
      - Chopped or gated b.
      - Pulsed c.
  - III. Review of types of lasers, delivery systems, special device characteristics, and clinical applications in dentistry Laser types B. Device characteristics A.
    - 1. Argon laser
    - 2. CO<sub>2</sub> laser
    - 3. Diode lasers
    - 4. Erbium lasers
    - 5. Holmium laser
    - 6. Neodymium lasers
    - 7. Other lasers

- E. Summary of laser effects on tissue
  - Reflection, scattering, transmission, 1. absorption
    - 2. Photothermal effects
      - a. Warming
      - b. Coagulation, tissue shrinkage, hemostasis
      - Vaporization, ablation c.
      - Carbonization d.
    - 3. Photoacoustic effect
      - Disruption a.
    - 4. Photochemical effects
      - a. Stimulation of chemical reactions
      - b. Breaking of molecular bonds
      - Fluorescence
    - Biostimulation 6.

5.

Photodynamic therapy a.

- - 1. Wavelength
    - Beam diameter (spot size) 2.
  - 3. Power
  - 4. Energy density
  - Repetition rate (if applicable) 5.
  - 6. Exposure duration
  - 7. Total energy

- C. Clinical applications
  - 1. Intraoral soft tissue surgery
  - 2. Treatment of apththous ulcers
  - 3. Sulcular debridement (soft tissue curettage)
  - 4. Composite curing
  - 5. Tooth shade lightening
  - 6. Caries removal

# IV. Laser safety

- A. Standards, organizations, and regulatory requirements
  - 1. U.S. FDA Center for Devices and Radiological Health (CDRH)
  - 2. American National Standards Institute (ANSI)
  - 3. U.S. Occupational Safety and Health Administration (OSHA)
  - 4. State and local regulatory agencies
- B. Laser safety officer
- C. Laser safety mechanisms
- D. Adverse effects reporting mechanism
- E. Eye and tissue protection

# V. Infection control

- A. Identification and disposal of biologic hazards
- B. Plume hazards and precautions
- C. Sterilization

VII. Post-test examination (optional)

## 5.2 Standard Proficiency Course

The curriculum for basic level of education in laser usage includes specific device instruction with demonstrated proficiency in didactic and hands-on knowledge. Hands-on exercises include demonstration and clinical simulation with appropriate oral tissues (e.g. cow or pig jaws), and must meet participation course guidelines. Practitioners must demonstrate competency by written and clinical simulation and examination in the safety aspects of laser use prior to using lasers on patients. This is the level of education that defines the standard of care. Dental auxiliaries are encouraged to demonstrate competency in the safety aspects of laser use. Industry representatives, researchers, and others who demonstrate and operate lasers must demonstrate competency by written and clinical simulation and examination in the safety aspects of laser use.

- I. Introduction
  - A. Self-graded pre-test (optional)

## II. Fundamentals of lasers

- A. Production of laser light
  - 1. Quantum theory
  - 2. Stimulated emission

- 7. Cavity preparation
  - 8. Enamel modification
  - 9. Illumination for caries detection
  - 10. Illumination for endodontic orifice location
  - 11. Removal of coronal pulp
  - 12. Experimental applications
- F. Environment
  - 1. Proper warning sign posted
  - 2. Limited access
  - 3. Reflective surfaces minimized
- G. High volume evacuation present
- H. Laser external cooling system (if applicable)
- I. Electrical components (cords and footswitch)
- J. Gases
- K. Training
- L. Laser use documentation

- B. Electromagnetic spectrum
  - 1. Regions and boundaries
    - a. Ultraviolet (1 400 nm)
    - b. Visible (400 750 nm)
    - c. Infrared (750+ nm)
  - 2. Laser wavelengths

- C. Characteristics of laser light
  - Spatial and temporal beam 1. coherency
  - Monochromaticity 2.
  - 3. Collimation
- Laser requirements, delivery systems and D. emission modes
  - Laser cavity 1.
    - Active medium a.
    - Pumping mechanism b.
    - Optical resonator c.
  - 2. Delivery systems
    - Fixed lens and mirror a.
    - Articulated arm b.
    - c. Waveguide
    - Optical fiber d.
  - 3. Emission mode

Argon laser

Diode lasers

Erbium lasers

Holmium laser

Other lasers

Wavelength

Neodymium lasers

CO<sub>2</sub> laser

- Continuous wave a.
- b. Chopped or gated
- Pulsed c.

- E. Summary of laser effects on tissue
  - Reflection, scattering, transmission, 1. absorption
  - 2. Photothermal effects
    - Warming a.
    - Coagulation, tissue shrinkage, b. hemostasis
    - Vaporization, ablation c.
    - Carbonization d.
  - 3. Photoacoustic effect
    - Disruption a.
  - 4. Photochemical effects
    - Stimulation of chemical a. reactions
      - b. Breaking of molecular bonds
  - 5. Fluorescence
  - **Biostimulation** 6.
    - Photodynamic therapy а

III. Review of laser types, device characteristics, and clinical applications in dentistry

- C.
  - 1. Intraoral soft tissue surgery
  - 2. Treatment of aphthous ulcers
  - 3. Sulcular debridement (soft tissue curettage)
  - 4. Composite curing
  - 5. Tooth shade lightening
  - 6. Caries removal
  - 7. Cavity preparation
  - 8. Enamel modification
  - Illumination for caries detection 9.
  - 10. Illumination for endodontic orifice location
  - 11. Removal of coronal pulp
  - 12. Experimental applications
  - 2. Limited access
    - 3. Reflective surfaces minimized
  - High volume evacuation present
- G. Laser external cooling system (if H. applicable)
- I. Electrical components (cords and footswitch)
- J. Gases
- Training K.
- Laser use documentation L.

- - requirements
    - 1. Radiological Health (CDRH)
    - 2. American National Standards Institute (ANSI)
    - 3. Administration (OSHA)
    - 4.
  - B. Laser safety officer
  - C. Laser safety mechanisms
  - D. Adverse effects reporting mechanism
  - Eye and tissue protection E.
  - F. Environment
    - 1. Proper warning sign posted

- - Clinical applications

Power

Device characteristics

- Energy density 4.
- Repetition rate (if applicable) 5.

Beam diameter (spot size)

- 6. Exposure duration
- 7. Total energy
- IV. Laser safety

A.

Β.

Laser types

1.

2.

3.

4.

5.

6.

7.

1.

2.

3.

- A. Standards organizations and regulatory
  - U.S. FDA Center for Devices and
  - U.S. Occupational Safety and Health
  - State and local regulatory agencies

- V. Clinical simulation (specific hands-on demonstration)
  - A. Laser instrument set-up and operation
    - 1. Delivery system
      - a. Type
      - b. Assembly
      - c. Inspection
      - d. Maintenance
      - e. Sterilization standards and protocol
    - 2. Set laser operating parameters
    - 3. Test fire laser
  - B. Infection control
    - 1. Identification and disposal of biologic hazards
    - 2. Plume hazards and precautions
    - 3. Sterilization

- C. Treatment objective and surgical technique simulation on bovine tissues or other suitable biologic tissues or inanimate objects
  - 1. Indications and contraindications of laser use in dentistry
  - 2. Alternate methods of treatment
- D. Discussion of treatment sequence, patient management, postoperative instructions
- E. Management of complications
- F. Surgical and healing assessment

- V. Practice management
  - A. Practice organization and management, staff training and patient education
  - B. Financial and insurance considerations
  - C. Malpractice considerations, jurisprudence, ethics
  - D. Record keeping, adverse effects reporting mechanism, informed consent
- VI. Laser bibliography
  - A. General bibliography for lasers in dentistry
  - B. Subject bibliography for specific dental applications
- VII. Current research and future developments
- IX. Conclusion
  - A. Written post-test
  - B. Post-test clinical simulation
  - C. Course evaluation
  - D. Certificate of attendance

## **Advanced Proficiency Course**

Practitioners must have successfully completed a Category II course. Practitioners then gain additional knowledge and experience by one or more of the following:

- 1. In-office mentor preceptor program
- 2. University or other accredited dental education program
- 3. Scientific session educational program
- 4. Patient care
- 5. Independent study of the literature

This level of education is elective, and represents an advanced level of clinical competency in safety and clinical use. This level of education is intended for Dentists and Dental Hygienists and includes assessment by written examination, clinical simulation proficiency, and clinical case presentation. This level is also intended for dental auxiliaries, industry representatives, researchers, and others who demonstrate and operate lasers. Assessment of these individuals is by written and clinical simulation proficiency in the safety aspects of laser use. I. Introduction

B.

- A. Self-graded pre-test (optional)
- II. Fundamentals of lasers
  - A. Production of laser light
    - Quantum theory 1.
    - 2. Stimulated emission
    - Electromagnetic spectrum
      - 1. Regions and boundaries
        - a. Ultraviolet (1 - 400 nm)
        - Visible (400 750 nm)b.
        - Infrared (750+ nm)c.
      - Laser wavelengths 2.
  - C. Characteristics of laser light
    - Spatial and temporal beam 1. coherency
    - 2. Monochromaticity
    - 3. Collimation
  - D. Laser requirements, delivery systems and emission modes 1.
    - Laser cavity
      - Active medium a.
      - Pumping mechanism b.
      - Optical resonator c.
    - 2. Delivery systems
      - Fixed lens and mirror a.
      - Articulated arm b.
      - c. Waveguide
      - Optical fiber d.
      - Emission mode
        - Continuous wave a.
        - Chopped or gated b.
        - Pulsed c.

III. Review of laser types, device characteristics, and clinical applications in dentistry

A. Laser types

3.

- 1. Argon laser
- 2. CO<sub>2</sub> laser
- 3. Diode lasers
- 4. Erbium lasers
- 5. Holmium laser
- 6. Neodymium lasers
- 7. Other lasers
- Β. Device characteristics
  - Wavelength 1.
  - Beam diameter (spot size) 2.
  - 3. Power
  - 4. Energy density
  - Repetition rate (if applicable) 5.
  - Exposure duration 6.
  - 7. Total energy

- Summary of laser effects on tissue E.
  - 1. Reflection, scattering, transmission, absorption
  - 2. Photothermal effects
    - Warming a.
    - Coagulation, tissue b.
    - shrinkage, hemostasis
    - Vaporization, ablation c.
    - Carbonization d.
  - 3. Photoacoustic effect
    - Disruption a.
    - Photochemical effects
      - Stimulation of chemical a. reactions
      - Breaking of molecular bonds b.
  - 5. Fluorescence

4.

- 6. Biostimulation
  - Photodynamic therapy a.

**Clinical** applications

C.

- 1. Intraoral soft tissue surgery
- 2. Treatment of aphthous ulcers
- 3. Sulcular debridement (soft tissue curettage)
- 4. Composite curing
- 5. Tooth shade lightening
- Caries removal 6.
- 7. Cavity preparation
- 8. Enamel modification
- Illumination for caries detection 9.
- 10. Illumination for endodontic orifice location
- 11. Removal of coronal pulp
- 12. Experimental applications

#### IV. Laser safety

- A. Standards, organizations, and regulatory requirements
  - 1. U.S. FDA Center for Devices and Radiological Health (CDRH
  - 2. American National Standards Institute (ANSI)
  - 3. U.S. Occupational Safety and Health Administration (OSHA)
  - 4. State and local regulatory agencies
- B. Laser safety officer
- C. Laser safety mechanisms
- D. Adverse effects reporting mechanism
- E. Eye and tissue protection
- V. Clinical simulation (specific hands-on demonstration)
  - A. Laser instrument set-up and operation
    - 1. Delivery system
      - a. Type
      - b. Assembly
      - c. Inspection
      - d. Maintenance
      - e. Sterilization standards and protocol
    - 2. Set laser operating parameters
    - 3. Test fire laser
  - B. Infection control
    - 1. Identification and disposal of biologic hazards
    - 2. Plume hazards and precautions
    - 3. Sterilization

## VI. Clinical summary of laser usage

- A. Pretreatment
  - 1. Diagnostic tests
    - a. Clinical exams
    - b. Tooth vitality
    - c. Hard tissue tests
    - d. Radiographics
    - e. Soft tissue exams, including pocket depth measurement (if applicable)
    - f. Other
  - 2. Diagnosis and treatment plan
    - a. Diagnosis
    - b. Treatment
    - c. Possible treatment alternatives
    - d. Indication
    - e. Contraindications
    - f. Informed consent

- F. Environment
  - 1. Proper warning signs posted
  - 2. Limited access
  - 3. Reflective surfaces minimized
- G. High volume evacuation present
- H. Laser external cooling system (if applicable)
- I. Electrical components (cords and footswitch)
- J. Gases
- K. Training
- L. Laser use documentation
- C. Treatment objective and surgical technique simulation on bovine tissues or other suitable biologic tissues or inanimate objects
  - 1. Indications and contraindications of laser use in dentistry
  - 2. Alternate methods of treatment
- D. Discussion of treatment sequence, patient management, postoperative instructions
- E. Management of complications
- F. Surgical and healing assessment
- G. Post-test clinical simulation
- B. Treatment
  - 1. Objective
  - 2. Laser operating parameters
    - a. Wavelength
    - b. Power
    - c. Repetition rate (if applicable)
    - d. Beam diameter (spot size)
    - e. Exposure duration
  - 3. Treatment sequence
  - 4. Management of complications
  - 5. Surgical prognosis
  - 6. Treatment record
  - 7. Patient management
  - 8. Post-operative instructions

- C. Follow-up care
  - 1. Side effects and complications (if any)
  - 2. Assessment of treatment (with time intervals)
  - 3. Long-term results
  - 4. Healing assessment
  - 5. Case documentation

VII. Practice management

- A. Practice organization and management, staff training and patient education
- B. Financial and insurance considerations
- C. Malpractice considerations, jurisprudence, ethics
- D. Record keeping, adverse effects reporting mechanism, informed consent

VIII. Laser bibliography

- A. General bibliography for lasers in dentistry
- B. Subject bibliography for specific dental applications
- IX. Current research and future developments
- IX. Conclusion
  - A. Written post-test
  - B. Clinical simulation (post-test)
  - C. Clinical case studies
  - D. Course evaluation
  - E. Certificate of attendance

#### **Educator Course**

This course provides specific instruction in planning and presenting the Standard Proficiency Course. Course structure is both lecture and participation. Prerequisites include three years participation in Standard Proficiency level and two years status at Advanced Proficiency.

- I. Introduction
  - A. Teaching lectures, small groups, laboratories, case studies
  - B. How students learn
  - C. Videotaping assessments of teacher skills
  - D. Critique and feedback on teaching technique
- II. How to teach
  - A. Critical thinking
    - 1. Optimal learning experiences
    - 2. Criteria
  - B. Learning modalities
    - 1. Visual
    - 2. Auditory
    - 3. Kinesthetic
    - 4. Tactile
    - 5. Olfactory
    - 6. Gustatory
  - C. Multiple intelligence
    - 1. Logical-mathematical
    - 2. Linguistic
    - 3. Musical
    - 4. Bodily/Kinesthetic
    - 5. Interpersonal
    - 6. Intrapersonal

- D. Creativity in Teaching
  - 1. Problem presentation
  - 2. Preparation
  - 3. Generation of ideas
  - 4. Incubation
  - 5. Validation
  - 6. Outcome assessment

- III. Teaching excellence in laser dentistry
  - A. Focus on selected content
  - B. Use of eye movement, continuous eye contact
  - C. Use of body movement
  - D. Use of gestures for emphasis
  - E. Use of language metaphors, storytelling, personal experience, anecdotes
  - F. Use of voice, sound tone, etc.
  - G. Use of numbers, calculations, logic, classification, critical thinking
  - H. Use of interpersonal skills engaging students in collaborative learning
  - I. Use of intrapersonal skills, revealing self to encourage students to connect learning with past experiences, memories, introspection.
- IV. Course Administration
  - A. Registration
  - B. Facilities
  - C. Audiovisual Equipment
  - D. Laser Equipment and Accessories
  - E. Faculty and Sponsorship
  - F. Course Schedule and Elements
  - G. Recordkeeping

#### V. Conclusion

- A. Examination of knowledge of subject matter
- B. Examination of teaching
- C. Course evaluation
- D. Certification

# 6. Authorship of the Revised Curriculum Guidelines

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#### Endorsing the Revised Curriculum Guidelines and Standards for Dental Education

Academy of Laser Dentistry Academy of Laser Dentistry - Japan Brazilian Association of Laser Dentistry British Dental Laser Association (BDLA) Czech Rep. Institute of Dental Research Czech Technical University, FNSPI, Prague German Academy of Laser Dentistry Institut fur Lasertechnologien Lasers in Dentistry - SPIE University of California, San Francisco School of Dentistry University of Sao Paulo, Brazil

#### Endorsement Signatures for the 1993 Curriculum Guidelines and Standards for Dental Laser Education

Academy of Laser Dentistry Academy of Oral Dynamics Alabama Department of Public Health ALASE American Academy of Oral Pathology American Board of Periodontology American Dental Laser American Society of Dentistry for Children Arlington Implant Institute Australian Society of Laser Dentistry Australian Society of Laser Dentistry Baylor College of Dentistry Beckman Laser Institute, UCI British Dental Association Bureau of Dental Health, Texas Department of Health Bureau of Health Services, Kentucky Columbia University School of Dental and Oral Surgery Corbeel Medical, Belgium Dental Association of South Africa Dental Institute, University of Zurich Dental Society of the State of New York Department of Health and Social Sciences, Wyoming Deutsche Gesellschaft für Laserzahnheilkunde Division of Dental Health, Hawaii Department of Health Division of Dental Health, Indiana State Board of Health Division of Pediatric Dentistry, UCSF Division of Public Health Dentistry, West Virginia State Health Dept. General Practice, University of Washington Greater N.Y. Academy of Laser Dentistry Journal Hispanic Dental Association, Chicago Howard University College of Dentistry Incisive Technologies Indiana University School of Dentistry Institute for Laser Dentistry International Academy of Laser Dentistry International Association of EAV

International College of Dentists Jamaica Hospital, NYC Japan Dental Association Kansas Dental Board Laser Dentistry, Booth Memorial Medical Center, New York Laserdent Technologies Line Lite Laser Corp. Litton Laser Systems Marquette University School of Dentistry Medical University of South Carolina MedLas Medical Lasersystems Metropolitan Academy of Laser Dentistry Michigan Head and Neck Institute Mid-Atlantic Dental Laser Study Club MPS, Dentist and Manger Laser Technologie National Dental Hygienists Association Nebraska Department of Health, Division of Dental Health Nevada Dental Association Nevada State Board of Dental Examiners New Jersey Dental School, University of Medicine and Dentistry of New North American Academy of Laser Dentistry Northeast Regional Board of Dental Examiners, Inc. Norwegian Dental Association Office of Dental Health, Arizona Department of Health Services Office of Device Evaluation, Food and Drug Administration Ohio State University Oregon Health Sciences University Omicron Kappa Upsilon Oral Medicine, UCSF Philippine Dental Association Pierre Fauchard Academy Santa Teresa Dental Center School of Dental Medicine, University of Montreal **SNDA** South Carolina Department of Health and Environmental ontrol South Dakota Dental Association Southwest Institute of Laser Dentistry

Springtown Dental Office The Laser Center, The Camilo Castelo Branco University The London Hospital Medical College The University of Western Ontario, Faculty of Dentistry UCSF School of Dentistry University of Aachen, RWTH University of Alberta, Faculty of Dentistry University of Detroit, Mercy, School of Dentistry University of Florida College of Dentistry University of Manitoba Faculty of Dentistry University of Mississippi Dept. of Periodontics University of Montpellier, LEMP/MAO University of Pittsburgh University of Pittsburgh School of Dental Medicine University of Showa University of Nebraska College of Dentistry Warner Medical Center

Inquiries, comments, suggestions and endorsements should be directed to the organizer:

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