

Trustee Report
February 21, 2022

Our Members Come First

The first step to developing a Big-Data Repository of orthodontic treatment information is to standardize the data format that is being collected/used by various orthodontic software companies. This includes the data related to practice management, 2-D and 3-D imaging and other applications. Common data format simplifies data management and app development by unifying data into a known form and applying structural and semantic consistency across multiple apps and deployments.

At the February 2022 meeting of the AAO Board of Trustees (BOT), the BOT recommended that the following policies be sent to the 2022 AAO HOD for consideration:

1. That it be the position of the American Association of Orthodontists that the developers of orthodontic software should implement open and non-proprietary standards for data interoperability when available.
2. That that the American Association of Orthodontists supports the development of new open, non-proprietary data standards by stakeholders.
3. That the American Association of Orthodontists assesses open and non-proprietary data interoperability plans in new programs and budgetary matters.

You may ask: As a member of the AAO, I don't do research, can this really help me? The answering is an overwhelming Yes. Please let me provide you with an example. If you have ever experienced the pleasure/trauma of changing your practice management software (PMS), you will certainly have experienced the data transfer nightmare that accompanies such a change. Each PMS, which are effectively databases with other integrated functionalities such as word processing, scheduling, and bookkeeping, have their data in proprietary formats. Programs must be written to patch the data from one PMS to another. Often some data is lost and some data must be input manually because there may be "unique data" that doesn't match between the two systems. For example, the "address field" from the exporting PMS may include street number and street name in the same field (i.e. 25 Anywhere Lane) and the importing PMS may have the address broken this into two fields "street number" (i.e. 25) and "street name" (i.e. Anywhere Lane). This specific data will not transfer well between the two systems.

To reinforce this concept, if there was a common data format, the exporting PMS and importing PMS would use the same data format for the patient address, and the transfer of data would be seamless due to the data consistency. To take this one step further, if you have a patient that moves out of state/province and you need to transfer records (diagnostic, treatment, financial, lab and imaging) to another orthodontist, the data consistency would allow for almost seamless

transfer of the patient information from one provider to the next regardless of the PMS each provider is using.

Another issue that was discussed at the February 2022 meeting of the Board, that the BOT recommends that the AAOPAC Board of Directors adopt revisions to the AAOPAC Bylaws as recommended by outside counsel and the AAO's General Counsel, to bring the bylaws up to date with current pertinent federal and state law, to allow for the future possibility of donation of AAOPAC funds to state-level candidates, and to allow for the possible future creation of an advocacy fund that could accept donations from persons and entities outside of the current "restricted class."

As a Canadian, I am not involved in any decisions of the BOT related to AAOPAC and at this time I am not involved in the AAO Foundation. However, it seems to me that for a donation of just a couple of buck each day (less that the price of a coffee), you can make a significant difference to the AAO Foundation and/or AAOPAC. So, please give back to our profession.

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AAO Trustee