



**DEPARTMENT OF THE ARMY**  
**HEADQUARTERS, UNITED STATES ARMY DENTAL COMMAND**  
**2050 WORTH ROAD**  
**FORT SAM HOUSTON, TEXAS 78234-6000**

REPLY TO  
ATTENTION OF

MCDS

18 March 2004

MEMORANDUM FOR All U.S. Army Dental Command Personnel

SUBJECT: U.S. Army Dental Command (DENCOM) Policy Letter 04-02,  
Procedures for Personnel Who Participate in Dental Licensure  
Activities

1. In accordance with the Joint Ethics Regulation (JER), government service is a public trust requiring employees to place loyalty to ethical principles above private gain. Section 5, Code of Federal Regulations, Subsection 2635.101, identifies specific ethical guidance in determining whether conduct is proper. The following subsections of 2635.101 are restated for emphasis:

\* (3) "employees shall not engage in financial transactions using nonpublic Government information or allow the improper use of such information to further any private interests."

\* (7) "employees shall not use public office for private gain."

\* (10) "employees shall not engage in outside employment or activities . . . that conflict with official Government duties and responsibilities."

\* (4) "employees shall endeavor to avoid any actions creating the appearance that they are violating the law or the ethical standards set forth in this part."

2. The following requirements are established regarding activities and actions involving military and/or civilian government employees who participate in dentist or dental hygienist licensure examinations:

a. Personnel may neither make payment nor receive any type of compensation (e.g. "finder's fee") for identifying or recruiting volunteers to serve as clinical subjects during dental licensure examinations. This prohibition applies whether the volunteer is active duty military, a family member, or a retiree.

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b. Dentists or dental hygienists who pay volunteers to serve as clinical patients or assistants during dental licensure examinations must do so from their personal funds, and must make all payments directly to the volunteer. Indirect payments to volunteers through other individuals (e.g., dental assistants, receptionists, etc.) serving as conduits or "middle persons" are prohibited.

c. Personnel are prohibited from soliciting, receiving, or accepting any form of payment or compensation (i.e., "kickbacks") from a volunteer clinical patient for participating in dental licensure examinations.

d. Personnel are prohibited from sharing fees with, or providing kickbacks to, other DENCOM personnel for services provided to dentists or dental hygienists at dental licensure examinations. Dentists and dental hygienists must make all payments for services and related expenses directly to the individuals that perform the service.

e. Government vehicles and/or drivers are not authorized for transportation of any category of personnel for the purpose of participating in a dental licensure examination.

f. The following duty or work status requirements apply:

(1) Dental Commanders may authorize permissive TDY for an unlicensed active duty dentist or dental hygienist who is taking a licensure examination for the first time while on active duty. All subsequent attempts to obtain an initial dental or dental hygiene license require personnel to use ordinary leave. Licensed personnel must use ordinary leave when taking additional licensure examinations. Active duty personnel who volunteer as either a clinical patient or assistant must be in an ordinary leave or pass status while serving in that capacity.

(2) Department of the Army civilian employees and government contract personnel who volunteer as a clinical patient or assistant must be in a leave status while serving in that capacity.

(3) Active duty dentists and dental hygienists who take a dental licensure examination will document to the commander's satisfaction that all participating government employees are in an appropriate duty or work status.

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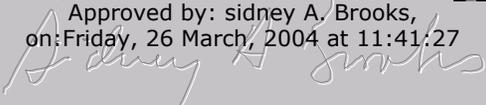
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g. Each volunteer clinical patient or assistant who is procured through a military dental treatment facility must complete the Disclosure Statement for Volunteer Clinical Patients (attachment 1) or the Disclosure Statement for Volunteer Clinical Assistants Who Are Government Employees (attachment 2). Active duty dentists and dental hygienists will provide copies of all completed disclosure forms to the commander prior to administration of the dental licensure examination. Disclosure statements are subject to review by higher headquarters and will be maintained on file at the DENTAC or Dental Clinic Command headquarters for a period of one year.

3. All personnel are advised that, while taking part in dental licensure examinations and all activities pursuant thereto, they are acting independently and operating outside the scope of their Federal Government employment. Accordingly, the United States Government will not intervene in, provide legal representation for, nor pay claims or judgements in settlement of, actions under the Federal Tort Claims Act for negligence arising out of dental licensure examination activities. Further, the "Feres Doctrine," which prohibits suits filed by military personnel for negligence occurring incident to their service, would not necessarily apply to diagnosis or treatment provided to a military volunteer participating in a dental licensure examination.

4. Failure of military personnel to comply with this policy may result in punitive action under Article 92 of the Uniform Code of Military Justice (UCMJ). Civilian personnel may be subject to administrative or other unfavorable personnel actions for noncompliance.

5. Point of contact is COL John P. Storz at DSN 471-8241.

Signature Authenticated by ApproveIt,   
Approved by: sidney A. Brooks,  
on: Friday, 26 March, 2004 at 11:41:27  


SIDNEY A. BROOKS  
Colonel, Dental Corps  
Commanding

## CLINICAL PATIENTS

1. You have indicated that you may be willing to volunteer as a clinical patient for (CLINICIAN'S NAME) during a (DENTAL OR DENTAL HYGIENIST) licensure examination before the (NAME OF LICENSURE BOARD) at (LOCATION). Your participation is an essential part of the treating clinician's professional development. However, please ensure that you read and understand the following information before you commit as a volunteer for this purpose:

a. Your participation must be entirely voluntary. Your decision to accept or decline participation will not affect your ability to access care at any military dental treatment facility, now or in the future.

b. Your participation as a clinical patient is entirely at your own risk. Dentists, dental hygienists, and dental assistants participating in the licensure examination are not acting under military control or orders. If you are injured by any member of the treating or examining team during the board examination, you will not be able to successfully file a claim against the United States for your injuries or damages under the Federal Torts Claim Act.

c. If you are active duty military, you must be in a leave or pass status to travel to the examination site and participate as a volunteer patient. You must document your leave status with an approved DA Form 31, Request and Authority for Leave. If you are a Department of the Army Civilian or contract employee, you must be in a leave status to serve as a volunteer patient.

d. If you are serving as a paid volunteer, you should accept reimbursement for your time and expenses directly from the treating dentist or dental hygienist. You should never accept payments from, or be required to make any payments to, any other individual (s).

e. You are not authorized to travel to the examination site in a government vehicle.

2. I have read and understand this disclosure document:

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

DISCLOSURE STATEMENT FOR GOVERNMENT EMPLOYEES WHO VOLUNTEER AS CLINICAL ASSISTANTS

1. You have indicated that you may be willing to volunteer as a clinical assistant for (CLINICIAN'S NAME) during a (DENTAL OR DENTAL HYGIENIST) licensure examination before the (NAME OF LICENSURE BOARD) at (LOCATION). Your participation is an essential part of the treating clinician's professional development. However, please ensure that you read and understand the following information before you commit as a volunteer:

a. Your participation must be entirely voluntary. Your decision to accept or decline participation will not affect your government employment or performance evaluation, now or in the future.

b. Your participation as a clinical assistant is entirely at your own risk. Dentists, dental hygienists, and dental assistants participating in a dental licensure examination are not acting under military control or orders. If you are injured by any member of the treating or examining team during the board examination, you will not be able to successfully file a claim against the United States for your injuries or damages under the Federal Torts Claim Act (FTCA).

c. If you are active duty military, you must be in a leave or pass status to travel to the examination site and participate as a volunteer assistant. You must document your leave or pass status with an approved DA Form 31, Request and Authority for Leave. If you are a Department of the Army Civilian or contract employee, you must be in a leave status to serve as a volunteer assistant.

d. If you are serving as a paid volunteer clinical assistant, you should accept reimbursement for your time and expenses directly from the treating dentist or dental hygienist. You should never accept payments from, or be required to make any payments to, any other individual(s).

e. You are not authorized to travel to the examination site in a government vehicle.

2. I have read and understand this disclosure document:

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_