

## Judgment

BY RUCHI NIJJAR, DDS

**O**ur profession is more than a skill. It is science. It is art. Food Network's prime time show *Unwrapped* gives us an inside look into the mechanics of producing foods like candy, chips, and other confections. We see the assembly line. The large metal machines – melt, mold, and pack. The machine endlessly repeats the motion without direction. The plastic wrap goes on that confection without a wrinkle.

It makes me think. The machines can perform their duties without direction. But who created the machines? Who directs the packaging protocol? Who assesses the quality of the confection?

*Ace of Cakes*, another prime time Food Network show, demonstrates how a unique bakery in Baltimore named Charm City Cakes, brings a customer's passions alive with their cake creations. They mold fondant into real-life replicas of pianos, people, and other personifications. It is a big-picture, vision-fueled, super-skilled operation — much like a dental practice.

Both TV programs show products that serve the same need: to delight, to sweeten, and to feed. But they used different processes to get there. One is assembly line mass production; the other is science-based art. One requires pushing the button; the other requires judgment.

According to the California Health Foundation, about 40 percent of California dentists are providers for Denti-Cal. This number decreases every year. Twenty-six percent of kindergarten-bound children have untreated decay, as reported by the California Smile Survey



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in 2005. In California, 6.5 million people are low income or disadvantaged. Most qualify for Medicaid. A significant 3.5 million of these people are children. However, only 700,000 of these children are covered by the California SCHIP program, Healthy Families. There is an unmet need for oral services for the underserved.

Special interests see a gap in the need for services and their delivery. The Legislature is driven by this unmet need to seek solutions. Hygiene uses delivery of care for the underserved as justification for entry into independent practice. The registered dental hygienist in alternative practice is the first step into that territory.

Special interests introduced legislation for a limited license allowing the graduates of one Mexican dental school to practice in California. Although the thrust was unsuccessful, the legislation showed the driver to meet the unmet needs of the underserved.

Most recently, dental health aide therapists work in remote villages in Alaska, performing dental procedures including extractions, palliative treatment, and prevention counseling. In Minnesota, an oral health provider, OHP, is being established. A workgroup is developing

the curriculum as we speak. The Legislature originally proposed an "advanced dental hygiene practitioner, ADHP.

Last year's May issue of the ADA's *Your Dental Advocate* reported that the Minnesota Dental Association and two dental students from the University of Minnesota (who were previously licensed, practicing dental hygienists) testified before the Minnesota Legislature, "I can't now imagine trying to make a final diagnosis and an adequate dental treatment plan without the education I'm getting in dental school." The former hygienists asserted: Creating an ADHP would not solve the access problem. It would expose patients to risk.

The 2008 CDA House of Delegates discussed the subject of the midlevel provider. In most settings, these providers provide care directed and/or dictated by a supervising doctor on whom liability for those activities rests. Other states, such as Minnesota, have been driven to implement this model to address the discrepancy of enough workforce to treat the underserved. The midlevel provider changes the prototype of the workforce model. Is this model relevant to the delivery of care in California?

It is the culture of the house, and perhaps dentists in general, to study

the many textures and implications of a problem before offering solutions. So we will study the options for alternative providers and how they may fit into the delivery of care. We will study the current workforce needs in California. We will study how to deliver the finest care with finite resources. The path of open-ended research could lead us in any-which direction. Yet, we want to be prepared to address all options the Legislature may propose with factual data.

The challenge will lay in our timing. As we debate the issue, study the statistics, and analyze the forks in the road, the world will continue to spin. It could pass us up easily.

My brother, a biomedical engineering major in college, constantly reminds me that one day a robot will be able to perform dental procedures on patients. He cites the robots already performing mitral valve repair surgeries. I get his point. We cannot begin to visualize or imagine tomorrow's technology possibilities. But the concept of a nondentist "robot" performing irreversible procedures on my patients frightens me.

There's more to dental procedures than just picking up the handpiece and drilling. However, are the procedures we perform the result of habitual exercises? Is the everyday rheostat or hand instru-

ment dentistry the motivating element of our day? What keeps us excited about our Monday mornings? It's the patients.

We listen. Patients must feel comfortable with the doctor to whom they tell their stories. We ask questions about their medical history, their symptoms, their daily life habits, and other factors impacting their overall health. We examine. Dentists collect objective data to effectively assess and diagnose the patient's oral condition. We use our education and experience to effectively explain the situation. We outline a plan. Isn't that the tough part? Understanding the type of procedures necessary and identifying the appropriate sequence and priority?

It is the mind of a dentist that the patient trusts. It is the diagnosis of a dentist that the patient seeks so that he can have faith that the procedure will resolve their oral health care needs. Our patients' oral health care is not a series of robotic tasks strung together and performed assembly line style. The picture is not complete without the judgment of a dentist. ■■■■

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