

GUIDELINES FOR APPLICATION OF TEMPORARY PRACTISING CERTIFICATE DENTAL ACT 2018 [ACT 804]

Malaysian Dental Council

Malaysian Dental Therapists Board

2022

CONTENTS

1.	Introduction	2
2.	Practitioner Eligible for Temporary Practising Certificates (TPC)	4
	2.1 Categories of TPC	4
	2.2 Conditions for TPC	4
3.	Requirements for Dental Practitioner	6
	3.1 General Requirement	6
	3.2 Additional Requirement	8
4.	Requirements for Dental Therapist	9
	4.1 General Requirement	9
	4.2 Additional Requirement	10
5.	Application Process	11
APPE	ENDICES	
A.	Application for Temporary Practising Certificate (Form 32 of the Dental Regulations 2021)	12
B.	Personal Declaration Form	16
Men	nbers of Working Committee	19

1. INTRODUCTION

Under Section 37 of the Dental Act 2018, any person who practises dentistry, either as a dental surgeon or a dental therapist, must be registered with the Malaysian Dental Council (MDC) or the Malaysian Dental Therapists Board (MDTB) and must have a valid practising certificate.

As stated in section 62 (2) of the Act, a person shall be deemed to provide dental services/be practising dentistry if:

- (a) he treats or attempts to treat or professes to treat, cure, relieve or prevent any disease, deficiency, lesion or pain of the human teeth or the oral and maxilla-facial complex and its related structures;
- (b) he performs or attempts to perform any operation or procedure on human teeth or the oral and maxilla-facial complex and its related structures;
- (c) he inserts or attempts to insert any artificial teeth or appliance for the restoration, regulation or improvement of the teeth or its related structures;
- (d) he performs any radiographic work in connection with human teeth, the oral cavity or the oral and maxilla-facial complex and its related structures;
- (e) he performs or attempts to perform reconstructive surgery with grafts or flaps to restore or in an attempt to restore defects in the oral and maxilla-facial region;
- (f) he performs or attempts to perform oral and facial plasty or restoration in the oral and maxillo-facial complex and its related structures;
- (g) he gives any treatment, advice, or attendance on or to any person in connection with the fitting or insertion for the purpose of fitting or fixing of artificial teeth or a crown or bridge or an appliance for the restoration or regulation of the human teeth or the oral and maxilla-facial complex
- (h) he gives any anaesthetic or sedative in connection with any such operation or treatment as mentioned in this subsection; or
- (i) he holds himself out whether directly or indirectly as practising dentistry.

The application for practising certificate must be made in the prescribed form, and such application shall be accompanied by the evidence of sufficient continuing professional development (CPD) points obtained as specified by the MDC or the MDTB, as the case may be; the evidence of Professional Indemnity Cover as required by the MDC or the MDTB; the evidence of approval or registration under the Private Healthcare Facilities and Services Act 1998 [Act 586] for every private healthcare facility to be entered in the practising certificate; the fee as prescribed in the Fourth Schedule; and any other documents or evidence, as may be required by the Dental Registrar or the Dental Therapists Registrar, as the case may be. In the exercise of the powers conferred by subsection 1(2) of Act, the Minister appoints the requirement for CPD points and Professional Indemnity Cover to come into operation on 1 January 2025.

Under section 40 of the same Act, a non-Malaysian may apply for a Temporary Practising Certificate (TPC) to practise dentistry. The TPC aims to enable the transfer of skills and knowledge across the dental practice and practitioners and maintain high standards in dentistry.

Under Section 40 (1), an applicant may apply for a TPC as a **dental surgeon** if he fulfils the following conditions:

- (a) he is registered outside Malaysia as a dental surgeon or the equivalent of a dental surgeon;
- (b) he -
 - (i) has passed the Professional Qualifying Examination; or
 - (ii) holds a qualification granted by an accredited local training institution and has been certified by the Dental Qualifying Committee to have fulfilled the requirements of the Professional Qualifying Examination;
- (c) he has proven to the satisfaction of the Dental Registrar that he is a fit and proper person and is of good character; and
- (d) he proves to the satisfaction of the Dental Registrar that he has an offer of employment or sponsorship.

Under Section 40 (2), an applicant may apply for a TPC as a **dental therapist** if he fulfils the following conditions:

- (a) he is registered outside Malaysia as a dental therapist or the equivalent of a dental therapist;
- (b) he holds any of recognised qualifications listed in the Second Schedule, granted by an institution specified in relation to that qualification;
- (c) he has proven to the satisfaction of the Dental Therapists Registrar that he is a fit and proper person and is of good character; and
- (d) he proves to the satisfaction of the Dental Therapists Registrar that he has an offer of employment or sponsorship.

A TPC shall be in force for a maximum period of twelve months. The holder of a TPC shall not have more than one practising address except with the approval of the MDC or the MDTB.

The Dental Registrar or the Dental Therapists Registrar may at any time cancel the TPC granted under this section, and such certificate shall lapse from the date of cancellation. The holder of a TPC shall, while the TPC remains in force and subject to the conditions and restrictions specified in the TPC, be deemed to be registered as a dental surgeon or a dental therapist.

Notwithstanding Section 40(1)(b), the Dental Registrar may issue a TPC to any person who holds a specialist qualification, subject to such terms and conditions as the Dental Registrar may determine. The Dental Registrar may, if he thinks fit, allow the holder of a TPC to practise as a dental specialist by stating on the TPC the speciality he is allowed to practise.

This guideline provides information on the requirements and procedures to apply and register for the TPC. This guideline was approved by the members of the MDC at the first MDC Meeting on 17 January 2022 and by the members of the MDTB at the first MDTB Meeting on 8 June 2022.

2. PRACTITIONER ELIGIBLE FOR TEMPORARY PRACTISING CERTIFICATE (TPC)

2.1 Categories of TPC

A TPC may be granted to a practitioner in the following categories:

- A. Exchange practitioner in the public sector
- B. Lecturer in Institution of Higher Education (IHE)
- C. External examiner invited by IHE
- D. Practitioner attending a hands-on clinical course
- E. Practitioner employed in private healthcare facilities (specialist at private hospital, spouse of Malaysian or permanent residents)
- F. Expert engaged in the transfer of skills and knowledge
- G. Contract and collaborating practitioner in the public sector and IHE to conduct dental clinical research
- H. Dental practitioner undertaking voluntary community service

2.2 Conditions for TPC

A TPC may be granted based on the following conditions:

Category	Criteria for TPC and Scope of Practice
A. Exchange practitioner in the public sector	Provision of dental services at government facilities only or as stipulated in the service contract (for example, fieldwork for forensic dentistry).

	Category	Criteria for TPC and Scope of Practice
B.	Lecturer in Institution of Higher Education (IHE)	TPC is required for lecturers who are involved in clinical supervision. Lecturers teaching basic dental and medical sciences, pre-clinical/simulation and laboratory are not required to apply for TPC. The scope of practice includes providing dental services as part of teaching and learning within the dental programmes at the specified IHE and approved healthcare facilities specified by the IHE. Provision of dental services is at the approved healthcare facilities in the IHE.
C.	External examiner invited by IHE	Provision of dental services as stated in Section 62 (2)(a–h) only, and is related to the Professional Examination of a dental programme only. External examiner involved in Objective Structured Clinical Examination (OSCE) only will not require TPC.
D.	Practitioner attending a hands- on clinical course	TPC is required if the practitioner provides the dental services stated in Section 62 (2) (a-h) and is related to the specified hands-on courses at approved facilities under supervision.
E.	Practitioner employed in private healthcare facilities (specialist at private hospital, spouse of Malaysian or permanent residents)	Provision of dental services at the specified private healthcare facilities [for example, hospital, Ambulatory Care Centre (ACC) or clinic].

Category	Criteria for TPC and Scope of Practice
F. Expert engaged in the transfer of skills and knowledge	Provision of dental services at specified clinical courses at approved facilities.
	Duration of TPC: Limited to the number of days of the specified clinical courses conducted by the expert.
G. Contract and collaborating practitioner in the public sector and IHE to conduct dental clinical research	Provision of dental services as specified by the research protocol.
H. Dental practitioner undertaking voluntary community service	Provision of voluntary dental services organised by or in collaboration with Malaysian organisations.
	Duration of TPC:
	 For a period of not more than seven consecutive days; and For a total of not more than fourteen (14) days in a year.

3. REQUIREMENTS FOR DENTAL PRACTITIONER

3.1 General Requirement

Under Section 40 (1), an applicant may apply for a TPC as a **dental surgeon** if he fulfils the following conditions:

- a. Registered outside Malaysia as a dental surgeon or the equivalent of a dental surgeon.
- b. Proven to the satisfaction of the Dental Registrar that he is a fit and proper person and is of good character.
- c. Proven to the satisfaction of the Dental Registrar that he has an offer of employment or sponsorship.

The requirements for the qualifications for TPC are as follows:

- i. For postgraduate qualification recognised by Dental Specialist Evaluation Committee (DSEC) the dental practitioner may apply for registration as a specialist to DSEC. The TPC can be applied upon approval.
- ii. For postgraduate qualification not recognised by Dental Specialist Evaluation Committee (DSEC), the postgraduate degree must meet the standard of postgraduate dental training required by the IHE.
- iii. PQE certificate or if exempted, the basic degree must meet the standard of dental training & examination specified by the MDC.

The qualification requirement for each category of TPC is summarised in **Table 1**.

Table 1. The qualifications required for each category of TPC

Category	Dental Surgeon		Dental Specialist
	Basic degree meets the standard of dental training & examination specified by the MDC	Postgraduate degree meets the standard of postgraduate dental training required by the IHE	Upon recommendation by DSEC
A. Exchange dental practitioner in the public sector	V		V
B. Lecturer in Institution of Higher Education (IHE)	٧	٧	٧
C. External examiner invited by IHE	٧	٧	٧
D. Dental practitioner attending a hands-on clinical course	٧		٧
E. Dental practitioner employed in private healthcare facilities (specialist at private hospital, spouse of Malaysian or permanent residents)	√ & [passed Professional Qualifying Examination (PQE)]		V

Category	Dental Surgeon		Dental Specialist
	Basic degree meets the standard of dental training & examination specified by the MDC	Postgraduate degree meets the standard of postgraduate dental training required by the IHE	Upon recommendation by DSEC
F. Expert engaged in the transfer of skills and knowledge	٧		V
G. Contract and collaborating dental practitioner in the public sector and IHE to conduct dental clinical research	V		V
H. Dental practitioner undertaking voluntary community service	٧		٧

3.2 Additional Requirement

Additional requirements and documents to be submitted for specific categories are as follows:

B. External examiner invited by Institutions of Higher Education

i. Letter of undertaking from the Person-In-Charge, Dean or Director of the Institution engaging the services of the external examiners.

D. Dental practitioner attending a hands-on clinical course

- Evidence of CPD points granted <u>OR</u> evidence of the course conducted by CPD provider as stated in the CPD guidelines.
- ii. Letter of undertaking from the Person-In-Charge, or Director of the facility that will be responsible for all treatment undertaken and for any dental or medical emergencies that may arise from the hands-on course.

E. Dental practitioner employed in private healthcare facilities (specialist at private hospital, spouse of Malaysian or permanent residents)

i. Letter of Approval from the facility if the applicant is also holding a TPC under Category B.

F. Expert engaged in the transfer of skills and knowledge

- i. Evidence of expertise.
- ii. Letter of approval from the employer/sponsor (for TPC holder who is already in another category).
- iii. Details of the procedure which will be carried out in the course.
- iv. Details of the course (including duration, number of participants and venue).
- v. Letter of undertaking from the Person-In-Charge or Director of the facility responsible for all treatment undertaken and any dental or medical emergencies that may arise from the procedures.

G. Contract and collaborating dental practitioner in the public sector or IHE to conduct dental clinical research

i. Memorandum of agreement.

H. Dental practitioner undertaking voluntary community service

- i. Memorandum of agreement.
- ii. Proof of a minimum of five (5) years experience as a dental surgeon.
- iii. Letter of undertaking (sponsor & local hospital/clinic) from the local hospital or clinic responsible for all treatment undertaken and any dental or medical emergencies that may arise from the procedures.

4. REQUIREMENTS FOR DENTAL THERAPIST

4.1 General Requirement

- a. Registered outside Malaysia as a dental therapist or the equivalent of a dental therapist.
- b. Holds any recognised qualifications listed in the Second Schedule, granted by an institution specified in relation to that qualification.
- c. Proven to the satisfaction of the Dental Therapists Registrar that he is a fit and proper person and is of good character.
- d. Proven to the satisfaction of the Dental Therapists Registrar that he has an offer of employment or sponsorship.

4.2 Additional Requirement

Additional requirements and documents to be submitted for specific categories are as follows:

B. Lecturer in Institution of Higher Education (IHE)

 Postgraduate degree meets the standard of postgraduate dental training required by the IHE.

C. External examiner invited by IHE

i. Letter of undertaking from the Person-In-Charge, Dean or Director of the Institution engaging the services of the external examiners.

D. Dental therapist attending a hands-on clinical course

- i. Evidence of CPD points granted <u>OR</u> the course conducted by CPD provider stated in the CPD guidelines.
- ii. Letter of undertaking from the Person-In-Charge, or Director of the facility that will be responsible for all treatment undertaken and for any dental or medical emergencies that may arise from the hands-on course.

E. Dental therapist employed in private healthcare facilities (spouse of Malaysian and permanent residents)

 Letter of Approval from the IHE if the applicant is also holding a TPC under Category B.

F. Dental expert engaged in the transfer of skills and knowledge

- i. Evidence of expertise.
- ii. Letter of approval from the employer (for TPC holder who is already in another category).
- iii. Details of the procedure which will be carried out in the course.
- iv. Details of the course (including duration, number of participants and venue).
- v. Letter of undertaking from the Person-In-Charge or Director of the facility responsible for all treatment undertaken and any dental or medical emergencies that may arise from the procedures.

G. Contract and collaborating dental therapist in the public sector or IHE to conduct dental clinical research

i. Memorandum of agreement.

H. Dental therapist undertaking voluntary community service

- i. Memorandum of agreement.
- ii. Proof of a minimum of five (5) years experience as a dental therapist.
- iii. Letter of undertaking (sponsor & local hospital/clinic) from the local hospital or clinic responsible for all treatment undertaken and any dental or medical emergencies that may arise from the procedures.

5. APPLICATION PROCESS

Application for TPC must be submitted using Form 32 in the First Schedule of the Dental Regulations 2021 - Application for Temporary Practising Certificate (**Appendix A**). Such application shall be accompanied by a fee as prescribed in Fourth Schedule of the Act.

Dental practitioners shall not practise until they receive their TPC. Hence, the employer/sponsor is advised to submit an application to the MDTB or the MDTB at least one (1) month before the practitioner is due to begin practise in Malaysia.

FORM 32

[Subregulation 48(1)]

APPLICATION FOR TEMPORARY PRACTISING CERTIFICATE

1.	Nam	e of applicant:
2.	Pass	port no.:
3.	Pass	port expiry date:
4.	Citizo	enship:
5.	Date	of birth:
6.		nanent address:
7.		l address:
8.	E-ma	nil:
10.	Parti	culars of qualification:
	(a) (b) (c) (d)	Description (in full):
11.	Parti	culars of post-graduate qualification (if any):
	(a)	Description (in full):

	(b)	Name of institution:
	(c)	Country in which the qualification is granted:
	(d)	Date of qualification:
	(plea	se use a separate sheet for every additional qualifications)
12.	Profe	esional position in country of origin:
13.	Profe	esional Indemnity Cover:
	(i)	Provider:
	(ii)	Membership/Policy no.:
	(iii)	Period of coverage: until
	(plea	se attach the relevant document)
14.	Perio	od of TPC: from until until
15.		ripal practising address:
		thcare Facilities registration number (under the Private Healthcare Facilities
	and S	Services Act 1998) (if relevant):
16.		r practising address:
		thcare Facilities registration number (under the Private Healthcare Facilities
	and S	Services Act 1998) (if relevant):
	(plea	se use a sperate sheet for every additional address)
17.	Parti	culars of payment: bank draft/money order/online:
	(a)	Reference no.: (b) Amount: RM
	(c)	Bank/post office & date:

18.	I her	reby attach the following documents as proof of having satisfied			
	the requirements of registration under section 40 of the Dental Act 2018				
	support this application:				
	(a)	a certified true copy of a basic dental qualification;			
	(b)	a certified true copy of a registration certificate from the country of origin;			
	(c)	a certified true copy of passport;			
	(d)	a certified true copy of a contract, an agreement or an appointment letter			
		from an employer or a sponsor;			
	(e)	personal declaration form;			
	Θ	three passport photographs;			
	(g)	Letter of Good Standing from the dental regulatory body of the country			
		of origin;			
	(h)	*a certified true copy of a post-graduate qualification:;			
	(i)	*a certified true copy of other relevant qualifications;			
	<i>(i)</i>	*evidence of experience as a dental specialist;			
	(k)	*evidence of experience in an academic post;			
	<i>(1)</i>	*letter of undertaking from university or healthcare facility covering any			
		and all emergencies;			
	(m)	*evidence of Continuing Professional Development;			
	(n)	evidence of payment of fee for temporary practising certificate as			
		prescribed in the Fourth Schedule of the Act.			
	(* If r	equired)			
		Date:			

Signature of applicant

DECLARATION

I,(full name)
the above named applicant, hereby declare that the particulars stated in this application
are true and correct and the documents attached are copies of original documents which
relate to me.
I have not at any time been found guilty of an offence involving fraud, dishonesty or moral
turpitude, or an offence punishable with imprisonment whether imprisonment only
or in addition to or in lieu of a fine.
Date:
Signature of applicant
to be completed by employer or organiser
19. Application for
I declare that the above name is a prospective employee/participant/student and
the details given are true to the best of my knowledge.
Signature of Dean/Director/Sponsor:
Date:
Name of Deep /Divertor /Consesser
Name of Dean/Director/Sponsor:
Seal:

APPENDIX B

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PERSONAL DECLARATION FORM

Nota:

- a. The Malaysian Dental Council (Council) reserves all rights to withhold or to terminate an application for registration or to take any action it deems fit, if any information or documents tendered is found to be false.
- It is a criminal offence to make a false statement, or to provide false information or documents to the Council.
- The Council may make any enquiries or obtain any information and documents that it deems appropriate from any party.
- d. If you are unsure about whether a matter is important, please inform the Council about it and provide full details to enable the Council to make a decision.
- The information provided in this application will be used only for the purpose of this registration and treated with the strictest confidentiality.

	DEDCOMAL DETAILS	
	PERSONAL DETAILS	
:	ame	
:	Identity Card/ Passport No.	
	HEALTH STATUS	
	Health condition	
th problems such as blood borne diseases Yes/ No , Hepatitis C), physical weakness, mental	, , , , , , , , , , , , , , , , , , , ,	
estion is "Yes" please complete the rest of this s "No", please go to Section C – Disciplinary	-	
	Record)	
re of the condition.	b. Please state the full	
a separate sheet)	(Please provide deta	
e first diagnosis?	c. What was the date of	
c mas diagnosa:	c. What was the date t	

2. Current status of health condition

a.	How does the condition affect you? (Please provide details in a separate sheet)	
b.	What was the date of the most recent episode or occurrence?	
C.	Details of treatment and advice received following the most recent episor (Please provide details in a separate sheet)	de or occurrence.

d.	 Details of the medical practitioner who are currently treating you (Name, Qualificat Address, Telephone number and Email). (Please provide details in a separate sheet) 	
e. Please state if your condition has resulted in any of the following:		
	 (i) Interruption or restriction of practice of dentistry. (Please provide details in a separate sheet) 	Yes/ No
	(ii) Referral to occupational health or for health assessments.(Please provide details in a separate sheet)	Yes/ No

3. Employment

a.	Have you been employed before? (If the answer to the question is "Yes" please complete the rest of this section. If the answer is "No", please go to Section C – Disciplinary Record)	Yes/ No
b.	Did you inform your employer of your condition?	Yes/ No

C. DISCIPLINARY RECORD

a.	Have you ever been reprimanded, suspended or deregistered by a dental regulatory authority? (If the answer to the question is "Yes" please complete the rest of this section. If the answer is "No", please go to Section D – Criminal Record).	Yes/ No
b.	Details of the regulatory authority that imposed the sanction, including your reference/ registration number; documentary evidence of the sanction imposed; and a full statement from you of the background and grounds of the sanction. Information of any appeal on the sanction (successful or not) must be submitted. (Please provide details in a separate sheet)	
C.	Have you ever been refused registration or a license to practice by any dental regulatory authority?	Yes/ No
d.	Details of the regulatory authority who refused registration; documentary evidence of the grounds for refusal; and a full statement from you as to the background and grounds for the refusal. Information of any appeal on the refusal for registration (successful or not must be submitted. (Please provide details in a separate sheet)	
e.	Has an employer ever taken disciplinary action against you?	Yes/ No

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f. Documentary evidence of the nature of the disciplinary action undertaken by the employer; contact details (Names, Address, Telephone number and Email) of person(s) involved at the employing organisation that we can approach to secure further information and details; and a full statement on the nature of the allegation and any other information you would wish us to consider. Information of any appeal including legal action (successful or not) must be submitted. (Please provide details in a separate sheet)

D. CRIMINAL RECORD

a.	Have you ever been convicted of an offence in a court of law or been cautioned? (If the answer to the question is "Yes" please complete the rest of this section. If the answer is "No", please go to Section E – Declaration)	Yes/ No
b.	Details of the conviction; date of the conviction, name and address of details of the penalty (if applicable) that was imposed. (Please provide details in a separate sheet)	the court; and the

E. DECLARATION

I declare that the particulars stated in this application are complete and the documents attached are true and authentic, and the information contained herein are true. To the best of my knowledge and belief, I have not withheld any material fact.			
cting any of the medical practitioner, the person il decides to do so.			
Date:			

MEMBERS OF THE WORKING COMMITTEE

1.	Prof. Dr. Dalia binti Abdullah	Chairman
2.	Prof. Dr. Abdul Rashid bin Ismail	
3.	Prof. Dr. Seow Liang Lin	
4.	Prof. Dr. Noor Hayaty binti Abu Kasim	
5.	Dr. Ha Kien Oon	
6.	Dr. Azilina binti Abu Bakar	
7.	Dr. Neoh Ein Yau	
8.	Dr. Sofiah binti Mat Ripen	MDC Secretary
9.	Dr. Sangithah a/p Tamilselvam	Secretary
10.	Dr. Nur Hamizah binti Abu Bakar	Co-secretary



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