CED Resolution

Dental Data Set and Access to Health Records 2026 Update

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I. Access to Health Records for Dentists

The Council of European Dentists (CED) is a European not-for-profit association which represents over 350,000 dental practitioners across Europe through 32 national dental associations and chambers in 30 European countries. Established in 1961 to advise the European Commission on matters relating to the dental profession, the CED key objectives are to promote high standards of oral healthcare and dentistry and effective patient-safety centred professional practice.

Oral health is an integral part of general health and well-being. A range of diseases can be classified as oral diseases including dental caries, periodontal diseases, dento-facial trauma, dental erosion, oral pathology and cancers. Oral cancer is one of the cancers with the lowest survival rate in the European Union, due to late detection. The survival rate decreases from 80% in cases of early detection to just 50%in case of late detection.[i]

The CED believes that there is a need for better information sharing between the professions to provide optimal care to their patients.

Digital health poses important challenges for the protection of patients' personal health data. The CED emphasises the importance of compliance with the General Data Protection Regulation (GDPR) and the European Health Data Space (EHDS) Regulation when processing and exchanging electronic health data. Dentists should be able to access relevant patient information for the provision of safe and effective healthcare, in accordance with applicable data protection requirements, professional confidentiality obligations and patients' rights to control access to their health data.

- In the interest of patient safety and continuity of care, dentists should have timely and effective access to relevant medical history information necessary for the provision of dental treatment, including through national and European electronic health record systems. Such access should be ensured in accordance with the European Health Data Space (EHDS) Regulation, while respecting applicable data protection requirements and patients' rights. The EHDS should take into consideration the needs and concerns of the dental profession.

- **Furthermore, information about a patient's allergies and previously prescribed medication is of crucial relevance in dental practice.** Instant notifications through e-prescribing helps dentists to provide alternative medication or suggest substitute therapies.

- It is crucial to increase early detection of potential oral cancer through increasing awareness and exchange of information among the medical profession, patients and the public.[ii]**Access to health-related information should be given to all healthcare professionals, whether they are part of the public system or not.**

- Dentists are typically the first professionals who are approached to treat ailments within the oral cavity, making them uniquely placed to perform opportunistic screening for e.g.oral cancer, lupus erythematosus, aphtha, mycosis and to provide advice and

counselling interventions during routine examination. **By having full access to a broad overview of patient health records, the dentist would have a better understanding of the risk factors affecting the individual.** This could improve early diagnosis which would ultimately benefit the healthcare system as a whole and improve survival of oral cancer patients.

II. Dental Data Set

A dental data set should be included in the cross-border information exchange. In implementing the EHDS, the CED calls for dentistry to be meaningfully represented in the development of interoperable electronic health records and cross-border exchange. The phased application of the EHDS, including patient summaries and electronic prescriptions from 2029 and medical imaging from 2031, should take into account the needs of the dental profession.

The inclusion of dental health records in national and European health records could eradicate unnecessary duplication of tests and procedures such as CBCT and OPT radiographs, which would deliver immediate savings to the healthcare system, avoid overexposure,[iii] and give the dentist the possibility to evaluate the previous images. Record sharing may also lead to reduced prescribing of antibiotics and other pharmaceuticals.

Dental records play a major role in identifying the victims of criminal investigations, mass disasters, grossly decomposed or traumatized bodies, and in other situations where visual identification is not possible. Forensic dentistry plays a major part in identification processes where other methods cannot, or can only be partially, used.

III. Dental data set

Bearing in mind the substantial amount of dental health-related information, the CED identified the basic dental data set and classified it depending on its relevance. The CED calls on the European Commission and Member States to take it into account when discussing the set of health information domains for cross-border exchange.

Relevant information that should be available to the dentist:

Information		**Justification**	**Examples**
Medi-cine/medic aments	Current use/prescrip-tion	Optimal care	Treatment impact Prescriptions
	Past use/pre-scription	Optimal care	Bisphosphonates carry high risks for simple dental pro-cedures Antibiotics – AMR
Allergies		Optimal care	Prescriptions by dentist
Social his-tory	Smoking, other tobacco usage/alcohol drinking	Optimal care	Estimation of cancer risk

Medical history	communicable diseases	Patient and dental team safety	Hepatitis type C HIV
Devices	General prosthesis	Optimal care	Hip prosthesis; Pacemakers can have a serious impact on chosen treatment
Pregnancy		Mother and fetus safety	

Dental data set to be included in the cross-border information exchange:

Information	Justification	Examples
Dental chart/ dental cross	Dental identification/forensics	Diagnosis and treatment efficiency
Images		
Panoramic radiograph	Dental identification/forensics Optimal care	Avoidance of over exposure to radiation Lesion dynamics
Bitewings	Optimal care Dental identification/forensics Optimal care	Decision to restore or not to restore
CBCT	Optimal care	Lesion dynamics
Devices		
Dental Implants	Optimal care	Data is necessary for repair of crown

The above-listed data set is not exhaustive and is the current minimum amount of information that should be part of the health data set for cross-border exchange. The dental data set should be periodically revised to reflect digital dental practice, including structured treatment information, intraoral scans, radiographs and implant information where clinically relevant. Any inclusion in cross-border exchange should follow agreed interoperability, data quality and security standards and avoid unnecessary collection or duplication.

It is not intended nor should it serve as guidance for dental practices in the treatment of patients; clearly, a full medical history must be taken, and full examination undertaken for diagnosis and treatment planning.

III. Recommendations

Access for all healthcare professionals to national and European health records will result in the improvement of the quality and continuity of care offered to citizens. Therefore, the CED calls for:

- The current abovementioned dental data set to be included in the health records of all patients in the European Union.

- The CED calls for timely, role-appropriate access to relevant electronic health information for dentists, and for practical implementation support, training and proportionate costs for dental practices. This is especially relevant for practices that are micro and small enterprises[iv]. Furthermore, ongoing initiatives and projects such as the EEHRxF Support Centre have to ensure dental workflows are considered within its work in relation to the EHDS.

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[i]European Cancer Information System (2018). Estimates of cancer incidence and mortality in 2018. Retrieved from https://ecis.jrc.ec.europa.eu/explorer.php?$1-All$2-All$4-1,2$3-1$6-0,14$5-2008,2008$7-7$0-0$CEstByCountry$X0_8-3$CEstRelative$X1_8-3$X1_9-AEE

[ii]CED White Paper Oral Care: Prevention is better than cure

[iii]Any digital imagery must be in compliance with the DICOM standard.https://www.dicomstandard.org/

[iv] European Commission Recommendation of 6 May 2003 concerning the definition of micro, small and medium-sized enterprises, section Annex, Article 2): '(…) a small enterprise is defined as an enterprise which employs fewer than 50 persons and whose annual turnover and/or annual balance sheet total does not exceed EUR 10 million., (…) a microenterprise is defined as an enterprise which employs fewer than 10 persons and whose annual turnover and/or annual balance sheet total does not exceed EUR 2 million.' https://eurlex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2003:124:0036:0041:en:PDF#:~:text=The%20category%20of%20micro%2C%20small,not %20exceeding%20EUR%2043%20million.