

Providing Quality Dental Treatment for Patients with Intellectual and Developmental Disabilities in Dental School Setting

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Issues

Patients with IDD often face challenges with access of dental treatment due to their presenting conditions including co-morbidities and ability to cooperate.

There are not enough dentists available to treat patients with IDD. This is often impacted by the dentist's attitude towards this patient population including; comfort, confidence, capability and accommodation.

There is a percentage of patients with IDD who require pharmacologic management to safely and successfully receive dental treatment.

Position

Breaking down barriers through education and training is the key to directly addressing healthcare disparities.

Exposing dental students, in a direct patient care clinical setting, to the treatment of patients with IDD can successfully break down existing barriers to treatment and resolve access to care challenges for this vulnerable population.

Providing established, effective and safe sedation and anesthesia care to facilitate the delivery of dental treatment increases access to care for patients with IDD.

History of Program

For nearly 20 years the Arizona School of Dentistry and Oral Health has been providing quality dental treatment for patients with IDD through its Advanced Care Clinic. During this time, the clinic has maintained a dentist anesthesiologist on staff providing education and training for dental students and AEGD residents in the comprehensive management of patients with IDD. Additionally, the attending anesthesiologist provides clinical services exposing students and residents to the treatment of patients under anesthesia.



The team consists of a supervising dentist who coordinates all dental treatment including working with dental hygienists and specialists, a dentist anesthesiologist, an EMT trained dental assistant and rotating students or residents. The students and residents go through a training module discussing the treatment of patients under anesthesia and are involved with the evaluation and scheduling of patients for treatment. The students and residents with the support of faculty, are responsible for all pretreatment documentation including medical consultations. On the day of treatment, the assigned students or residents provide all dental treatment with the involvement of specialists when needed.

Conclusions

This long established clinical care module has successfully exposed dentists to the treatment of patients with IDD. These young dentists feel more comfortable and confident treating this special patient population and understand it is possible to provide a robust spectrum of care safely and successfully in an office or clinic based environment.

Implications

- ♦ This innovative model, if implemented successfully, can elevate the ability of dental schools to serve as a safety net for many patients, both with or without intellectual and/or developmental disabilities, in the community who may not have access to sedation services due to social barriers such as cost, trained providers, and geography.
- ♦ Participating dental schools should consider:
 - ♦ Proper training for billing to insurance
 - ♦ Adequate didactic training for students and residents regarding patient medical conditions and sedation management
 - ♦ Ensure a 1:2 or less faculty to student ratio
 - ♦ Inform patients that student providers may require more chairside treatment time and longer wait times to get scheduled



Next Steps

- ♦ Implement a prospective survey to collect and analyze effectivity and effectiveness of the program from the patient's perspective
- ♦ Complete a prospective survey to collect and analyze impact of the sedation program on dental students
- ♦ Review and analyze the impact of sedation services on past residents through a retrospective study
- ♦ Distribute data and model to other dental schools and other community health clinics at conferences and events
- ♦ Serve as a resource for other programs
- ♦ Distribute data to important governmental agencies to advance advocacy efforts in regards to budgetary items for individuals with disabilities



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