

RCDSO

connect

October 2026

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Feature article

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RCDSO

Royal College of
Dental Surgeons of Ontario

rcdso.org

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MISSION

We act in the public interest and are committed to excellence in regulating the dental profession in Ontario.

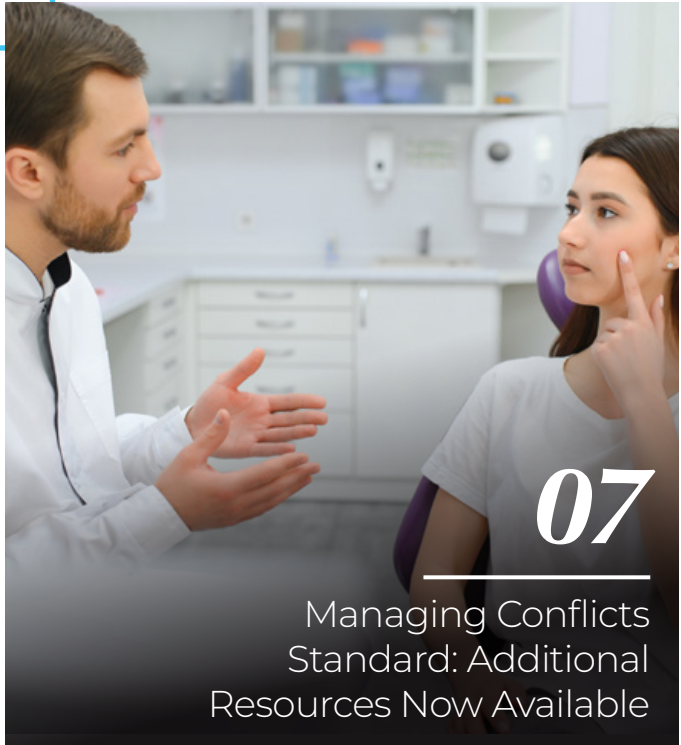
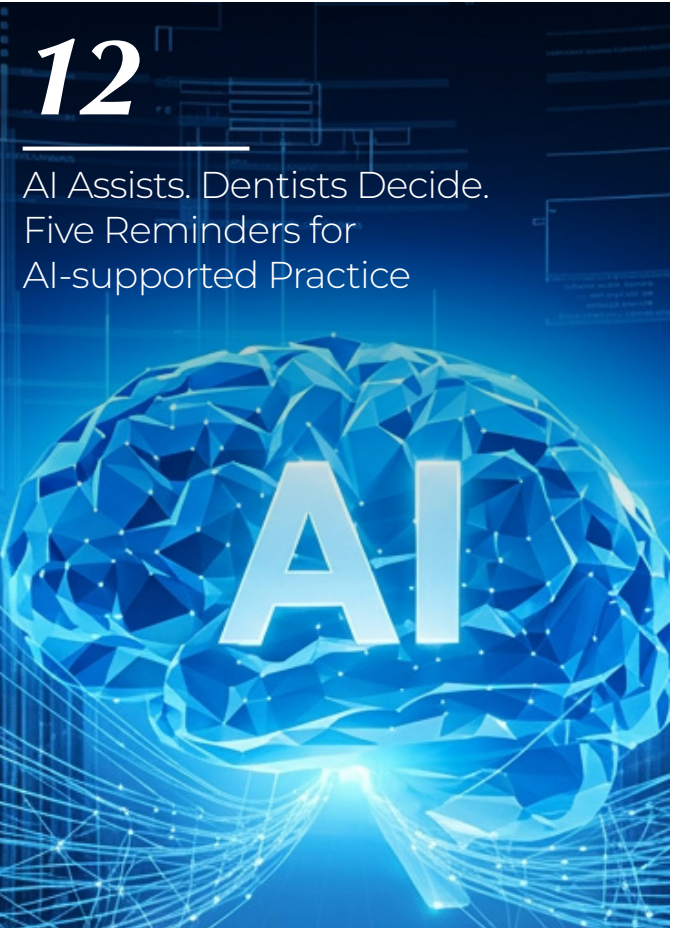
VISION

Everyone in Ontario has access to safe, high-quality oral health care.

PURPOSE

The Royal College of Dental Surgeons of Ontario (RCDSO) is one of 26 health regulatory colleges in the province with the responsibility and the legal authority to protect patients. The RCDSO is a leader in health regulation. We believe that regulation must be open, responsive, accessible, equitable and accountable in order to protect the public interest.

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MESSAGE FROM THE

President *and* Registrar & CEO

As we move into the final months of the year, we would like to take a moment to reflect on the importance of engagement, stewardship and collaboration in supporting the profession in pursuit of our public interest mandate.

We are grateful for the many ways registrants and system partners contribute to the College's work and to the strength of Ontario's oral health system.

Power of Participation

One of the most important opportunities for professional engagement will be the upcoming Council elections. In December 2026, registrants will elect seven dentists from across Ontario to serve on Council. These elected members bring valuable perspectives from diverse practice settings and professional experiences, helping to ensure Council remains representative and focused on the public interest.

We encourage all eligible registrants to participate. Voting is one of the most meaningful ways dentists can contribute to the future of self-regulation. Strong participation supports effective governance, strengthens accountability and helps ensure that Council benefits from the broad range of perspectives within the profession.

Stewardship in Action

We are also pleased to share that, at its September meeting, Council approved that there will be no increase to regulatory fees for 2027 and no cost-of-living increase.

This decision reflects Council's commitment to prudent financial stewardship while maintaining the resources needed to fulfill the College's mandate. As expectations of health regulators continue to evolve, the College remains focused on balancing financial sustainability with investments in regulatory programs, modernization and continuous improvement.

A Doorway to Better Care

We would also like to highlight a new collaboration that demonstrates the important role dental professionals can play within the broader healthcare system. RCDSO is supporting a pilot project with North York Toronto Health Partners (NYTHP), the Ontario Health Team for North York, to help connect patients to primary care providers.



Dr. Harinder Sandhu, Chair and President



Daniel Faulkner, Registrar & CEO

Dental practices are among the few healthcare settings that many individuals visit on a regular basis. Through this pilot, participating practices will be able to connect eligible patients to North York Primary Care Community Connect, a service designed to help local residents find a family doctor or nurse practitioner. At a time when approximately 50,000 North York residents do not have access to a regular family doctor or nurse practitioner, this pilot represents an important opportunity to improve access to primary care and support better health outcomes across the community.

In those moments, a dental practice becomes more than a point of access for oral healthcare. It becomes a trusted doorway into the broader health system. This initiative reflects the growing recognition that oral health is an essential component of overall health and the value of stronger connections across healthcare sectors to improve patient access and outcomes.

Better Together

On the occasion of the Ontario Fairness Commission's 20th Anniversary, we are increasingly reminded that meaningful progress often requires us to think beyond individual organizations and consider the broader systems in which we operate. Across healthcare, many of the challenges we face, whether related to access, workforce mobility, patient care, or professional regulation, cannot be solved by any one organization acting alone. Lasting improvement depends on collaboration, shared accountability and a willingness to examine established processes through a different lens.

Over the past two decades, regulators, educational institutions, assessment bodies, governments, and healthcare partners have

collectively advanced fairer, more transparent pathways into the professions while maintaining the high standards the public expects. This evolution demonstrates that there is rarely a single path to achieving positive outcomes. By continuing to work across sectors and focus on the ultimate goal of serving patients and the public interest, we can build a more responsive, inclusive, and effective healthcare system for the future.

Turning Commitment into Action

September 30th marked the National Day for Truth and Reconciliation, a time to honour First Nations, Inuit and Métis peoples and reflect on our role in advancing reconciliation.

We are embarking on an important next step for the College as we turn learning into action. In November 2026, we will launch our Reconciliation Action Plan, developed in partnership with First Peoples Group. This plan will provide a foundation for meaningful and sustained action across the College for years to come. We see this work as an important aspect of our role in protecting the public interest.

A Roadmap for 2030

Finally, we would like to extend our sincere thanks to the many dentists, system partners, Council members and staff who have contributed to the development of the College's 2026-2030 Strategic Plan.

Over the past several months, we have received thoughtful feedback through surveys, consultations, meetings and discussions. Participants shared perspectives on the opportunities and challenges facing the profession, evolving public expectations, and the future direction of regulation. The quality and breadth of the feedback received reflect a strong

Your commitment to providing safe, ethical, high-quality care continues to make a meaningful difference in the lives of Ontarians every day and remains the foundation of the public's trust in the profession.

commitment to advancing both the profession and the public interest.

Work is now underway to refine and integrate this feedback into the final plan. The completed 2026-2030 Strategic Plan will be presented to Council later in 2026 for consideration and approval. Once finalized, it will provide focus and a roadmap for how the College will continue to fulfill its mandate and strengthen public confidence in the profession and the regulatory system.

On behalf of the College and Council, we thank you for your work, your focus on patients and your engagement in the profession. Your commitment to providing safe, ethical, high-quality care continues to make a meaningful difference in the lives of Ontarians every day and remains the foundation of the public's trust in the profession.

Sincerely,

Dr. Harinder Sandhu
and **Dan Faulkner**

Council Members

Executive Committee

- Dr. Harinder Sandhu, Chair and President
- Dr. Nalin Bhargava, Vice President
- Marc Trudell
- Brian Smith
- Dr. Erin Walker

Elected Representatives

District #1	Dr. Nalin Bhargava
District #2	Dr. Robyn Somerville
District #3	Dr. Peter Delean
District #4	Dr. Neil J. Gajjar
District #5	Dr. Daniel Fortino
District #6	Dr. Harinder Sandhu
District #7	Dr. Erin Walker
District #8	Dr. Osama Soliman
District #9	Dr. Antony Liscio
District #10	Dr. Deborah Wilson
District #11	Dr. Eilyad Honarparvar
District #12	Dr. Anthony Mair

Appointed By Lieutenant Governor in Council

- Patrick Ballantyne
- Stephen Bird
- Ram Chopra
- James Colliver
- Vivian Hu
- Nizar Ladak
- Adal Simeone
- Brian Smith
- Roderick Stableforth
- Marc Trudell
- Judith Welikovitch

Academic Appointments

- Dr. Daniel Haas
- Dr. Noha Gomaa

Council Highlights

Council Highlights are emailed to registrants and posted online on the College's website after each Council meeting. It covers some of the key highlights of Council business.

- Read the Council Highlights from the [July 23rd, 2026 Council Meeting](#)
- Read the Council highlights from the [September 24th, 2026 Council Meeting](#).

Next Council Meeting

Our next Council meeting is: **December 3rd, 2026.**

- The meeting will be livestreamed on our [YouTube](#) channel.

Questions?

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Executive Assistant
and Council Liaison

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- [rcdso.bsky.social](#)
- [rcdsovideos](#)
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Access the RCDSO Connect Newsletter archive for previous issues



Managing Conflicts Standard

Additional Resources Now Available

The new *Managing Conflicts and Ending the Dentist-Patient Relationship Standard of Practice* came into effect on July 3, 2026. RCDSO has produced supporting materials for the new requirements.

These resources offer practical tips and examples to help dentists follow the new requirements.

- **Flow Charts:** Step-by-step visual guide to support decision-making in conflict management and ending a dentist-patient relationship.

- **Frequently Asked Questions (FAQs):** Answers to common questions about the Standard and its application in practice.

- **Case Scenarios:** Realistic examples that illustrate how the Standard may be applied in certain situations.

RCDSO will continue to develop FAQs and Case Scenarios to support dentists in applying this Standard.

Updates will be provided in future newsletters as new resources are published.

Dentists are encouraged to review these resources alongside the Standard and contact Practice Advisory Service with any questions. [R](#)

[Read the new standard](#)
[View online](#)

Your Vote Matters!

Shape the Future of Dental Regulation in Ontario

This fall, Ontario dentists will have an opportunity to help shape the future of their profession by voting in the *2026 RCDSO Council election*.

Voting opens on November 23, 2026 and closes on December 9, 2026, at 2 p.m. Eligible registrants will receive a secure voting link through our online voting partner, BigPulse, making it easy to participate from anywhere.

We understand life in practice is busy. Between patient care, family obligations, staff management and the day-to-day demands of running a dental office, voting in a professional election may not always feel like a priority. But Council elections are one of the most direct ways registrants can help influence the future of dental regulation in Ontario.

Why should you vote?

The short answer is simple: because Council matters. RCDSO Council provides oversight of the College's affairs and governs the profession in the public interest. Council members help set the College's strategic direction and make decisions about bylaws, standards, policies and other matters that affect how dentistry is regulated in Ontario.

While Council's role is focused on public protection, its decisions also shape the environment in which dentists practise. The individuals elected to Council bring valuable perspectives and help guide important discussions about the future of professional regulation.

Voting allows you to have a say in who fills those positions.

A new approach this year

The 2026 election marks an important change.

For the first time, the election will be conducted on a province-wide basis. Instead of voting within geographic districts, eligible voters will be able to vote for candidates from anywhere in Ontario. Registrants may cast votes for up to seven candidates, and the seven successful candidates will join Council.

This new approach is designed to support a modernized governance model and creates an opportunity for all eligible dentists to participate in selecting Council members from across the province.

Get to know the candidates

Before voting begins, registrants will have access to candidate profiles, including statements and information about each candidate's background and experience. These materials are intended to help voters make informed decisions about who they believe will best contribute to Council's work.

Taking a few minutes to review the candidate information can make a meaningful difference. Voting is not just about selecting names on a ballot. It is about choosing individuals who will help guide the profession's regulator during an important period of change and evolution.

Voting is easier than ever

Participating in the election is designed to be straightforward.

When voting opens, eligible registrants will receive a secure email from BigPulse containing a personalized voting link. After a quick verification step, you can review the candidates and submit your ballot online. The process takes only a few minutes and can be completed from your computer, tablet or smartphone.

The future of dental regulation in Ontario is shaped by many voices. Make sure yours is one of them.

Every vote helps strengthen the profession

Strong participation helps ensure Council reflects the interests, experiences and perspectives of Ontario's dental community.

Whether you have been in practice for decades or are early in your career, your voice matters. High voter participation strengthens the election process and helps build confidence that Council members have been chosen through broad engagement from the profession.

When voting opens on November 23, take a few moments to review the candidates and cast your ballot. Then encourage your colleagues to do the same. The future of dental regulation in Ontario is shaped by many voices. Make sure yours is one of them. [R](#)



Important Dates

Voting opens **November 23, 2026** and closes **December 9, 2026** at 2 p.m. Watch your email for your secure voting link from BigPulse.

Looking for More Information?

Visit the [RCDSO Elections webpage](#) for the latest election news, important dates, candidate information and voting resources. It is your central source for everything related to the 2026 Council election.

Don't Miss Your Ballot!



Voting for the **2026 RCDSO Council election** will take place through our secure online voting partner, **BigPulse**. To ensure you receive your personalized voting link and election reminders, please add BigPulse to your safe sender list and check that your email address in the RCDSO Portal is up to date.

Remembering Dr. Brian Feldman

The dental profession has lost a respected leader, educator and advocate with the passing of Dr. Brian Feldman.

Over a career spanning more than five decades, Dr. Feldman made significant contributions to dentistry through clinical practice, education, professional leadership and regulatory service. His commitment to advancing patient care and supporting the profession left a lasting impact on colleagues and students across Ontario and beyond.

Dr. Feldman graduated from dental school at the age of 22 and practised dentistry for 38

years. He taught Pathology and Histology at the University of Toronto Faculty of Dentistry for more than 50 years and later expanded his teaching portfolio to include Ethics and Jurisprudence. Throughout his academic career, he mentored generations of dental professionals and helped shape their understanding of both the scientific and ethical foundations of practice.

His professional accomplishments were wide-ranging. Dr. Feldman served as Editor of the Ontario Dental Association's *Ontario Dentist* magazine, developed innovative continuing education programs for dentists, consulted in forensic dentistry for the Ontario Coroner's Office, and held the role of Director of Professional Relations and Academic Affairs at Colgate Canada.

Dr. Feldman also devoted many years to supporting the College's regulatory and educational mandate. As a practice advisor, he provided guidance to dentists and contributed to numerous

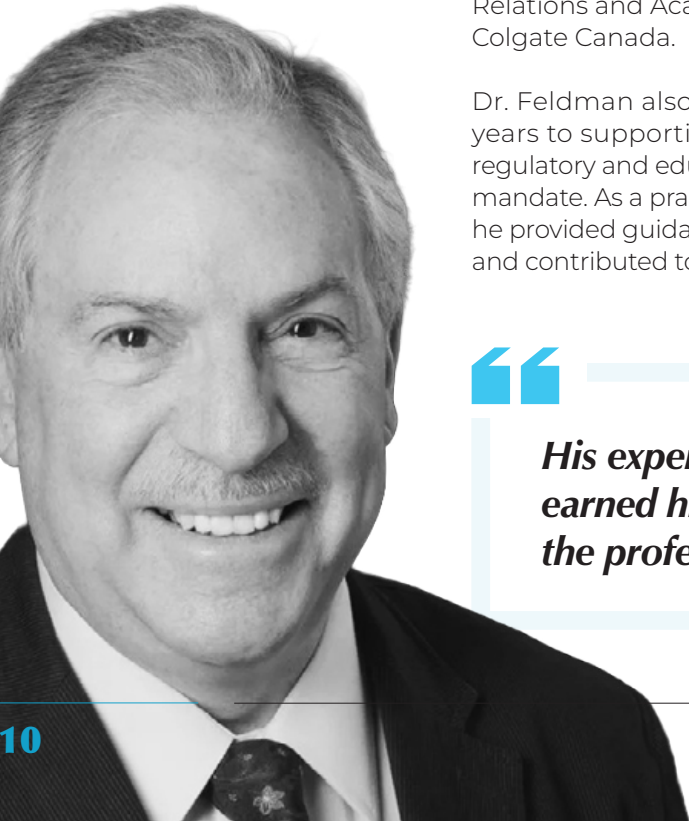
initiatives aimed at promoting high standards of professional practice. He was actively involved in developing educational resources, professional guidelines, courses, and communications that supported both the profession and the public.

Known for his sound judgement and practical approach, Dr. Feldman was widely respected for his willingness to share knowledge and offer thoughtful guidance. His expertise and commitment to excellence earned him the trust of colleagues throughout the profession.

Beyond his professional achievements, Dr. Feldman was devoted to his family and friends and was appreciated for his warmth, generosity, and sense of humour.

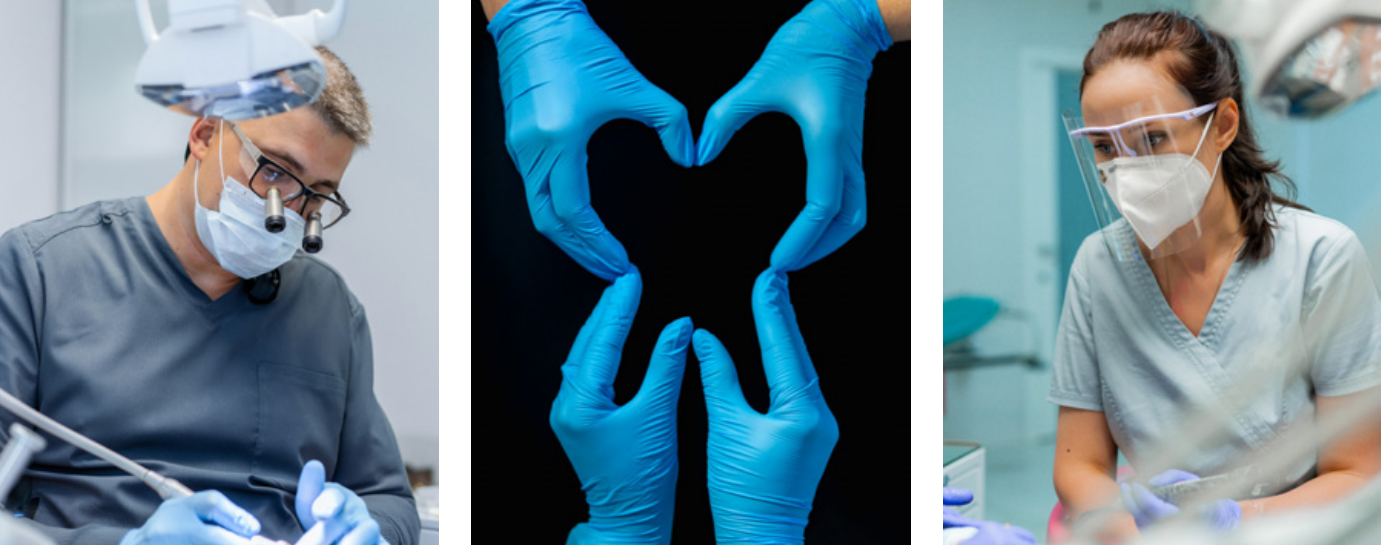
As the profession mourns his loss, it also celebrates a remarkable career. Dr. Feldman's contributions will continue to be reflected in the many individuals he mentored and inspired, and in the profession he helped strengthen throughout his lifetime. [R](#)

“His expertise and commitment to excellence earned him the trust of colleagues throughout the profession.”



Strengthening the Foundations of IPAC

Infection Prevention and Control (IPAC) is central to patient safety and quality care.



To help dentists strengthen their understanding of core IPAC requirements, the College is launching a new Fundamentals of Infection Prevention and Control course, delivered virtually on a quarterly basis, with an e-learning version planned for release soon.

Designed for dentists and members of the oral health team, the course provides a practical overview of the expectations outlined in RCDSO's IPAC Standard of Practice.

Participants will gain a deeper understanding of how infections spread, the measures that reduce transmission risks and the systems and processes that support a safe practice environment. Through practical examples and real-world applications, the course explores the day-to-day decisions that contribute to IPAC compliance and patient protection.

WHAT YOU'LL LEARN – TOPICS INCLUDE:

- Routine practices that reduce the risk of transmission, including risk assessment, hand hygiene and the use of personal protective equipment.
- Instrument reprocessing requirements, from cleaning and packaging to sterilization, monitoring and storage.
- Best practices for dental unit waterlines, dental handpieces and housekeeping in both patient and non-patient care areas.
- Documentation and record-keeping requirements, including sterilization records, office manuals and self-audits.
- Common compliance deficiencies, waste management obligations, and the reporting and follow-up processes associated with IPAC lapses.

Participants who attend at least 3.5 hours of the four-hour session and successfully complete the mandatory knowledge assessment are eligible to receive five Category 1 CE points.

For more information visit our website to find more IPAC resources and information about our course. You can also review our IPAC Standard of Practice and other related resources.



AI Assists. Dentists Decide.

Artificial intelligence is increasingly becoming part of everyday dental practice.

From supporting radiographic analysis and documentation to treatment planning, AI-powered tools can help dentists work more efficiently and communicate better with patients. But as these technologies become more capable, an important question emerges:

Where does the technology end and professional judgement begin?

AI can support clinician decision-making, but professional responsibility remains with the dentist. The College's guidance on artificial intelligence makes clear that AI is not a substitute for clinical knowledge, professional judgement or individual accountability when providing care to patients. Dentists remain responsible and accountable for the care they provide and for any decisions made with the support of AI tools.

As with any new technology, there is a risk of placing too much trust and reliance in automated recommendations. AI systems can identify patterns and generate suggestions, but they can also produce inaccurate, incomplete or misleading outputs. Human oversight remains essential.

The goal is not to avoid AI. Used appropriately, AI has the potential to support decision-making and enhance patient care. The goal is to use it thoughtfully and with appropriate professional oversight.

As AI continues to evolve, one of the most valuable professional skills may be the ability to challenge what the technology produces. Knowing when to accept an AI-generated recommendation and when to validate one is not a technical skill. It's a professional one.

That's the distinction that matters most: AI can provide information, but only a dentist can provide judgement. AI is not a substitute for dentists' clinical skills, knowledge, and professional judgement.



“That’s the distinction that matters most: AI can provide information, but only a dentist can provide judgement.”

5 Reminders to Ensure Patient-Centred Care

AI is a tool, not a clinician. Professional judgement cannot be delegated to software.

Question the output. AI-generated content must be reviewed and assessed critically, just like any other source of information.

Consider the full context. Patients are individuals, not data points. Clinical decisions must account for patient circumstances and preferences that may not be captured by an algorithm.

Understand the risks and limitations. Even highly sophisticated AI tools will sometimes make mistakes.

Stay accountable to patients. The responsibility for diagnosis, treatment planning, communication and patient care always rests with the dentist.

Resource Corner:

[GUIDANCE: ARTIFICIAL INTELLIGENCE IN DENTISTRY](#)

Key topics include:

- Accountability and responsibility
- Assessing the appropriateness of AI tools
- Transparency and disclosure
- Protecting patient information
- Maintaining professional judgement when using AI

[PATIENT BROCHURE: ARTIFICIAL INTELLIGENCE IN YOUR DENTAL CARE](#)

[FAQS: ARTIFICIAL INTELLIGENCE IN DENTISTRY](#)

Topics include:

- Whether dentists are required to use AI
- Evaluating AI-generated outputs
- Understanding risks and limitations
- Professional accountability for AI-assisted decisions

[ASSESSING ARTIFICIAL INTELLIGENCE \(AI\) TOOLS: A CHECKLIST FOR DENTISTS](#)

Responding when an IPAC Lapse Occurs

What happens when an infection prevention and control (IPAC) lapse occurs in a dental office?

Experts in public health, dentistry and regulation tackled that question at our June 24 RCDSO Connect Category 1 session, sharing insights on investigation, response and prevention. Panelists included Dr. Kate Bingham, Dr. Sonica Singhal, Dr. JoAnne Fernandes, Dr. Herveen Sachdeva and Dr. Helene Goldberg.

The discussion was timely. While IPAC lapses remain relatively uncommon, recent high-profile incidents in Ontario have demonstrated the significant impact they can have on patients and public confidence in the profession.

The session began with an overview of the provincial framework that governs IPAC investigations. Participants learned about the roles of public health units, the Ministry of Health, Public Health Ontario and the RCDSO in responding to complaints and investigating potential lapses.

Using real-world scenarios, panelists walked attendees through what happens when a public health unit receives a complaint. A key takeaway was that investigations often begin with an unannounced inspection, during which inspectors assess whether an IPAC lapse has occurred and whether patients may have been exposed to risk.



The panel also emphasized the importance of preparedness. Maintaining clear office policies, ensuring staff are properly trained, keeping accurate sterilization records and following manufacturers' instructions for instrument reprocessing are all critical components of an effective IPAC program.

For dentists, one of the session's most important messages was that accountability for IPAC cannot be delegated. While specific responsibilities may be assigned to trained team members, dentists remain responsible for ensuring safe care and compliance with applicable standards.

The discussion concluded with practical advice from panelists. Their message was clear: stay current with evolving guidance, regularly review office processes, support ongoing staff education and foster a culture where patient safety remains the top priority. [R](#)



Missed the session?
Watch it on our [RCDSO](#) YouTube channel.

[Watch the recording](#)

Getting Involved in Governance Committees and the 2026 Election

AUGUST 6, 2026

From Council service to committee opportunities and the 2026 Council election, our August 6 RCDSO Connect session highlighted the many ways dentists can play an active role in professional regulation. Council member Dr. Anthony Mair and Committee member Dr. Nicole Greenwood highlighted how registrants can contribute to the College's public protection mandate and help shape the future of dental regulation in Ontario.

Against the backdrop of ongoing governance modernization, presenters explained how the College has been working to strengthen governance through a competency-based and inclusive approach. The goal is to ensure Council and committees benefit from a broad range of skills and perspectives while maintaining a strong focus on protecting the public.

A significant portion of the discussion focused on the role of Council. Attendees learned that Council is responsible for strategic oversight of the College, including setting direction, approving policies and monitoring organizational performance. Council members are expected to act in the public interest and have a fiduciary duty that extends beyond the interests of any individual group or region.

The session also outlined important changes to this year's election process. For the first time, the election will be conducted on a province-wide basis, allowing eligible registrants to vote for candidates from anywhere in Ontario. Seven dentists will be elected to Council as part of the transition to the College's modernized governance model.

Beyond Council service, presenters encouraged registrants to consider committee participation as another meaningful way to contribute. Committee members play an important role in regulatory decision-making and public protection, while gaining valuable insight into how professional regulation operates.

Throughout the session, one message stood out: meaningful

governance depends on engagement. Whether serving on a committee, running for Council or simply casting a ballot in the upcoming election, registrants have an important role to play in supporting effective regulation and maintaining public trust in the profession. [R](#)



Missed the session?
Watch it on our [RCDSO](#) YouTube channel.

[Watch the recording](#)



Upcoming Connect Events:

Stay tuned for more information about our upcoming virtual connect event on November 5, 2026 focusing on the launch of our new **Reconciliation Action Plan**.

case *in* point

A recurring series examining real-world practice scenarios and the professional considerations they raise for Ontario dentists.

About 48 hours after the procedure, a family member called the office to report that the patient had been taken to the hospital by ambulance after experiencing stroke-like symptoms at home on the evening of the procedure and remains in hospital. They also reported that the patient had stopped taking his medications three days prior to the dental appointment. The dentist correctly completed a Tier 2 event report and submitted it to the RCDSO.

Reducing Risk, Improving Outcomes:

A Case-Based Review of Hypertension and Adverse Event

An emergency in the office is stressful for everyone. Here, we provide a fictional case to help dentists (and their teams) better prevent and manage these situations.

Professional considerations

This scenario highlights several important considerations for dentists when assessing and treating patients with complex medical histories.

Fictional Patient

- A 61-year-old male patient arrives for their dental appointment and consents to the removal of the three anterior teeth with nitrous oxide.
- The dentist answers all questions related to the proposed sedation and treatment plan.
- The medical history form in the chart, filled out three months ago but not updated at this visit, reveals a hypertensive patient with hypercholesteremia.
- The patient's conditions are managed with ramipril, furosemide, rosuvastatin and metoprolol.

Event

- Preop Blood Pressure 178/98. Nitrous titrated to effect, 5 carpules of lidocaine 2% 1:100 000 epinephrine administered to patient.
- Profound local anesthesia obtained. 11, 13, 22 were removed uneventfully.
- Three sutures were placed. Bleeding was controlled with local measures. Five minutes of oxygen administered prior to dismissal.
- Discharge blood pressure (190/108).

Patient assessment and risk stratification

A thorough pre-treatment assessment is a key part of safe patient care, particularly when sedation is planned. In this case, there was no documented American Society of Anesthesiologists (ASA) Physical Status Classification assessment or discussion of how the patient's existing medical conditions might affect treatment. Formal pre-treatment risk assessment helps dentists identify potential concerns and make informed decisions about patient management.

Keeping medical information current

Review and update a patient's medical history at consultation appointments and again before treatment. Changes in medication and medical conditions can affect patient management and clinical decision making. This helps ensure that treatment decisions are based on current and accurate health information and allows any newly identified risks to be appropriately assessed and managed. In this scenario, the patient's medical history had last been updated three months earlier, and it was later learned that they had stopped taking their medications before the appointment.

Responding to elevated blood pressure readings

Elevated blood pressure readings warrant further investigation before treatment proceeds.

Multiple readings taken several minutes apart may help rule out faulty readings, anxiety, poorly controlled hypertension or a white-coat-syndrome-related reading. If readings remain high, postponing elective treatment and referring the patient to their primary care physician for assessment and blood pressure management may be the most appropriate course of action.

As noted in Management of the Hypertensive Dental Patient (Valtellini and Ouanounou, JCDA 2023) current guidance can assist dentists in assessing and managing hypertensive patients in the dental office.

Monitoring during treatment

Blood pressure monitoring can provide valuable information before, during and after treatment, particularly for patients with known cardiovascular risk factors. Monitoring trends every five minutes can provide insight on how to manage the appointment, such as whether to allow the blood pressure to settle down, halt the procedure or modify the use of local anesthetic. In the cardiac patient, an absolute maximum dose of 0.036 mg epinephrine (two cartridges of a 1:100,000 solution) is advised, assuming the absence of a hypertensive response to the injection. In this scenario, an excessive amount of local anesthetic with epinephrine may have contributed to the adverse event. Although there are no recordkeeping

requirements to monitor blood pressure and vitals during appointments with no sedation or even minimal sedation, it can be a valuable guide and tool, especially before and after administering local anesthetic or during a potentially stressful appointment. Knowing a patient's vitals can help keep them safe and help manage treatment decisions.

Medication management and patient communication

Blood thinners and hypertensive medications play key roles in the daily management of patients' medical conditions and the prevention of severe cardiac events. Discussions about medication use should form part of the pre-treatment assessment process, particularly when sedation or more invasive procedures are planned. Understanding whether patients are taking medication as prescribed can help identify risks and mitigate medical emergency events.

Reporting adverse events

The dentist appropriately submitted a *Tier 2 event* report after learning of the patient's hospitalization. All dentists providing sedation or general anesthesia must monitor and report any serious adverse event (*Tier 1 event*) or other incident (*Tier 2 event*) to the RCDSO that occurs while treating patients with any modality of sedation. Dentists who provide sedation or general anesthesia should be familiar with their obligations for monitoring, documenting and reporting adverse events. [R](#)

Demographic Questions in RCDSO Consultation Surveys

Consultations are a key part of how the RCDSO gathers input to support important College initiatives, including the development of Standards of Practice. These consultations are open to everyone, including registrants, members of the public, organizations, and other interested parties.

To better understand who we are hearing from, we invite participants to voluntarily and anonymously share demographic information about themselves as part of our consultation surveys. We have been asking these demographic questions since 2023.

Participation in demographic questions is always optional and individual responses are anonymous. Each question includes a “prefer not to answer” option, and respondents can skip the section altogether without affecting their ability to provide feedback. We do not collect identifying information, and responses are stored securely and reported in aggregate form.

Understanding the purpose of demographic questions

Expanding the range of voices we hear helps to ensure that our work reflects the full diversity of the public we serve, and supports safe, accessible oral health care. Our approach is aligned with Ontario Health’s guidance and vision of a more equitable and healthier system.

By inviting diverse perspectives, we signal that all voices are welcome and we surface important perspectives that may be missing. This approach supports more thoughtful and balanced guidance to the profession.

Where traditional consultation approaches fail to reach underrepresented communities, we are able to explore and reflect on targeted engagement strategies. This approach reflects a fundamental commitment to meet communities where they are and engage in a way that is impactful, authentic, and meaningful.

How we developed the demographic questions

Personal demographic information is inherently sensitive and we never assume a willingness to disclose.

Our approach is grounded in thorough research and guided by evidence-informed, leading practices that emphasize individual autonomy and trust. We also worked with external experts, including the Canadian Centre for Diversity and Inclusion and Rainbow Health Ontario, to ensure that questions are inclusive, thoughtfully designed, and consistent with a trauma-informed approach.

Looking ahead

We are committed to using what we learn through data collection to strengthen our policy work, program development, and improve patient experiences. Through ongoing evaluation, we will ensure that our approach remains aligned with evolving best practices and supports inclusive engagement.



Related link: Equity, Inclusion, Diversity and Anti-Racism Framework | Ontario Health
[View online](#)

Building Trust Through Patient-Centred Care

Trust is one of the foundations of oral health care. Patients rely on their dentist’s expertise to explain treatment options and recommend care that is in their best interests. That trust is strengthened when clinical decisions are evidence-based, communication is clear and patients feel informed throughout their care journey.

Recent discussions about dental overtreatment have put a spotlight on the importance of professional judgement and patient-centred care. While treatment recommendations can vary between practitioners, decisions should be guided by current evidence and the unique needs of each patient. Differences in clinical judgement are sometimes expected, but patients should be able to understand the rationale behind the care being proposed.

For dentists, that means balancing clinical expertise with meaningful conversations that support informed decision-making. Taking the time to answer questions and discuss treatment options can help strengthen confidence in the care being provided.

What Builds Patient Confidence?

Patients are more likely to trust treatment recommendations when dentists:

- Clearly explain diagnoses and treatment recommendations.
- Use radiographs, photographs or other diagnostic tools to help patients understand clinical findings.
- Discuss the benefits, risks and alternatives associated with treatment.
- Encourage questions and support shared decision-making.
- Communicate transparently about fees, treatment timelines and expected outcomes.

These conversations are central to informed consent and can help prevent misunderstandings before they arise.

The College’s Role

The vast majority of dentists provide ethical, competent and appropriate care. At the same time, regulation plays an important role in maintaining public confidence in the profession. When concerns arise about treatment recommendations, billing or professional conduct, the College reviews complaints through legislated processes designed to assess whether professional standards have been met and to support accountability in the public interest.

Ultimately, trust is built one interaction at a time. By grounding clinical decisions in evidence, communicating openly and prioritizing patients’ interests, dentists help strengthen confidence not only in individual relationships, but in the profession itself.

Professional relationships with patients

Professionalism and trust go hand in hand. The College’s *Foundations of Professionalism* resource highlights the importance of integrity, accountability, transparency and putting patients’ interests first, principles that help guide everyday decision-making and strengthen public confidence in the profession.



Watchful Eyes, Careful Steps

Media coverage of a Toronto plastic surgeon ordered to pay \$22.5 million for secretly filming patients has underscored the legal and ethical risks associated with cameras in healthcare settings. For dentists considering installing cameras in their offices, it is essential to plan very carefully and strictly adhere to privacy obligations.

Purpose should be the starting point. Dentists should have a clear purpose for cameras to be installed, whether for security, risk management or operational oversight. Dentists should consider if there are other options that achieve the same result. It is also important to determine what cameras will record and whether cameras will record video only or include audio. (Audio recording may trigger additional privacy concerns and legal requirements).

Disclosure is critical to maintaining transparency and trust. Patients and staff must be clearly informed about the presence of cameras through appropriate signage in all areas where recording takes place. This disclosure should explain where cameras are located, what is being recorded, the purpose of the recording, and who may access the footage. The information must be sufficiently prominent and detailed to give adequate notice.

Consent is another key consideration. In areas where patients receive treatment, explicit disclosure of cameras and express consent to their use is required. Patients should be given sufficient information to support an informed decision and the option of refusing consent without jeopardizing their care.

Security of recordings must be robust. Practices should establish clear protocols addressing how recordings are stored, who has access, how long recordings are retained, and how recordings are securely disposed of when no longer needed. Weak safeguards can lead to unauthorized access or breaches, compounding liability risks.

Finally, **Personal Health Information (PHI)** must be carefully evaluated. Recordings may capture sensitive health information such as treatment being performed or patient data displayed on screens.

Dentists must comply with Ontario’s Personal Health Information Protection Act, 2004 (PHIPA), which may include determining whether recordings form part of the patient record and ensuring appropriate collection, use and disclosure of personal health information.

The recent case illustrates that cameras in clinical environments must be thoughtfully implemented so that public trust is maintained.

If dentists are interested in using cameras, seeking independent legal counsel is wise. The College’s Practice Advisory Service can help to expand on College advice practiceadvisory@rcdso.org. To learn more about the requirements of PHIPA, the Information and Privacy Commission has resources: [phipa-faq.pdf](#)

The following are requests for assistance obtaining dental records from various police services and coroner’s offices across Ontario.

If you have any information, please reach out to the contact listed in each case.



Patient Name	DOB	Requested From	Contact	Contact Email
Meagan McBride	07-22-1981	Toronto Police Service Case#: 26-1619241	Detective Constable Ho, Badge #81358	missingpersons@torontopolice.on.ca
Michelle Savard	03-14-1946	Ottawa Police Service	Detective Tristan Bailey	BaileyT@ottawapolice.ca
Gary Biron	06-19-1947	Ottawa Police Service Case#: 2026-257122	Detective Kipping, Badge #6081	KippingJ@ottawapolice.ca
Thi Dinh	07-06-1980	Toronto Police Service Case#: 26-1597503	Detective Dulatas, Badge #90303	missingpersons@torontopolice.on.ca
Katie Lawes	04-08-1981	Toronto Police Service Case#: 26-1596436	Detective Berry, Badge #8820	missingpersons@torontopolice.on.ca
Felicia Huggett	02-15-1993	Woodstock Police Service Case#: WP24018440	Detective Lyndsey Whetstone, Badge #1904	LWhetstone@woodstockpolice.ca
Kristopher Richard Charron	09-24-1997	Regional Advisor Office of the Chief Coroner Ministry of the Solicitor General Ontario Public Service North Region-Thunder Bay and Sudbury Offices	Heenal Trivedi	heenal.trivedi@ontario.ca
James Jardine	03-07-1982	Toronto Police Service Case#: 26-1417007	Detective Ueberholz, Badge #99681	missingpersons@torontopolice.on.ca
Gregory Ellis	05-26-1963	Toronto Police Service Case#: 26-1501207	Detective Quinn, Badge #99965	missingpersons@torontopolice.on.ca
Bezalel Mayombwe	11-26-1993	Toronto Police Service Case#: 26-1518639	Detective Quinn, Badge #99965	missingpersons@torontopolice.on.ca

How to Update Third-Party Insurance *for a Non-Insured Health Benefits Program Client*



To help avoid claim delays or rejections, it's important that the NIHB client's profile is kept up to date when there is a change in third-party insurance (such as employer or private health coverage). If the client's third-party insurance has ended or requires an update, the client or provider can contact the NIHB Call Centre at Express Scripts Canada or the Dental Predetermination Centre to update the client's profile.

When calling to update coverage by third-party insurance, be prepared to provide the required information during the call, including:

- Name of the thirdparty insurer
- Termination date of the policy (month and year), if known

This information ensures the client's claims can be processed without interruption.

Create and Manage Secondary NIHB Web Accounts

Did you know that providers who have an NIHB web account can now easily create and manage secondary accounts for their team members and grant any or all of the following privileges:

- Verify client eligibility
- Submit predeterminations
- Verify the status of predeterminations
- Submit claims
- View claims history

If you have not yet created a NIHB web account, you are encouraged to create a [NIHB web account](#) to upload documents. The website is:

<https://nihb-ssna.express-scripts.ca/en/03180501200527030315211420?o=0514181512>

Once you have an NIHB web account, you will be able to create and manage secondary accounts for your team members.

Providers are reminded that the signatory of the billing agreement is responsible for all claims submitted under the provider number issued by ESC.

To learn more about creating and managing secondary accounts, please review the document dated October 31, 2025, on the [Alerts](#) webpage at: nihb-ssna.express-scripts.ca/en/011205182019

Enrol for Direct Deposit Payments

Direct deposit is a fast, secure way to receive payment. Switch to direct deposit by logging into your [NIHB Web account](#) and updating your payment information. [\[i\]](#)

NIHB program and Express Scripts Canada contact information:

Please have your Provider Number readily available.

NIHB Call Centre at Express Scripts Canada:
1-888-511-4666

Dental Claims Submit online:

Through your [NIHB web account](#) at nihb-ssna.express-scripts.ca/en > [Log in](#)

Mail claims to:

Express Scripts Canada
NIHB Dental Claims
3080 Yonge Street, Suite 3002
Toronto ON M4N 3N1

Fax claims to: 1-888-249-6098

Provider Relations Department

Each additional office must be enrolled with the NIHB Program with its own Office ID before services being rendered.

NIHB program dental benefits

NIHB Dental Predetermination Centre (DPC)

Submit predeterminations online:

Through your [NIHB web account](#) at nihb-ssna.express-scripts.ca/en > [Log in](#)

Dental Services

Non-Insured Health Benefits

Indigenous Services Canada

200 Eglantine Driveway
Address Locator 1902D
Ottawa ON K1A 0K9
Tel: 1-855-618-6291
Fax: 1-855-618-6290



Use of Degrees in Advertising

Tell it like it is: When referencing academic degrees, be clear and factual. The actual degree earned should be written exactly as it was conferred. This applies to the use of acronyms too.

For example, the use of DDS, DMD, and BDS degree acronyms are not interchangeable. Dentists must only reference acronyms for their earned degrees.

Please make a habit of periodically reviewing your marketing and advertising materials to ensure that they are accurate. Each dentist is responsible for their online presence and printed materials regardless of whether advertising is handled by office staff, a principal dentist, management, or a third-party contractor.

This is one way for individual dentists to contribute to upholding public trust.

For more information, please see the College resource: [Use of qualifications, titles, and designations.](#)

Unauthorized Dental Practitioners

We want to make sure that only qualified and registered professionals practise dentistry in Ontario. In this regard, we publish a publicly accessible list of individuals who have been legally prohibited from practising for various reasons, including lack of credentials, disciplinary actions, or other legal issues.

If you are aware of these individuals or anyone else working without being registered with the RCDSO, please contact us at info@rcdso.org

Dentists should exercise caution when selling used materials and equipment to non-dentists. They may also wish to review the list of unauthorized practitioners available on our website.

Always check the public register

Dentists should always verify the credentials of potential employees by consulting the RCDSO public register to ensure they are

authorized to practice dentistry in Ontario. Before hiring anyone for your practice, be sure to cross-reference their license status on the public register to maintain compliance and patient trust. Patients are encouraged to check the register as well to confirm their dentist's authorization to practice and ensure they are receiving care from a qualified professional. [R](#)

Current suspended members

For Discipline files only, does not include suspensions for non-payment of fees:

- Kevin Kliman suspended Feb 5, 2026 to Feb 5, 2027
- Michael Danielak suspended July 21, 2026 to September 21, 2026
- Solomon Weiss suspended August 11, 2026 to January 11, 2027

DISCIPLINE SUMMARIES

2026 ONRCDSO 10 (CANLII) | ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO V WALIA | CANLII

Heard: May 19, 2026, by videoconference

Decision Date: May 19, 2026

Release of Written Endorsement: June 8, 2026

[READ MORE >](#)

2026 ONRCDSO 11 (CANLII) | ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO V TAKVORIAN | CANLII

Heard: May 29 and June 1, 2026, by videoconference

Decision Date: August 11, 2026

Release of Written Endorsement: August 11, 2026

[READ MORE >](#)

2026 ONRCDSO 12 (CANLII) | ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO V DANIELAK | CANLII

Heard: July 20, 2026, by videoconference

Decision Date: July 20, 2026

Release of Written Endorsement: August 24, 2026

[READ MORE >](#)

2026 ONRCDSO 13 (CANLII) | ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO V WEISS | CANLII

Heard: June 23, 2026, by videoconference

Decision Date: June 23, 2026

Release of Written Endorsement: September 4, 2026

[READ MORE >](#)

2027 ANNUAL RENEWAL

What Registrants Need to Know

Annual renewal is an important part of maintaining registration with the College and ensuring that registrant information remains current and accurate. As part of the 2027 renewal process, the RCDSO and the Navacord Dental Insurance Program have introduced a new approach to renewing professional liability insurance coverage.

Key changes for 2027 include:

- Registrants will continue to access annual renewal through the RCDSO Portal.

- As part of the renewal process, registrants will be connected directly to Navacord's secure online insurance platform.
- Primary Professional Liability Coverage can be reviewed and renewed as part of the annual renewal process.
- Registrants can also purchase or renew Excess Professional Liability Coverage, Legal Expense Insurance (LEI), and Disciplinary Hearing & Fitness to Practise Coverage.
- Registrants who currently hold Excess Professional Liability Coverage through Navacord will find key policy information and selected coverage limits pre-populated to support renewal.

While some aspects of renewal have changed, registrants will continue to begin the process through the RCDSO Portal and will be guided through each step.

Registrants are encouraged to review available renewal information before beginning the process and to watch for email communications throughout the renewal period containing important information, key dates, reminders and renewal deadlines.

Questions about annual renewal?

Visit our [Annual Licence Renewal webpage](#) or contact the Registration Department at registration@rcdso.org.

Questions about liability coverage?

Visit the [Navacord Dental Insurance Program website](#) or contact the Navacord Dental Protection Team at mydentalinsurance@navacord.com.

Welcome New RCDSO Members!

Zainab Subhan
Obay Alkhen
Rickson Daniel Valtellini
Amany Noshay Mohamed Abdelaziz Abouelella
Shiqi Dong
Katherine Anne Curry
Osamah Al Kayaly
George Hanna
Farah Al-Khasaki
Greeshma Grace Johnson
Oriola Madhi
Monica Kay Glavin
Sweta Snehal Patel
Vivian Song
Aakanksha Kanwar
Vikas Setia
Juwairiyah Munir
Armin Ai
Amitis Sarbaz
Noah Shachar Gasner
Mahdis Rezaei
Naimah Malik Karim
Syeda Gule Zahrah
Shaymaa Samir Mohamed Mohamed Morshdy
Kimi Hae Jin Lee
Shakiba Javadiansarraf
Nishesh Batra
Saranjeev Singh Lalh
Soundarya Lakshmi Nityanandam
Chidozie Uchenna Chukwujama
Mohamed Tarek Elsheikh
Matthew Mannarino
Nassar Faiz Naseeb Noshi
Mohit Bhasin
Navid Bagheri
Akhila Muraleedharan Sindhu
Sundas Kousar Ramzan Farrukh Anwar Mirza
Harnoor Dhillon
Dongjin Lee
Hiba Tanzeem
Moad Banun
Anu Susan George
Natasha Rhiannon Obradovich
Harshita Tiwari
Stiffy Kukreja
Victoria Katharine Thorburn
Tenzin Saldon
Sepideh Dadgar

Jiongci Xu
Ankita Mundh
Prabhjot Kaur Dhillon
Nicholas Nemeth
Diksha Rathor
Shalini Raveenthiran
Salman Hameed
Parigna Rajeshkumar Trivedi
Inderjyot Kaur
Gursharan Kaur Sandhu
Farina Faryabi
Harneet Kaur Sidhu
Dibin Ramaswamy
Mercedes Laurel Ing
Amani Bachir
Adamo Bernard Sgro
Ahmed Ismaiel Abdulrasoul Alali
Amna Batool
Aseel Hamie
Yossra Sherif Hamed
Ahmed Elkaddah
Amir Movahhedian
Hanine Danil
Manal Muzammil
Fereshteh Faghih habibabadi
Virgymar Coromoto Tovar Duin
Solmary Sihota
Ermelinda Milo
Saad Waheb
Andrea Alejandra Contreras Pierluissi
Solaleh Emadi
Mansi Hirak Patel
Jaspreetkaur Jasbirsingh Oberoi
Donald Joseph DeWolfe
Morteza Mina
Julian Bradley
Amna Nazar
Michael Marcus Klaus Oellinger
Giancarlo Modano
Erinda Baboci
Nada Osama Hussein Abdul Ghani
Matthew Kendrick Morris
Divya Bhardwaj
Syeda Madiha Asif
Asha Babu
Jasmeen Kaur
Alison Sara Rosenblatt
Scharmeni Balendran
Sandy Adel Joseph

Vidhi Dhavalkumar Patel
Antarpreet Kaur Sandhu
Shervin Rastiyani Tehrani
Ramneet Kaur
Megha Ramesh Agrawal
Rahul Avinash Bhatt
Duaa Arif Qureshi
Kanika Sharma
Faris Usman Nemat
Yi Wen Zhao
Sana Zehra Zaidi
Daman Darshan Singh Dhillon
Sydney Margaret Helen Goan
Bidour Raed Ali Al-Rawi
Sweta Lalji Varia
Mykhailo Cherniak
Geoffrey Cutler
Niyousha Mojri
Priyanka Chauhan
Nameeta Vasant Hankare
Sajeed Budwani
Ejda Shehu
Pedro Augusto Benatti
Rozalio Hallal
Arnold Yeou Pang Liu
Amrit Kaur Virk
Shamaila Asghar
Rahul Gupta
Satyam Dutt
Hua Phen Liu
Mozn Anwar Abdelrahman Mohamed
Niloofer Sadat Hashemi Zadeh
Fathima Fairouz Elayadath
Allana Gia Belsito
Nihal Mamlouk
Sana Faisal
Sushmitha Mangilipalli
Alyssandra Breanna Chee-A-Tow
Payal Jenil Patel
Harman Kaur
Ali Farsi Pishah
Nabeela Noorallah Pirani
Nava Najafabadipoor
Amr Ayman Aboelenin Ahmed
Navpreet Kaur
Pawandeep Kaur
Abhishek Vivek Nandavar
Delaram Bakhshaei
Ajaykumar Narshibhai Hadiya

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Moustafa El-Rass
Vaishali Gunasekaran
Zarah Siddiqui
Veenadhari Katherapu
Saranya Devatha Mallareddy
Ibrahim Y M Al Zatreh
Muneera Mohaiyadeen
Priyanka David Christian
Kajalbahen Dilipsinh Vaghela
Bansiben Dalpatbhai Goyani
Megha Umeshbhai Gondaliya
Parmida Sadeghi
Sri Naga Aruna Manthena
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Sameer Ahmed
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Nana Yaa Affum Asantey
Maida Ayyaz
Nishmi Salan
Rudra Pravinkumar
Prajapati
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Tareq A M Alsarafandi
Nick Rooz Jadidi
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Jaydip Damjibhai Kapuriya
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Myriam Haddad
Supreet Gill
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Abdelrahman Elsaid
Hala Khudhair Abdulazeez
Jaskaran Singh Chagger
Khushbuben Baldevbhai Patel
Mahsa Paydarnia
Safa Isam Abdelmageed
Mohamed Ahmed
Vijayanti Haresh Lotwani
Noor Wadea Salih
Pantea Mohamadi Nezhad
Solmaz Mohamadkhani
Priyanka Thakur
Sylvia Wyzga
Mahima Umeshkumar
Dudhat
Kiara-Lee Jaden Moses
Bharu Rahul Ghaie

Pasquale Benedetto Campagna
Manimekalai Senthil
Dhwani Prakashkumar Patel
Maulik Pankajkumar Patel
Smit Devidkumar Patel
Anisha
Xu Jing Zhao
Pallavi Kanwal
Nkoyiren Adefunke Ajie
Alireza Karimi
Vaishali Porchezhiyan
Aeshaben Kanubhai Patel
Dharatiben Pravinkumar Patel
Bhumika Pruthvish Patel
Harleen Kaur Hundal
Priyanka Puri
Sarita Jakhar
Yuliana Vanchak
Fatima Al Hakim
Sandeep Kaur
Maria Carolina Corredor Benitez
Charmi Mukeshkumar Patel
Rutuben Kaushikkumar Patel
Bhumika Sharma
Manjari Bansal
Samira Esmaeilzadeh
Mansi Rutvij Kathiria
Prahaz Bhatt
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Sununu Hemanth Kumar
Saimanasa Ravi
Ali Kallas
Yash Rajesh Acharya
Omer Sefvan Janjua
Daniah Mohammed Zainulabdeen Al-Jabbari
Hiral Rameshbhai Katrodiya
Mansee Nandani
Shamitrana Prabakaran
Arash Narimani
Majd Alsabbagh
Thakur Aakanksha Singh
Manpreet Kaur
Behin Zohoori Niya
Afsaneh
Yousefpourmoghanyoughi
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Meet Dipakkumar Patel
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Morteza Sharifian
Sagar Bhattarai
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Ibrahim Abdalla Mohamed
Christopher Emad Girgis
Preethu Prasannan
Zina Sami Mati Alkass Petrous
Nareman
Abdulazizmishtalanzi
Kinjalkumar
Mahendrabhai Patel
Deborah Temiloluwa Taiwo
Amanjot
Twishaben Anilkumar Patel
Pegah Soleimani
Aidin Soroudi
Sayedmohammadsajad Seyedamiri
Arihant Jain
Athena Xuesi Zhong
Amarjot Kaur Thethi
Jaya Lakshmi Akella
Jesse Boulos Roman Moussa
Sara Ayman Ahmed Aly
Rohan Aananth
Mahmoud Hanafy
Mahmoud Elsayed
Roozbeh Nadimifarokh
Sareh Aflaki
Rohtash Kapoor
Homayoon Nankali
Asoluka Ikenna Ofoegbu
Seung Hyun Ki
Arad Hashemi
Mansha Nayyar
Jessica Said
Ankush Nayankumar
Modh
ZhuZhen Huang
Kirandeep Kaur
Aulakh
Yalda Elham
Samuelbhai Sunilbhai Macwan
Samarth Rushikesh Thakar
Akash Sonavane
Jakes Mathew Mammen
Henry Assad
Masoud Amanifar
Hamed Hosseinkazemi
Masoud Hashemi
Hima Himalay Keekani
Kyle Andrew Gorospe
Elnaz Kamran Samani

Trevor Joseph Couch
Aisha Hashmani
Manbir Joginder Singh
Karishma Mitter Singh
Jasleen
Chelsea Julia Waid
Sargon Shlimon
Chenna Venkata Naga Sai Satyadev Chakka
Hazim Sadeddin
Kimia Sadeghi Khomami
Mehal Srinivasan Vedantham
Shehlanoor Saiyed
Nosa Ighile
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Camryn Rita Rohringer
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Alvina Asif Jiواني
Sahar Khoshab
Yun Bo Xi
Chimezie Benedict Chukwuma
Ibrahim Altay
Matthew Thomas Otto Sawka
Feras Balbous
Aishwarya Ramesh
Tinu Ann Varghese
Grace Emilia Watt
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Daryna Kucherenko
Elham Vakili
Felicia Wong
Malav Dilipkumar Shah
Aparna Ramanathan
Chi Ho Eric Tam
Stavros Menegakis
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Raksha Sagar
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Diba Behzad-Poor
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Sheikh Bilal Badar
Sandeep Pannu
Rojin Gharaezibaei
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Jia Xuan Li
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Afshan Grover

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Maya Philip Thomas
Maria Marilyn Paul
Eshmen Kaur Sidhu
Zaib Shahzad Qureshi
Katie Marie Robertson
Mahyar Peyravi
Lois Radu
Meghla Roy
Mario Elkes
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Shaimaa Elsayed
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Deborah Juyeong Park
Sandra Ekpen Imazenobe
Brijesh Maheshbhai Patel
Demille Ashton Odoardi
Sandy Mary Saju Mathews
Fatima Shahid
Nardin Soliman
Terence Kwai-Leung He
Rashmi Y Sembakuttige
Yeo Myong Bang
Abdul-Rafi Ahmed
Young Han Kwon
Elias George Said
Ichchha Neupane
Sophia Seungyeon Kim
Archana Thuraiarajah
Nimolpreet Singh Toor
Jasleen Kaur
Vanessa Temidayo Dairo-Singerr
Shiva Priya Panneer Selvan
Komalpreet Kaur Hanzra
Kelly Qin-Wang
Mujeer Ashraf Ahmad
Milo Edward Kalich Hawke
Samridhi Bhuria
Ayse Ozlem Suslen
Aydingoz
Shanuf Abdul Hameed Ulde
Seyed-Parsa Hosseini-Jahromi
Ava Nazemi
Amanpreet Singh Sandhu
Siyavash Motahari
Jacob Kevin Lee
Sonila Anne Joseph
Xue Ying Zheng

Payman Farbeezy
Deepak Khanna
Rachel Beth Wengle
Milad Fard
Navdeep Singh Brar
Shyama Chalam
Negar Nasirzadeh
Jobanpreet Singh Ruby
Celina Youjia Tang
Aniljot Kaur Wander
Kristian Robert Seke
Payaswi Mohata
Nirav Navinchandra Arora
Robert Jackson Joseph Moy
Ronit Sharma
Yue Yu
Saba Ebrahimpour
Gurshan Singh Toor
Emma Michelle Lily Jutlah
Anna Faye Smythe
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Charlotte Anita Owen
Ashleigh McTaggart
Omar Balbaa
Faiza Syeda Ahmed
Noor Mirza
Memoona Habib
Hongyan Liu
Noor Dahrouj
Zaina Kahiel
Dursa Koshkebaghi
Hanine El-Mawed
Andrew Charlie Chan
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Jeff Lin
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Mina Iranitalab
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Shaghayegh Farbiz
Celine Jafroodifar
Joseph Anthony Trottier
Hanad Ibrahim Duble
Daniel Lam-Sidun
Abhay Dhand
Ethan Edward Lau
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Aneri Naimeshkumar Patel
Navkiran Sandhu
Geri Balliu
Mariah Marentette
Gabriel Situ
Gregory Martin Balla
McFarlane
Marisa Garach
Alana Kalmar
Yasamin Vafi Manshadi
Shivani Mukesh Chachcha
Minna Ihsan Hasan Salim

Tony Beshay
Tanvi Sharma
Pedram Pakzad
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Monica Kay Glavin
Gabrielle Gosselin
Alero Boyo
Hamed Sartipi
Quentin Basiren
Raha Kaveh
Nadia Zamir
Merva Razzak
Shawna Rieux
Ahmad Koujan
Angelique Thibault
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Caileigh Fritz
Mymuna Mohammed
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Rameshchandra Bhandari
Chetan Sharma
Vispy Jigar Shukla
Anuradha Deshmukh
Jade Clarice Goodman
Harmandeep Kaur Mahal
Nimret Atwal
Hye Jean Kim
Yashkumar Natavarbhai Kovadiya
Viralben Soni
Samir Mansour
Jasneev Kaur
Manpreet Kaur
Ahmed Kased Thejil Thejil
Jaykarkumar Keshubhai Vadaliya
Shweta Prakashkumar Virani
Mohammed A M Al Shaikheid
Mahyar Kazerooni



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