

1 **Resolution Number:** 200-2025

2

3 **Title:** Amendment to Current Statements of Position or Policy B-6 Domestic Abuse and Neglect

4

5 **Reference Committee Assignment:** Education

6

7 **Sponsor(s):** 2024-25 ASDA Governance Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** As dentists treat patients who have experienced various forms of violence, it is  
16 vital that dental professionals use trauma-informed practices to encourage recovery and  
17 mitigate re-traumatization. The inclusion of trauma-informed care in dental school curricula will  
18 prepare students to most appropriately and effectively treat patients with diverse needs;  
19 therefore, be it

20

21

## RESOLUTION

22

23 **Resolved,** that ASDA's Current Statements of Position or Policy B-6 Domestic Abuse and Neglect  
24 to be amended to read as follows:

25

26 It is the position of the American Student Dental Association that dental students should  
27 recognize their legal and ethical responsibilities regarding the early detection and reporting of  
28 the following: child, spousal or elder abuse, domestic abuse, intimate partner violence or  
29 human trafficking. ASDA strongly supports the incorporation of **courses regarding trauma-**  
30 **informed care,** domestic violence, intimate partner violence and human trafficking recognition  
31 ~~courses~~ in the existing curriculum.

32

33 **Action:** The Chair moves 200-2025 with a recommendation of a yes vote and to be placed on  
34 the Consent Calendar.

35

36 **House Action:** Adopted.

1 **Resolution Number:** 201-2025

2

3 **Title:** Amendment to Current Statements on Position or Policy B-13 Evidence-Based Prescribing

4

5 **Reference Committee Assignment:** Education

6

7 **Sponsor(s):** 2024-25 Governance Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** Dental schools' curricula on the importance of appropriately and cautiously  
16 prescribing opioids to patients should be extended to include prescribing antibiotics; therefore,  
17 be it

18

19

## RESOLUTION

20

21 **Resolved,** that ASDA's Current Statements of Position or Policy B-13 Evidence-Based Prescribing  
22 be amended to read as follows:

23

24 The American Student Dental Association encourages all dental schools to provide education on  
25 evidence-based prescribing as outlined in the CODA-accreditation Standards.

26

27 ASDA urges dental schools to provide resources for dental students to appropriately address  
28 opioids **and antibiotics** with their patients.

29

30 ASDA encourages the American Dental Education Association to create resources that establish  
31 evidence-based prescribing practices for dental school clinics.

32

33 **Action:** The Chair moves 201-2025 with a recommendation of a yes vote and to be placed on  
34 the Consent Calendar.

35

36 **House Action:** Adopted.

1 **Resolution Number:** 202-2025

2

3 **Title:** Amendment to Current Statements on Position or Policy E-8 Code of Ethics

4

5 **Reference Committee Assignment:** Education

6

7 **Sponsor(s):** 2024-25 Governance Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** The emergence of AI has provided a beneficial learning tool when users follow  
16 appropriate guidelines emphasizing responsibility, ethics, and academic integrity; therefore, be  
17 it

18

19

## RESOLUTION

20

21 **Resolved,** that ASDA's Current Statements of Position or Policy E-8 Code of Ethics be amended  
22 to read as follows:

23

24 The pathway to professional status is obtained through knowledge, skill, and experience with  
25 which students serve their patients and society. Every dentist should strive to continuously  
26 improve their knowledge of ethics in order to help achieve higher levels of patient care. These  
27 foundational ethical values will serve as a guideline throughout the dentist's career, from  
28 predoctoral student to fully credentialed professional.

29

30 The American Student Dental Association recognizes the importance of high ethical standards  
31 in the dental school setting. Therefore, the Association believes students should conduct  
32 themselves in a manner reflecting integrity and fairness in both the didactic and clinical learning  
33 environments. The code outlined below relates most directly to the dental school environment.  
34 To gain a more expansive understanding of ethics in practice, please see the ADA Code of  
35 Ethics.

36

37 The following is the ASDA Code of Ethics:

38

I. Dental Student conduct

39

A. All dental students are obligated to maintain high standards of moral and ethical  
40 behavior and to conduct themselves in a professional manner at all times. This  
41 applies to the classroom, clinic, laboratory and other institutional facilities;  
42 externships, community service or meetings of professional organizations.

43

B. Ethical and professional behavior by dental students is characterized by honesty,  
44 compassion, kindness, integrity, fairness and charity in all professional  
45 circumstances; respect for the rights, differences, and property of others;

- 46 concern for the welfare of patients, competence in the delivery of care, inclusive  
47 of various perspectives, backgrounds and capabilities allowing for access to  
48 quality care and preservation of confidentiality in all situations where this is  
49 warranted.
- 50 C. All dental students are obligated to report unethical activity and violations of the  
51 honor code to the appropriate body at the school.
- 52 II. Patient Autonomy ("self-governance"). The student dentist has a duty to respect the  
53 patient's rights to self-determination and confidentiality.
- 54 A. Informed Consent and Refusal
- 55 1. Students should conduct a thorough discussion with every patient. This  
56 must be repeated whenever there are substantive changes or additions  
57 to the treatment plan.  
58 Discussion should include:
- 59 a. Diagnoses  
60 b. Treatment Plan  
61 c. Prognosis  
62 d. Risks/Benefits  
63 e. Alternatives - The discussion should be in understandable terms  
64 and enable a reasonable patient in the patient's position to make  
65 an informed decision regarding care, except in emergencies,  
66 when risks are unknown, commonly known or the patient waves  
67 the right to disclosure.
- 68 2. Students should inform the patient of the consequences of not  
69 accepting treatment. The patient has a right to an informed refusal  
70 which should be honored by the student.
- 71 3. The student should make sure to allow time to answer any and all  
72 questions the patient may have to the best of their ability.
- 73 B. Patient Confidentiality
- 74 1. Should follow HIPAA Guidelines.
- 75 III. Non-maleficence ("do no harm"). The student dentist has a duty to refrain from  
76 harming the patient.
- 77 A. Treatment plans should be determined according to patient needs as opposed  
78 to unmet requirements of the student.
- 79 B. No procedures should be started without instructor authorization, and all  
80 procedures should be evaluated by the instructor upon completion.
- 81 C. Referrals to residents, specialists, or staff members should be made when the  
82 complexity of the case exceeds the student's ability to meet the standard of  
83 care. The referring student should inform the patient who will be responsible for  
84 dental maintenance and the reason for referral.
- 85 D. Students should exercise discretion in treating family members due to problems  
86 associated with medical history disclosure, confidentiality, objectivity, and  
87 professionalism.
- 88 E. Students must never perform dental procedures while in an impaired condition,  
89 regardless of the source of the impairment.

- 90 IV. Beneficence (“do good”). The student dentist has a duty to promote the patient’s  
91 welfare.
- 92 A. Students are encouraged to participate in community outreach programs in  
93 order to improve the dental health of the public.
- 94 B. Students should advocate access to care for patients who are unable to receive  
95 care due to physical or mental disability or financial hardship.
- 96 C. Student dentists will encourage an environment that supports respectful and  
97 collaborative relationships for all those involved in oral health care and  
98 education.
- 99 V. Justice ("fairness"). The student dentist has a duty to treat people fairly.
- 100 A. Race, ethnicity, religion, sex, sexual orientation, age, national origin, disability,  
101 gender identity, gender expression, socioeconomic status, language or  
102 infectious disease status should not influence whether or not a patient is  
103 accepted by a student to receive care. Furthermore, all patients should be  
104 treated with the same level of compassion, kindness and respect.
- 105 B. Sexual harassment between colleagues, between health care provider and  
106 patient, and between students and faculty or residents is unacceptable and  
107 must be reported.
- 108 C. Students must report suspected abuse/neglect of patients to an appropriate  
109 instructor.
- 110 D. Students should exercise respect when working with human cadavers.
- 111 VI. Veracity (“truthfulness”). The student dentist has a duty to communicate truthfully.
- 112 A. The student should not cheat, plagiarize, forge or falsify official records, patient  
113 charts, or examinations.
- 114 B. **The student should use artificial intelligence tools responsibly and ethically,  
115 and in accordance with their institution’s and instructors’ academic honesty  
116 policies.**
- 117 C. The student should not participate in activities involving theft and/or vandalism  
118 of school or student property.
- 119 D. The student will conduct research in an ethical manner and abide by all  
120 guidelines set by their institution’s Institutional Review Board.
- 121 E. Students have the responsibility of protecting the integrity of the profession by  
122 reporting any suspicions of unethical behavior.
- 123 VII. All members of the American Student Dental Association must comply with the ASDA  
124 Code of Ethics.
- 125

126 **Action:** The Chair moves 202-2025 with a recommendation of a yes vote and to be placed on  
127 the Consent Calendar.

128  
129 **House Action:** Adopted.

1 **Resolution Number:** 203-2025

2

3 **Title:** Cannabis and Oral Health

4

5 **Reference Committee Assignment:** Education

6

7 **Sponsor(s):** Hannah Lee, Alternate Delegate, ASDOH

8 Lance Attiq, Alternate Delegate, ASDOH

9 Emily Tarr, Alternate Delegate, MWU-AZ

10 Payal Patel, District 10 Trustee, ASDOH

11

12 **Financial Impact:** None

13

14 **Board of Trustees Comments:** The Board recommends a yes vote.

15

16 **Reference Committee Comments:** The reference committee recommends a yes vote.

17

18 **Background:** The prevalence of cannabis use is growing as it becomes more widely accepted  
19 and legalized in various U.S. states for medical and recreational use. Dental students should be  
20 well equipped and educated with the knowledge to address the effects of cannabis use relating  
21 to oral health, patient management, and broader public health implications.

22

23 Cannabis is commonly consumed through smoking; however, vaping cannabis and cannabis-  
24 based products has become increasingly popular. Smoking cannabis has been linked to  
25 periodontal disease, xerostomia, and a potential increased risk of head and neck cancers. Public  
26 health concerns persist regarding the adverse effects of cannabis use including neurological,  
27 behavioral, cardiovascular complications, and risk of developing substance use disorders.

28

29 As oral health is directly connected to systemic health, understanding the psychosocial  
30 dimensions associated with cannabis use is essential. The addition of cannabis education as  
31 part of dental school curriculum is essential. Dental students should be confident in recognizing  
32 the signs and symptoms of an active cannabis user and its dental care implications. Future  
33 dentists must be capable of reassessing and/or recommending treatment options which  
34 provide the safest, efficient, and optimum care for the patient.

35

36 As adopted at the ADA House of Delegates in 2021, the ADA shall encourage the development  
37 of best practices for the management of patients and their caregivers, dentists, and dental  
38 team members who are under the influence of cannabis. ASDA, as the voice of dental students,  
39 should do the same; therefore, be it

40

41

## RESOLUTION

42

43 **Resolved,** that the American Student Dental Association encourages dental schools to  
44 incorporate cannabis education into their respective didactic curricula to address overall  
45 competency of future dental professionals to best treat physical and psychological needs of  
46 patients.

47

48 **Action:** The Chair moves 203-2025 with a recommendation of a yes vote and to be placed on  
49 the Consent Calendar.

50

51 **House Action:** Adopted.

1 **Resolution Number:** 204-2025

2

3 **Title:** Opposition to CODA Accreditation Expansion

4

5 **Reference Committee Assignment:** Education

6

7 **Sponsor(s):** Adam Yang, Alternate Delegate, Harvard

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board appreciates the author bringing forward this issue. It  
12 is important to connect with CODA to better understand their 2022-26 strategic plan regarding  
13 “global accreditation” and the implications of international dental accreditation before making  
14 a recommendation to the House. Therefore, the Board recommends referring this resolution to  
15 the 2025-26 Board of Trustees to study and report back to the 2026 House of Delegates.

16

17 **Reference Committee Comments:** In our deliberation, the reference committee considered the  
18 resolution’s implications, the provided testimony, and the most appropriate course of action.  
19 ASDA’s Statements of Positions or Policy are intended to be enduring and stand the test of  
20 time, underscoring the need for a well-researched and comprehensive approach.

21

22 The Board of Trustees has emphasized the need for further study before taking a formal stance,  
23 particularly in understanding CODA’s 2022-26 strategic plan and its approach to global  
24 accreditation. The resolution background lacks detailed evidence on how international  
25 expansion would negatively impact U.S. dental students and does not consider potential  
26 benefits, such as improved global education standards and institutional collaboration.  
27 Concerns regarding a loophole for students unable to gain U.S. admission are speculative and  
28 lack supporting data.

29

30 Furthermore, CODA operates independently to serve both the public and the profession.  
31 Opposing its expansion without a thorough impact analysis may be seen as undue interference.  
32 It is imperative that ASDA maintains its relationship with CODA to best serve our members, and  
33 directly opposing CODA’s strategic plan without further research could risk straining this  
34 valuable partnership.

35

36 The resolution does not explore why CODA is pursuing international accreditation nor propose  
37 alternative approaches to address concerns.

38

39 Given these factors and the Board of Trustees’ recommendation for further study, the  
40 reference committee recommends referral to the 2025-2026 Board of Trustees for further  
41 analysis and report back to the House of Delegates 2026.

42

43 **Background:** The Commission on Dental Accreditation (CODA) accredits dental and  
44 dental-related education programs in the United States, including advanced dental education  
45 and allied dental education programs. While CODA is designed to be a commission to



46 function independently and autonomously to serve the public and dental professions. Its  
47 actions and decisions have significant and potentially negative impact on the careers of  
48 American dental students. In recent years, CODA has expanded its accreditation services to  
49 predoctoral programs in foreign dental schools, including Saudi Arabia (2019) and Turkey  
50 (2024); therefore, be it

### 51 **RESOLUTION**

52  
53 **Resolved**, that the following statement be added to the Current Statements of Position or  
54 Policy under section A, Dental Education Administration:

55  
56 Expanding CODA accreditation to international programs outside the United States raises  
57 concerns about increased oversight and potential disruptions to the U.S. dental workforce. Such  
58 an expansion could undermine the interests of American dental students and even create a  
59 loophole for applicants unable to gain admission to U.S. schools to seek training abroad, similar  
60 to trends seen in medical education. Therefore, ASDA opposes the accreditation of additional  
61 dental schools abroad in order to maintain the quality and balance of the dental profession in  
62 the United States.

63  
64 **Action:** The Chair moves resolution 204-2025 with a recommendation to refer to the 2025-26  
65 Board of Trustees for further analysis and report back to the House of Delegates 2026.

66  
67 **House Action:** Adopted.

1 **Resolution Number:** 300-2025

2

3 **Title:** Lyon College School of Dental Medicine

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** 2024-25 Executive Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** Per the Standing Rules of the House of Delegates, new ASDA chapters must be  
16 approved by the House of Delegates. Lyon College School of Dental Medicine has received  
17 initial accreditation from the Commission on Dental Accreditation (CODA) to open in 2025.  
18 Approving the creation of a chapter at this new program will allow national ASDA to put  
19 resources towards supporting the formation of an ASDA chapter during the 2025-26 school  
20 year; therefore, be it

21

22

## RESOLUTION

23

24 **Resolved,** that Lyon College School of Dental Medicine be recognized as an ASDA chapter  
25 pending completion of the requirements as stated in the Standing Rules of the House of  
26 Delegates and confirmation by the Board of Trustees.

27

28 **Action:** The Chair moves 300-2025 with a recommendation of a yes vote and to be placed on  
29 the Consent Calendar.

30

31 **House Action:** Adopted.

1 **Resolution Number:** 301-2025

2

3 **Title:** Northeast Ohio Medical University Bitonte College of Dentistry

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** 2024-25 Executive Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** Per the Standing Rules of the House of Delegates, new ASDA chapters must be  
16 approved by the House of Delegates. Northeast Ohio Medical University Bitonte College of  
17 Dentistry has received initial accreditation from the Commission on Dental Accreditation  
18 (CODA) to open in 2025. Approving the creation of a chapter at this new program will allow  
19 national ASDA to put resources towards supporting the formation of an ASDA chapter during  
20 the 2025-26 school year; therefore, be it

21

22

## RESOLUTION

23

24 **Resolved,** that Northeast Ohio Medical University Bitonte College of Dentistry be recognized as  
25 an ASDA chapter pending completion of the requirements as stated in the Standing Rules of the  
26 House of Delegates and confirmation by the Board of Trustees.

27

28 **Action:** The Chair moves 301-2025 with a recommendation of a yes vote and to be placed on  
29 the Consent Calendar.

30

31 **House Action:** Adopted.

1 **Resolution Number:** 302-2025

2

3 **Title:** Pacific Northwest University School of Dental Medicine

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** 2024-25 Executive Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** Per the Standing Rules of the House of Delegates, new ASDA chapters must be  
16 approved by the House of Delegates. Pacific Northwest University School of Dental Medicine  
17 has received initial accreditation from the Commission on Dental Accreditation (CODA) to open  
18 in 2025. Approving the creation of a chapter at this new program will allow national ASDA to  
19 put resources towards supporting the formation of an ASDA chapter during the 2025-26 school  
20 year; therefore, be it

21

22

## RESOLUTION

23

24 **Resolved,** that Pacific Northwest University School of Dental Medicine be recognized as an  
25 ASDA chapter pending completion of the requirements as stated in the Standing Rules of the  
26 House of Delegates and confirmation by the Board of Trustees.

27

28 **Action:** The Chair moves 302-2025 with a recommendation of a yes vote and to be placed on  
29 the Consent Calendar.

30

31 **House Action:** Adopted.

1 **Resolution Number:** 303-2025

2

3 **Title:** Amendment to the Current Statements on Position or Policy E-3 School Closings

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** 2024-25 Governance Committee

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board recommends a yes vote.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** Since the policy is focused on outlining what the dental school should do in the  
16 event of a closing, the Governance Committee removed references to items ASDA leadership  
17 should be expected to do; therefore, be it

18

19

## RESOLUTION

20

21 **Resolved,** that ASDA's Current Statements of Position or Policy E-3 School Closings be amended  
22 to read as follows:

23

24 In the event of the closing of a dental school, students in their final year must be provided a  
25 proper and humane transition with a specific phase-out action to protect their rights. ASDA's  
26 position is that it is the responsibility of the school to protect its students in the following ways:

27

- 28 a. Assurances that the same standards of high-quality education under which  
29 students were accepted will be maintained.
- 30 b. Assurances that the school will continue to meet accreditation standards as set by the  
31 Commission on Dental Accreditation.
- 32 c. Assurances that all reimbursements will be made by the dental school for any classes,  
33 supplies and materials paid for and not provided to the student.
- 34 d. ~~The ASDA President will contact the school's Dean to obtain their personal assurance  
35 that a phase-out committee will be established immediately to enforce the phase-out  
36 plan. This committee will be composed of student, faculty and administration representatives.~~
- 37 e. Assistance in transfers or relocation.
- 38 f. Advice and support in seeking legal counsel.
- 39 g. The immediate disclosure of pertinent closing information to the students as it becomes  
40 available.
- 41 h. All attempts should be made to ensure students in their final year or those who meet  
42 graduation requirements are able to graduate from their matriculated institution.

43

44 In addition, in the event of an impending dental school closure, a letter will be sent to that  
45 state's legislators at the request of the school's delegates, to explain the health and economic

46 impact of a dental school's closure. Chapter delegates will be provided with resources that may  
47 be available from the central office including information about the circumstances of prior  
48 school closings.

49  
50 ~~Finally, an announcement will be sent to all first delegates requesting their assistance in:~~

- 51
- 52 a. ~~Finding temporary and permanent housing for transferring students~~
  - 53 b. ~~Providing mentors to assimilate transferring students to the new academic and clinical~~  
54 ~~environment; and~~
  - 55 c. ~~Updating membership information so transferring students can receive their benefits~~  
56 ~~and publications in a timely manner.~~

57  
58 **Action:** The Chair moves 303-2025 with a recommendation of a yes vote and to be placed on  
59 the Consent Calendar.

60  
61 **House Action:** Adopted.

1 **Resolution Number:** 304-2025

2

3 **Title:** Amendment to the Bylaws Article III, Section 1.B Predental Membership

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** Max Prince, 2024-25 Predental Task Force Chair, 2024-25 Council on Membership  
8 Associate, Boston, alternate delegate

9

10 **Financial Impact:** None

11

12 **Board of Trustees Comments:** The Board recommends a yes vote.

13

14 **Reference Committee Comments:** The reference committee recommends a yes vote.

15

16 **Background:** Per article III, section 1.B of the bylaws, predental membership is available to a  
17 person seeking enrollment in a predoctoral program accredited by the Commission on Dental  
18 Accreditation, who resides within the United States and its territories and who is not eligible for  
19 predoctoral membership.

20

21 The Predental Membership Task Force is recommending that the following language be  
22 removed from the bylaws: who resides within the United States and its territories

23

24 This will allow predental members from other countries to access the information and  
25 membership benefits, specifically the Guide to Getting Into Dental School, that is available to all  
26 predental members; therefore, be it

27

28 **RESOLUTION**

29

30 **Resolved,** that Article III, Section 1.B of the Bylaws be amended as follows:

31

32 ARTICLE III MEMBERSHIP

33

34 Section 1. Categories

35

36 A. Predoctoral Membership

37

38 Predoctoral membership is available to a dental student enrolled in a predoctoral program  
39 accredited by the Commission on Dental Accreditation, beginning with the first full membership  
40 year following enrollment in dental school. Upon graduation, a predoctoral member maintains  
41 membership status until the end of the membership year.

42

43 B. Predental Membership

44

45 Predental membership is available to a person seeking enrollment in a predoctoral program  
46 accredited by the Commission on Dental Accreditation, ~~who resides within the United States~~  
47 ~~and its territories~~ and who is not eligible for predoctoral membership. Upon enrollment into  
48 dental school, a predental member maintains membership status until the end of the  
49 membership year.

50

51 C. International Dental Student Membership

52

53 International dental student membership is available to dental students currently enrolled in a  
54 dental school outside the United States and its territories that is listed in the World Directory of  
55 Dental Schools compiled by the FDI World Federation.

56

57 **Action:** The Chair moves 304-2025 with a recommendation of a yes vote and to be placed on  
58 the Consent Calendar.

59

60 **House Action:** Adopted.



1 **Resolution Number:** 305-2025

2

3 **Title:** Support for Dental Student Members Experiencing Poverty

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** Lance Attiq, Alternate Delegate, ASDOH,

8 Hannah Lee, Alternate Delegate, ASDOH,

9 Emily Tarr, Alternate Delegate, Midwestern Arizona,

10 Payal Patel, District 10 Trustee, ASDOH

11

12 **Financial Impact:** None

13

14 **Board of Trustees Comments:** The Board recommends a yes vote.

15

16 **Reference Committee Comments:** The resolution investigates developing member benefits.

17 SNAP is a federal program and does not qualify as a member benefit. The reference committee

18 encourages ASDA chapter leaders to make members aware of SNAP benefits. The reference

19 committee recommends a yes vote.

20

21 **Background:** The financial burden which is brought upon individuals with aspirations to become

22 a dentist are exponential with rising tuition and cost of living increasing yearly while federal

23 loan increase does not adjust for a dynamic economy. Due to the piling debt and massive

24 amount of loans (which accrue interest) associated with becoming a dentist, students often

25 face the choice of choosing between school, housing, and food costs.

26

27 A recent study published in June 2020 was performed to assess the presence of food insecurity,

28 defined as lack of reliable access to enough affordable nutritious food, amongst medical

29 students at a single university in the United States. The survey found over 50% of respondents

30 experience food insecurities while in medical school. The main reasons selected for food

31 insecurity were not being able to get to the store (33.9%), followed by insufficient funds

32 (30.4%) (Flynn et al, 2020). These results can be applied to nearly every dental school in the

33 United States given the cost of dental education is typically higher than medical on an annual

34 basis.

35

36 Further investigation of other platforms offering discounts on goods/services to students

37 including ID.me and UNiDAYS sites found little to no benefit to enrollees beyond the initial

38 encounter. For example, UNiDAYS offers 55% off the FIRST box from Hello Fresh market

39 services but no other benefit thereafter. ID.me offers similar discounts on first time order but

40 no recurring services.

41

42 Given the majority of dental students are ASDA members, many by auto-enrollment, the

43 opportunity for ASDA to aid its members arises; therefore, be it

44

45

**RESOLUTION**

46

47 **Resolved**, that the 2025-26 Council on Membership in conjunction with the 2025-26 Board of  
48 Trustees investigate developing member benefits with food and grocery companies; and be it  
49 further

50 **Resolved**, that a progress report be sent to the sponsors of the resolution by Fall Council 2025;  
51 and be it further

52

53 **Resolved**, that a list of member benefits be included in the annual report to the House of  
54 Delegates.

55

56

#### References

57 Flynn, M. M., Monteiro, K., George, P., & Tunkel, A. R. (2020). Assessing Food Insecurity in  
58 Medical Students. *Family medicine*, 52(7), 512–513.

59 <https://doi.org/10.22454/FamMed.2020.722238>

60

61 **Action:** The Chair moves 305-2025 with a recommendation of a yes vote and to be placed on  
62 the Consent Calendar.

63

64 **House Action:** Adopted.

1 **Resolution Number:** 306-2025

2

3 **Title:** Improving Chapter Readiness through Distributing Key Operating Materials to Chapter  
4 Leaders

5

6 **Reference Committee Assignment:** Membership

7

8 **Sponsor(s):** Emily Tarr, Alternate Delegate, Midwestern University,

9 Lance Attiq Alternate Delegate, ASDOH,

10 Payal Patel, District Trustee, ASDOH,

11 Alexandra Wyluda, First Delegate, Midwestern University,

12 Miriam Villa Second Delegate, Midwestern University

13

14 **Financial Impact:** None

15

16 **Board of Trustees Comments:** The Board recommends a yes vote.

17

18 **Reference Committee Comments:** The reference committee recommends a yes vote.

19

20 **Background:** Although ASDA has chapter “how-to guides” available online they do not  
21 encompass the depth of information needed to run a successful chapter. Most chapter  
22 presidents run their year without the help of these tool kits because they have become  
23 irrelevant, not promoted or not applicable.

24

25 Furthermore, in order to market and advertise for events, many chapters rely on graphic design  
26 software such as Canva. Canva is an online software utilized to create promotional materials  
27 and offers free designs. However, the designs on the free software are extremely limited;  
28 therefore, be it

29

30

## RESOLUTION

31

32 **Resolved,** that the 2025-26 Council on Membership be tasked with investigating a  
33 comprehensive resource for chapter leaders to use including but not limited to the following:

34 • Strategic planning chapter template

35 ○ Mission

36 ○ Vision

37 ○ Goals

38 • Quarter at a glance and yearly events timeline

39 • How to prepare your chapter for a national conference

40 • Acknowledging awareness months with a list and event ideas

41 • List of current ASDA certification(s) programs available to members

42 • Scholarship opportunities throughout the year and how to apply

43 • Excel template for managing chapter finances and tax filing; and be it further

44

45 **Resolved**, that the 2025-26 Council on Membership investigate communication resources that  
46 could assist chapter leaders, implement these changes and give a report to the 2026 House of  
47 Delegates.

48

49 **Action:** The Chair moves 306-2025 with a recommendation of a yes vote and to be placed on  
50 the Consent Calendar.

51

52 **House Action:** Adopted.

1 **Resolution Number:** 307-2025

2

3 **Title:** National Conferences Holding Presidential Leadership Training

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** Emily Tarr, Alternate Delegate, Midwestern University,

8 Lance Attiq, Alternate Delegate, ASDOH,

9 Payal Patel, District Trustee, ASDOH,

10 Alexandra Wyluda, First Delegate, Midwestern University,

11 Miriam Villa, Second Delegate, Midwestern University

12

13 **Financial Impact:** None

14

15 **Board of Trustees Comments:** The Board appreciates the sponsors for bringing this issue  
16 forward. To ensure all leaders have access to the same training and idea exchanges regardless  
17 of their ability to attend national conferences, the Council on Membership has the following  
18 virtual programming throughout the year:

19

- 20 • Chapter Leadership Academies
- 21 • Chapter leader speed networking
- 22 • One-on-one meetings with the ASDA membership team on staff
- 23 • How-to guides and other resources.

24

25 Additionally, suggestions regarding programming for national conferences can be emailed to  
26 [meetings@asdanet.org](mailto:meetings@asdanet.org) to be considered by the NLC Planning Committee or the Committee on  
27 Sessions. Therefore, the Board recommends a no vote.

28

29 **Reference Committee Comments:** The reference committee recognizes the resolution will  
30 require ASDA to host a chapter leader meeting at each national conference. The reference  
31 committee appreciates the idea of leadership training and encourages members to submit a  
32 project proposal to the Committee on Sessions or the NLC Planning Committee for further  
33 development. Governing documents are meant to stand the test of time and a project proposal  
34 is a more appropriate format. Therefore, the reference committee recommends a no vote.

35

36 **Background:** Chapter leader readiness begins with strong guidance from our national  
37 leaders, ensuring each tier of membership is well-supported. To strengthen the connection  
38 between the national executive council and chapter presidents, I propose hosting  
39 presidential meetings at each national conference. These round table style meetings would  
40 help bridge the gap, foster relationships, and allow chapter presidents from across the  
41 nation to connect and collaborate.

42

43 These trainings should be facilitated by current or immediate past members of the national  
44 executive council at the annual session, and focus on the following key areas:

- 45 • Training on managing chapter finances/tax documents using ASDA provided  
46 resources (i.e., Excel template).

- 47
- Review of the strategic planning template and event timelines for the quarter/year to enhance planning and execution.
- 48
- Discussion with chapter in other districts to identify how different events are carried out in different districts to foster new ideas and relationships.
- 49
- Step-by-step guidance on applying for national or district positions, as outlined at the National Leadership Conference (NLC).
- 50
- 51
- 52

53

54 By implementing these initiatives, we can better equip chapter leaders with the tools and  
55 knowledge needed to succeed while fostering a stronger, more unified organization;  
56 therefore, be it

57

### RESOLUTION

58

59 **Resolved,** to strengthen chapter leader readiness, the national executive council shall host  
60 presidential meetings at each national conference, facilitated by current or immediate past  
61 council members, to bridge the gap between national and chapter leadership.

62

63 **Resolved,** these meetings shall foster collaboration amongst districts by having round table  
64 discussions composed of chapter leaders from different districts.

65

66 **Resolved,** these meetings shall include training on financial management, strategic planning,  
67 event timeline reviews for the quarter/year, and guidance on applying for national or district  
68 positions as outlined at the National Leadership Conference.

69

70 **Action:** The Chair moves 307-2025 with a recommendation of a no vote.

71

72 **House Action:** Adopted.

1 **Resolution Number:** RC308-2025

2

3 **Title:** Capping Conference Registration Fees for Two Years

4

5 **Reference Committee Assignment:** Membership

6

7 **Sponsor(s):** Emily Tarr, Alternate Delegate, Midwestern- Arizona

8 Margaux Sarno, Alternate Delegate, Midwestern- Arizona

9 Karim George, Alternate Delegate, Midwestern- Arizona

10 Alexandra Wyluda, Alternate Delegate, Midwestern- Arizona

11

12 **Financial Impact:** None

13

14 **Board Comments:** Received after the deadline for Board Comment.

15

16 **Reference Committee Comments:** The reference committee understands the concerns of the  
17 members to keep conference fees as manageable as possible. The ASDA Conference Fees Task  
18 Force suggested ways to offset the costs of attendance and will be assessed by the 2025-2026  
19 Board of Trustees for feasibility. Members can find these suggestions in Appendix B of the  
20 Reduction of ASDA Conference Fees Report which members can find in the mobile app.

21

22 The original resolution includes a call to reduce registration fees by 5% through non-dues  
23 revenue sources. However, there is no guarantee that these alternative revenue sources will be  
24 sufficient to cover the cost increases caused by inflation. Sponsorships, grants, and partnerships  
25 can be variable and may not consistently provide enough funding to offset inflation-related  
26 price hikes. The reference committee recommends capping the 2026 and 2027 registration fees  
27 at \$650.00 for Annual Session and \$650.00 for National Leadership Conference, as it does not  
28 rely on factors that are not predictable. Based on the current rate of inflation, this provides a 3%  
29 reduction in cost in 2026 and 6% reduction in cost for 2027.

30

31 Therefore, the reference committee recommends the substitute.

32

33 **Background:**

34 National ASDA was tasked at the 2024 annual session to investigate ways to reduce conference  
35 fees for members and chapters. For historical perspective NLC has climbed from \$505 in 2021,  
36 to \$599 in 2022, \$630 in 2023, and \$650 in 2024. At this rate we will price out the students who  
37 want to be a part of ASDA for the students who can afford to be a part of ASDA. Steps need to  
38 be taken to reduce these financial burdens on chapters.

39

40

## RESOLUTION

41

42 **Resolved,** for the years 2026 and 2027 registration fees are capped at the 2024- 2025 prices of  
43 \$650.00 for Annual Session and \$650.00 for National Leadership Conference.

44

45 **Resolved**, these efforts be reported to the 2026 and 2027 House of Delegates.

46

47 **Action:** The Chair moves substitution RC308-2025 in lieu of resolution 308-2025 with a  
48 recommendation of a yes vote.

49

50 **House Action:** Adopted.



1 **Resolution Number:** 400-2025

2

3 **Title:** Education and Events for Disability Awareness Month

4

5 **Reference Committee Assignment:** Professional Issues and Governance

6

7 **Sponsor(s):**

8 Miriam Villa, District 10 Chief of Staff, Midwestern-Arizona '27

9 Bree Zhang, Council on Advocacy Chair, Columbia '27

10 Alexandra Wyluda, ASDA Chapter President, Midwestern-Arizona '26

11 Ansen Zhi-Han Lai, ASDA District 11 Events Director, UCSF 2026

12

13 **Financial Impact:** None

14

15 **Board of Trustees Comments:** The Board recommends a yes vote.

16

17 **Reference Committee Comments:** The reference committee recommends a yes vote.

18

19 **Background:**

20

21 Dental education in the United States often lacks sufficient focus on managing special needs  
22 patients. The American Student Dental Association's (ASDA) **Statement of Position or Policy H-**  
23 **1 and H-6** acknowledges the importance of addressing the oral health needs of persons with  
24 disabilities and supports initiatives and legislation aimed at fostering their care. However, ASDA  
25 currently lacks concrete action plans to address these issues. Moreover, many dental students  
26 report insufficient training and awareness regarding how to treat individuals with special needs,  
27 factors to consider for comprehensive and compassionate care, and strategies for making their  
28 future practices accessible to all patients.

29

30 This resolution aims to address the gap between ASDA's policy stance and actionable efforts by  
31 proposing the creation of a Special Needs Task Force. This group will develop best practice  
32 guidelines to enhance accessibility in the dental workforce, ensuring that all patients receive  
33 equitable and competent care; therefore, be it

34

## 35 **RESOLUTION**

36

37 **Resolved,** that the 2025-26 Council on Professional Issues will be tasked with identifying  
38 resources that provide information, education, and events for Disability Awareness Month in  
39 October; and be it further

40

41 **Resolved,** that the 2025-26 Council on Professional Issues introduces a designated event to  
42 address Disability Awareness Month during ASDA's nationally recognized D&I Week.

43

44 **Action:** The Chair moves 400-2025 with a recommendation of a yes vote and to be placed on  
45 the consent calendar.

46

47 **House Action:** Adopted.

1 **Resolution Number:** 401-2025

2

3 **Title:** Creating a Certification Program Focusing on Council on Professional Issues Initiatives

4

5 **Reference Committee Assignment:** Professional Issues and Governance

6

7 **Sponsor(s):** Alexandra Wyluda, ASDA Chapter President, Midwestern-Arizona '26

8 Miriam Villa, District 10 Chief of Staff, Midwestern-Arizona '27

9 Bree Zhang, Council on Advocacy Chair, Columbia '27

10 Payal Patel, District 10 Trustee, ASDOH '26

11 Emily Tarr, Alternate Delegate, Midwestern-Arizona '26

12

13 **Financial Impact:** None

14

15 **Board of Trustees Comments:** The Board recommends a yes vote.

16

17 **Reference Committee Comments:** The reference committee recommends a yes vote.

18

19 **Background:** Vulnerable populations are groups and communities at risk for poor physical,  
20 psychological, or social health outcomes. Due to social, economic, political, and environmental  
21 elements, this population faces various accessibility barriers. The American Student Dental  
22 Association's (ASDA) **Statement of Position of Policy H-13** acknowledges vulnerable  
23 populations and supports initiatives and legislation relating to improving oral care approaches  
24 for this population. However, ASDA currently does not have an initiative to address this Policy.

25

26 Vulnerable populations experience disproportionate oral health challenges; the Center for  
27 Disease Control and Prevention states poor oral health among some groups of people is partly  
28 due to health disparities. Health disparities are defined as preventable differences in disease  
29 impact or opportunities in a population due to a type of disadvantage, such as physical or  
30 intellectual disabilities, limited access to services where one lives, or ability to afford health  
31 care services. These disparities show a direct correlation with poor oral healthcare by having  
32 limited access to healthcare, financial support, and resources.

33

34 This resolution aims to address the gap between ASDA's policy stance and actionable efforts by  
35 proposing the creation of a COPI Certification Program Focusing on Vulnerable Populations and  
36 Social Determinants of Health. This certificate creation will be building off of an existing  
37 certification program, and will enhance educating dental students to become competent  
38 healthcare professionals when treating members in vulnerable populations and addressing  
39 social determinants of health in healthcare; therefore, be it

40

41

## RESOLUTION

42

43 **Resolved,** that the 2025-26 Council on Professional Issues (COPI) investigate the feasibility of  
44 establishing a community service certificate program, modeled after the ASDA Advocacy  
45 Certificate Program; and be it further

46

47 **Resolved,** that the COPI present an annual report at the 2026 ASDA Annual Session to ensure  
48 accountability and transparency.

49

50 **Action:** The Chair moves 401-2025 with a recommendation of a yes vote and to be placed on  
51 the consent calendar.

52

53 **House Action:** Adopted.

1 **Resolution Number:** 402-2025

2

3 **Title:** Addressing Climate Change and Sustainability in Dentistry through Dental Education and  
4 Practice

5

6 **Reference Committee Assignment:** Professional Issues and Governance

7

8 **Sponsor(s):**

9 Bree Zhang, Council on Advocacy Chair, Columbia '27

10 Ansen Zhi-Han Lai, ASDA District 11 Events Director, UCSF 2026

11 Adam Yang, Alternate Delegate, Harvard

12 Jessica Gomez, District 8 Advocacy Chair, U 'Iowa

13 Pari Thakkar, Penn Advocacy Co-Chair, Penn '26

14 Utsavi Kapadia, Tufts '27

15 Ashley Sapra, Second Delegate, New England '26

16 Christine Park, Columbia '28

17 Pooneh Khazaeipool, District 2 Chief of Staff, NYU '25

18

19 **Financial Impact:** None

20

21 **Board of Trustees Comments:** Resolution was received after the deadline for Board comment.

22

23 **Reference Committee Comments:** The reference committee recommends a yes vote.

24

25 **Background:** The World Health Organization considers climate change the biggest health threat  
26 facing humanity. Research indicates that 3.6 billion people already live in areas highly  
27 susceptible to climate change.<sup>1</sup> US health sector is the world's number one emitter of  
28 greenhouse gasses in both absolute and per capita terms,<sup>2</sup> contributing to almost 10% of US  
29 greenhouse gas emissions.<sup>3</sup> Dentistry contributes approximately 3% of the 10% carbon  
30 footprint that healthcare creates annually in the United States.<sup>4</sup>

31

32 Climate change and other anthropogenic environmental changes have profound implications  
33 for both general and oral health, including, but not limited to, increased prevalence of heat-  
34 related illnesses, extreme weather-related injuries, air pollution-related respiratory conditions,  
35 and water- and food-borne diseases.<sup>5</sup>

36 **Rising Heat levels:**

37 Last year, 2024, was the warmest year since global records began in 1850. Earth's temperature  
38 has risen steadily per decade since 1850, and the rate of warming since 1982 has been more  
39 than three times as fast since 1850.<sup>i</sup> Heat stress contributes to increased antibiotic resistance,  
40 which is important for dental providers who prescribe antibiotics such as amoxicillin,

---

<sup>1</sup> <https://www.who.int/news-room/fact-sheets/detail/climate-change-and-health>

<sup>2</sup> [https://global.noharm.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint\\_092319.pdf](https://global.noharm.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint_092319.pdf)

<sup>3</sup> Eckelman MJ, Huang K, Lagasse R, Senay E, Dubrow R, Sherman JD. Health Care Pollution And Public Health Damage In The United States: An Update. *Health Aff (Millwood)*. 2020;39(12):2071-2079. doi:10.1377/hlthaff.2020.01247

<sup>4</sup> Batsford H, Shah S, Wilson GJ. A changing climate and the dental profession. *Br Dent J*. 2022;232(9):603-606. doi:10.1038/s41415-022-4202-1

<sup>5</sup> Hackley D. M. (2021). Climate Change and Oral Health. *International dental journal*, 71(3), 173–177. <https://doi.org/10.1111/idj.12628>

41 clindamycin, penicillin.<sup>ii</sup> Heat stress can also contribute to decreased efficacy of drugs in  
42 standard emergency kits for dental offices and increased risk of complications for dental  
43 patients taking diuretics or SSRIs.<sup>3</sup> Moreover, heat illness also exacerbates oral health problems  
44 such as periodontitis through systemic inflammation.<sup>iii</sup>

45

#### 46 **Air pollution**

47 Air pollution increases the prevalence of chronic respiratory diseases, and in fact, asthma  
48 prevalence has increased 50% each decade.<sup>iv</sup> Dental providers may need to be aware of  
49 increased rates of tooth decay for asthmatic patients, as drugs used to treat asthma that  
50 include antihistamines often contain sucrose and bronchodilators that cause dry mouth.<sup>v</sup> The  
51 bacteria and inflammatory factors produced by tooth decay, simultaneously, can contribute to  
52 pneumonia, and both asthma and chronic pulmonary disease are linked to periodontitis (gum  
53 disease) health through chronic inflammatory factors.<sup>vi</sup> Furthermore, as the ozone layer  
54 depletes and UV radiation increases, dental providers may see increased risk of lip and skin  
55 cancers of the face/head, which are associated with oral clefts—necessitating dental providers  
56 to handle more medically complex cases.<sup>vii</sup>

57

#### 58 **Water-borne illnesses:**

59 Rising temperatures and shifting weather patterns, combined with increased frequency of  
60 natural disasters, create favorable conditions for the proliferation of waterborne pathogens,  
61 leading to a higher incidence of infections. From an oral health standpoint, certain vector-borne  
62 diseases can manifest with intraoral symptoms. For instance, Zika virus may lead to intraoral  
63 ecchymosis, petechiae, and ulcerative mucosal lesions; dengue fever can result in gingival  
64 bleeding or hemorrhagic mucosal ulcers; and Lyme disease may present with headaches or  
65 temporomandibular joint (TMJ) disorders.<sup>viii</sup>

66

#### 67 **Extreme Weather Events and Migration**

68 According to a UN report, climate-related disasters have jumped 83% within the past 20 years.<sup>ix</sup>  
69 Dental providers, in the next few decades, may have to increasingly prepare for downed  
70 communications, lost patient records, limited transportation, disrupted supply chains, and  
71 increases in flooding. Furthermore, climate change could displace over 200 million people by  
72 2050, according to the American Bar Association.<sup>x</sup> Migrating populations are at risk of limited  
73 healthcare access, inadequate sanitation, food insecurity, and exposure to infectious diseases,  
74 putting them at risk for preventable and treatable conditions, including common oral diseases  
75 like dental caries and periodontal disease.<sup>xi</sup> They are also vulnerable to individual and collective  
76 violence, which can result in a higher prevalence of traumatic oral injuries. Dental providers are  
77 uniquely positioned as frontline responders in detecting and managing these injuries, as well as  
78 recognizing the mental health impacts resulting from displacement, loss of home, food  
79 insecurity.

80

81 Dental education and practice play a crucial role in addressing the environmental impacts of  
82 healthcare and preparing future oral healthcare professionals to mitigate and adapt to climate  
83 change and anthropogenic environmental changes on health challenges; therefore, be it

84

85

## 85 **RESOLUTION**

86

87 **Resolved**, that the following statements be added to ASDA’s Current Statements of Position or  
88 Policy under section “Other Issues” as a new section N-3:  
89

90 **Resolved**, that ASDA encourages dental schools to incorporate programs and curricula that  
91 educate students on the impacts of climate change on oral health and the dental workforce.  
92

93 **Resolved**, that ASDA encourages dental schools to incorporate programs and curricula that  
94 develop and implement sustainability-focused education and research including, but not limited  
95 to:

- 96 • Education on the procurement of environmentally responsible and ethically sourced  
97 dental supplies.
- 98 • Minimally invasive dentistry practices that reduce material usage and environmental  
99 impact.
- 100 • Development of frameworks for sustainable water management in dental practices,  
101 including water-efficient equipment and processes.
- 102 • Education on the environmental impact of dental materials, with strategies to minimize  
103 their footprint, reduce pollution, and implement best practices for waste reduction and  
104 environmentally responsible disposal.
- 105 • Integration of environmentally-responsible technologies to support sustainable  
106 practices.

107  
108 **Resolved**, that ASDA supports policies and practices that reduce the carbon footprint of dental  
109 care delivery.  
110

111 **Resolved**, that ASDA commits to advocating for sustainable practices in dentistry at the  
112 institutional, local, and national levels alongside relevant stakeholders.  
113

114 **Resolved**, that ASDA encourages dental practitioners and students to actively engage with and  
115 support surrounding communities disproportionately affected by environmental threats to  
116 promote climate resilience and health equity.  
117

118 **Resolved**, that the Council on Advocacy be tasked with further studying this resolution report  
119 back to the 2026 House of Delegates on topics pertaining to education of dental students of  
120 climate change on oral health and the dental workforce, including but not limited to:

- 121 • Heat stress and its effects on patient care, workforce productivity, antibiotics and  
122 medication longevity.
- 123 • Extreme weather events and their implications for access to care and infrastructure.
- 124 • Air pollution and its connection to oral and systemic diseases.
- 125 • Water-borne illnesses affecting community oral health.
- 126 • Food and water insecurity contributing to malnutrition and oral health disparities.
- 127 • Migration and displacement caused by climate change and their effects on patient  
128 demographics and oral healthcare delivery.

129

130 **Action:** The Chair moves 402-2025 with a recommendation of a yes vote.

131

132 **House Action:** Adopted.

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<sup>i</sup> Global Carbon Project. (2023, December 4). Fossil CO2 emissions at record high in 2023. Accessed January 18, 2023, from <https://globalcarbonbudget.org/fossil-co2-emissions-at-record-high-in-2023>....

<sup>ii</sup> Salas RN. The Climate Crisis and Clinical Practice. *N Engl J Med.* 2020;382(7):589-591. doi:10.1056/NEJMp2000331

<sup>iii</sup> Leon LR, Helwig BG. Heat stroke: role of the systemic inflammatory response. *J Appl Physiol* (1985). 2010;109(6):1980-1988. doi:10.1152/jappphysiol.00301.2010

<sup>iv</sup> Braman SS. The global burden of asthma. *Chest.* 2006;130(1 Suppl):4S-12S. doi:10.1378/chest.130.1\_suppl.4S

<sup>v</sup> 6. Arafa A, Aldahlawi S, Fathi A. Assessment of the oral health status of asthmatic children. *Eur J Dent.* 2017;11:357–363.

<sup>vi</sup> 8. Parashar P, Parashar A, Saraswat N, et al. Relationship between respiratory and periodontal health in adults: a case–control study. *J Int Soc Prevent Communit Dent.* 2018;8:560–564.

<sup>vii</sup> Agrawal A, Shindell E, Jordan F, Baeva L, Pfefer J, Godar DE. UV radiation increases carcinogenic risks for oral tissues compared to skin. *Photochem Photobiol.* 2013;89(5):1193-1198. doi:10.1111/php.12140

<sup>viii</sup> Hasan, Shamimul1,; Saeed, Shazina2; Panigrahi, Rajat3; Choudhary, Priyadarshini4. Zika Virus: A Global Public Health Menace. *Journal of International Society of Preventive and Community Dentistry* 9(4):p 316-327, Jul–Aug 2019. | DOI: 10.4103/jispcd.JISPCD\_433\_18

<sup>ix</sup> <https://www.undrr.org/news/drrday-un-report-charts-huge-rise-climate-disasters>

<sup>x</sup> <https://www.americanbar.org/groups/crsj/resources/human-rights/2024-october/climate-migration/>

<sup>xi</sup> Alrashdan, M. S., & Alkhader, M. (2017). Psychological factors in oral mucosal and orofacial pain conditions. *European journal of dentistry*, 11(4), 548–552. [https://doi.org/10.4103/ejd.ejd\\_11\\_17](https://doi.org/10.4103/ejd.ejd_11_17)



1 **Resolution Number:** 403-2025

2

3 **Title:** Amendment to the Standing Rules of the House of Delegates, Section 3. Order and  
4 Schedule of Business

5

6 **Reference Committee Assignment:** Professional Issues and Governance

7

8 **Sponsor(s):** 2024-25 Financial Reporting Team

9 Tareina Rogers, Vice President, Executive Committee Member

10 Jake Cantrell, District 1 Trustee

11 Gautam Rangappa, Chapter President, El Paso '26

12 Megan Kalpin, Chapter President, Texas-San Antonio '26

13 Jared Jacobson, Chapter President, Boston '25

14

15 **Financial Impact:** None

16

17 **Board of Trustees Comments:** The Board recommends a yes vote.

18

19 **Reference Committee Comments:** The reference committee recommends a yes vote.

20

21 **Background:** In response to resolutions 204-2024, the 2024-25 Board of Trustees appointed a  
22 team to research financial information that should be shared with House of Delegates  
23 members based on their role by reviewing association best practices and financial reporting  
24 conducted by other dental associations.

25

26 A survey requesting the level of financial information shared with house of delegates was sent  
27 to the following dental associations:

- 28
- 29 ● American Dental Association
  - 30 ● Academy of General Dentistry
  - 31 ● All 12 ADA recognized dental specialties including:
    - 32 ○ American Academy of Oral & Maxillofacial Radiology
    - 33 ○ American College of Prosthodontists
    - 34 ○ American Society of Dentist Anesthesiologists
    - 35 ○ American Academy of Periodontology
    - 36 ○ American Association of Endodontists
    - 37 ○ American Academy of Oral Medicine
    - 38 ○ American Academy of Oral & Maxillofacial Pathology
    - 39 ○ American Association of Public Health Dentistry
    - 40 ○ American Academy of Pediatric Dentistry
    - 41 ○ American Association of Oral and Maxillofacial Surgeons
    - 42 ○ American Association of Orthodontists
    - American Academy of Orofacial Pain

43 Given the extensive number of associations in the field of dentistry, parameters were set to  
44 narrow the focus to the two largest dental associations, the ADA and AGD and to those  
45 specialties recognized by the ADA. We also included the only other stand-alone student  
46 dental association, SNDA.

47

48 Below are the responses received:

49

50 Below is a summary of the survey results

- 51 ● 10 of the 15 associations responded to the survey.
- 52 ● 2 associations sent financial information before the meeting.
- 53 ● All associations share some type of financial report at their house or general assembly.
  - 54 ○ The majority of associations share a summary of revenue and expense by
  - 55 category for the year using pie charts. 2 associations provide only verbal
  - 56 summary reports.
  - 57 ○ 2 associations share an audited financial report and a profit and loss statement
  - 58 with a comparison to the prior year.
- 59 ● 6 associations allow questions, but 4 noted they are on a tight schedule. The 4
- 60 associations have a separate session for those interested in more detailed financial
- 61 information.

62

63 The team has fulfilled its directive and no further action is required; therefore, be it

64

## 65 **RESOLUTION**

66

67 **Resolved**, that the Standing Rules of the House of Delegates, Section 3 Schedule and Order of  
68 Business be amended as follows:

69

70 The speaker and secretary of the House of Delegates (executive director) are responsible for  
71 the day-to-day business of the House, including the order of business, the agenda and the  
72 sequencing of resolutions. The House of Delegates business meeting schedule is determined by  
73 the Committee on Sessions, but may be subject to change. Under extenuating circumstances,  
74 additional meetings of the House of Delegates during an Annual Session may be called by  
75 majority vote of the House.

76

77 The business meeting schedule should include a financial presentation and discussion and  
78 distribution of materials as noted below to ensure greater transparency and accountability in  
79 ASDA's financial matters, allowing delegates to review financial materials, ask questions, seek  
80 clarification, and engage in discussions to promote informed decision-making and oversight.

81

### 82 **A. Distribution of Financial Report Materials**

83

84 Materials regarding the financial report shall be distributed to credentialed delegates  
85 via email at least two weeks before the first day of the annual session.

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126

**B. Detailed Financial Reporting Requirements for Financial Presentation**

The financial report presented at the Annual Session must include the following information in numerical value, percentage, year-to-year percentage change:

- a) Total membership and past and projected trends
- b) Revenues in total and by category
- c) Expenses in total and by category
- d) Financial trends of revenues, expenses, and contribution to net assets over the past 10 years

**C. Team**

~~The Board of Trustees shall appoint a team consisting of three chapter presidents, one Board member, one current Executive Committee member, and one immediate past EC Member and a staff liaison to research financial information that should be shared with House of Delegates members based on their role by reviewing association best practices and financial reporting conducted by other dental associations.~~

**D. Financial Discussion**

Following the presentation of the financial report by the Executive Committee, along with the reasons for any updates or corrections, the Speaker of the House shall lead a discussion lasting at least 10 minutes during the second House of Delegates Business Meeting, allowing delegates to ask questions, seek clarification, voice any concerns regarding the provided financial material, and receive timely responses from the Executive Committee or staff during such session. The duration of this session can be extended or concluded by a simple majority vote called by a House delegate.

**E. Formal Requests for Additional Financial Items**

During financial report presentation and discussion session, delegates may formally request additional financial items by amending this section of the Standing Rules of the House of Delegates through a supermajority three-quarters vote called by a House delegate. The requested financial items must be documented by the secretary of the House of Delegates and included in the following year's financial report presentation and materials provided to House delegates.

**Action:** The Chair moves 403-2025 with a recommendation of a yes vote and to be placed on the consent calendar.

**House Action:** Adopted.

1 **Resolution Number:** 404B-2025

2

3 **Title:** Board Substitute- Establishing Pilot Grant Program for Give Veterans A Smile Events

4

5 **Reference Committee Assignment:** Professional Issues and Governance

6

7 **Sponsor(s):** 2024-25 Board of Trustees

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** The Board appreciates the sponsor’s intent to foster student  
12 engagement through providing funding to hold dental care events for veterans, an  
13 underserved population. Before the Board can allocate funding to a specific number of  
14 chapters and outline parameters for funding for future years, it needs to further investigate  
15 the following:

- 16 • Connecting with school administrations to determine the feasibility of hosting this  
17 type of event at the dental school.
- 18 • Connecting with state dental associations to determine if these events are already  
19 being planned or being held within the states.
- 20 • Connecting with entities that have hosted a GVAS event to determine the appropriate  
21 level of funding needed to successfully execute this event.

~~21~~

23 Therefore, the Board submits the following substitute resolution;

24

25 **Reference Committee Comments:** The reference committee understands the importance of  
26 providing care to veterans. An investigation is needed prior to implementation. The timeline  
27 outlined in the original resolution would not allow for a thorough investigation and  
28 implementation to take place, as COPI does not meet until April 26-27, 2025.

29

30 The reference committee is in support of this resolution as it will ensure an effective and  
31 sustainable program for years to come.

32

33

## RESOLUTION

34

35 **Resolved,** that the 2025-2026 Board of Trustees be tasked with investigating the feasibility of  
36 allocating at least \$5,000 in annual funding to support the establishment of Give Veterans A  
37 Smile (GVAS) events at dental schools; and be it further;

38

39 **Resolved,** that the Board of Trustees provide an initial progress report to the sponsors of the  
40 resolution, the ASDA representative on the ADA GVAS Advisory Committee and the 2025-26  
41 Council on Professional Issues after the Fall Council meeting; and be it further;

42

43 **Resolved,** that the 2025-26 Board of Trustees report back to the 2026 House of Delegates.

44

45 **Action:** The Chair moves 404B-2025 in lieu of 404-2025 with a recommendation of a yes vote.

46

47 **House Action:** Adopted.

1 **Resolution Number:** 405-2025

2

3 **Title:** Transparency in the Review Process of Resolutions by the Board of Trustees and  
4 Reference Committees

5

6 **Reference Committee Assignment:** Professional Issues and Governance

7

8 **Sponsor(s):** Adam Yang, Alternate Delegate, Harvard

9

10 **Financial Impact:** None

11

12 **Board of Trustees Comments:** The Board respects the author’s suggestions to modify the  
13 governance process to show vote tallies for Board of Trustees and reference committee  
14 members. The Board appreciates efforts that may foster transparency and accountability.  
15 Therefore, the Board recommends a yes vote.

16

17 **Reference Committee Comments:** The reference committee recommends a yes vote.

18

19 **Background:** The Board of Trustees and Reference Committees review resolutions and provide  
20 valuable recommendations. However, there is limited transparency regarding the specific  
21 content of their discussions or how they arrived at their recommendations. As a result,  
22 delegates only see the final recommendation—"yes" or "no"—without any further  
23 information in writing about the vote tally or whether the recommendation was unanimous or  
24 narrowly passed. This lack of transparency leaves delegates unaware of the full context  
25 behind the recommendations, which could impact the way resolutions are considered during  
26 House of Delegates sessions.

27

28 All delegates should be fully informed. Therefore, in the interest of transparency and  
29 accountability, it is essential that the Board of Trustees and Reference Committees disclose not  
30 only their recommendations but also the results of their votes and other relevant  
31 considerations. This will allow the House of Delegates to have a clearer understanding of the  
32 process behind each resolution and foster greater trust in the decision-making process;  
33 therefore, be it

34

35

## RESOLUTION

36

37 **Resolved,** that the Standing Rules of the House of Delegates be amended to require that the  
38 Board of Trustees and Reference Committees disclose the following information in the “Board  
39 of Trustees Comments” and “Reference Committee Comments” sections of resolutions for each  
40 resolution reviewed:

41

- 42 A. The final recommendation for the resolution (i.e., "Yes" or "No")
- 43 B. The tallies of the final vote (i.e., the number of votes for and against, abstain)
- 44 C. A summary of the key considerations and any points of disagreement among the Board  
45 or Reference Committee members in the event of a narrow or contentious vote

46

47 And be it further;

48

49 **Resolved**, that this change aims to provide the House of Delegates with greater insight into the  
50 review process and ensure that the decision-making behind resolutions is transparent and  
51 accessible to all delegates.

52

53 **Action:** The Chair moves 405-2025 with a recommendation of a yes vote and to be placed on  
54 the consent calendar.

55

56 **House Action:** Adopted.

1 **Resolution Number:** 406B-2025

2

3 **Title:** Board Substitute- Amendment to Bylaws Article V Section 3 District

4

5 **Reference Committee Assignment:** Professional Issues and Governance

6

7 **Sponsor(s):** 2024-25 Board of Trustees

8

9 **Financial Impact:** None

10

11 **Board of Trustees Comments:** In 2022, the Board of Trustees Standing Rules outlined the  
12 organization of districts and how many chapters would comprise each district. With several new  
13 schools opening in the future, the Board began an investigation as to whether redistricting  
14 would maximize chapter representation at the Board of Trustees level and support the  
15 sustainable growth of the organization. It surveyed the 2019-20, 2020-21 and 2021-22 Boards  
16 to determine how many chapters trustees could effectively manage to ensure each chapter's  
17 success. The survey results indicated that 4-8 chapters would be the ideal range. With that  
18 information, the Board approved redistricting of chapters that aligned with this range.

19

20 The Board appreciates the House's interest in approving redistricting plans in the future. To  
21 continue to ensure trustees can effectively manage the chapters within their districts and to  
22 have appropriate representation on the Board of Trustees that corresponds with the growth of  
23 the organization, the Board recommends the following substitute resolution;

24

25 **Reference Committee Comments:** In the Bylaws, Section 3, it states "A district is a grouping of  
26 chapters which facilitates joint chapter activities," whereas the Standing Rules of the House of  
27 Delegates, Section 4 Caucuses is focused on groups of delegates meeting to discuss House of  
28 Delegates business, which only occurs at Annual Session. Since districts operate throughout the  
29 year, the reference committee believes that redistricting approval is best outlined in the  
30 bylaws.

31

32 Based on what the sponsor submitted after the resolution deadline, the reference committee  
33 believes the sponsor is in agreement with the process outlined in this resolution.

34

35 Therefore, the reference committee recommends that 406B-2025 be adopted in lieu of 406-  
36 2025.

37

38

## RESOLUTION

39

40 **Resolved,** that the Bylaws Article V, Section 3 Districts be amended as follows:

41

42 Section 3: District

43



44 A district is a grouping of chapters which facilitates joint chapter activities. A district is not an  
45 internal unit of the association. Chapters of this association are grouped into districts based on  
46 geographical distribution.

47

48 **To ensure accurate and fair representation of chapters on the Board of Trustees, no district**  
49 **shall contain greater than eight (8) schools or fewer than four (4) schools.**

50 **The Board of Trustees is responsible for monitoring the number of chapters in each district.**  
51 **Should the number of chapters in one or more of the districts fall outside of this range, the**  
52 **Board of Trustees is responsible for submitting a plan for the reorganization of districts with**  
53 **input and consideration from chapter leaders prior to submitting to the House of Delegates**  
54 **for approval by majority vote.**

55

56 **In the case that no reorganization of district proposal is adopted, the House of Delegates**  
57 **recesses for the purpose of caucusing to discuss amendments to the proposal. The House of**  
58 **Delegates then reconvenes, and delegates vote again on a new proposal amended by the**  
59 **House\_in the same manner as before. If a proposal is not adopted, delegates will vote again in**  
60 **the same manner as before until an amended proposal is adopted.**

61

62 **Action:** The Chair moves 406B-2025 in lieu of 406-2025 with a recommendation of a yes vote.

63

64 **House Action:** Adopted.

1 **Resolution Number:** 407-2025

2

3 **Title:** Amendment to Current Statements and Position or Policy H-11 Vaccine Administration

4

5 **Reference Committee Assignment:** Professional Issues and Governance

6

7 **Sponsor(s):** Raven King, Alternate Delegate, Virginia

8

9 **Financial Impact:** None

10

11 **Board Comments:** Received after the deadline for Board comment.

12

13 **Reference Committee Comments:** The reference committee recommends a yes vote.

14

15 **Background:** HPV is associated with several types of cancer, including oral cancer and  
16 oropharyngeal cancer. According to the Centers for Disease Control and Prevention, 70% of  
17 oropharyngeal cancers in the US are caused by HPV. HPV vaccine provides the greatest  
18 protection when given at 9-12 years of age—age of which patients tend to see their dentist  
19 more than their primary care physician. Currently, only three states—Oregon, New Jersey, and  
20 Mississippi—have legislation that allows dentists to be able to administer HPV vaccines. Given its  
21 direct relevance to the profession and being the cause of one of the most common cancers  
22 diagnosed by dentists, ASDA’s policy should be updated to reflect the importance of dentists  
23 being able to vaccinate against HPV in their practice, as well as emphasize the importance of  
24 vaccinating early; therefore, be it

25

26

## RESOLUTION

27

28 **Resolved,** that ASDA’s Current Statements of Position or Policy H-11 Vaccine Administration be  
29 amended to read as follows:

30

31 The American Student Dental Association supports the ADA Policy on Vaccine Administration  
32 **and encourages more states to adopt legislation that allows dentists to administer HPV**  
33 **vaccination as a preventive measure to prevent oral and oropharyngeal cancers caused by**  
34 **HPV.** ASDA encourages dental schools to incorporate vaccine administration, **including HPV**  
35 **vaccination,** into their curricula and to administer vaccinations in clinical settings, when  
36 appropriate **(e.g., between 9-12 years of age for HPV vaccination).**

37

38 **Action:** The Chair moves 407-2025 with a yes vote and to be placed on the consent calendar.

39

40 **House Action:** Adopted.