

VIEW FROM THE PRACTICE

CASE ASSESSMENT

Clinical editor Rahul Doshi offers some advice to make sure your treatment fits the patient, and not the other way around

Whenever patients come to us with their problems, oral conditions and concerns; there are often multiple solutions available and applicable to their case. Indeed, when I qualified, case selection was limited to the use of a few treatment modalities. These days choosing the right case should be combined with other important factors - understanding multiple treatment modalities, knowing the breadth, depth and limitations of all the treatment options and be able to comprehensively assess the patient.

A comprehensive understanding of the various techniques and technologies available is required, so that their application to various situations is more fully understood. This enables the dentist to provide more comprehensive answers and options to any one case. No longer should we simplify treatment parameters to use in only certain cases. Adapting the various techniques or using combination of techniques can sometimes produce far superior results than use of a single technique.

UNDERSTANDING

Dentists should be striving towards better understanding of the techniques and treatments available, whether they have the confidence or skill to carry them out or not, and thus refer the treatment to be carried out by a colleague if necessary. Options should not be withheld from the patient simply because that treatment is not serviced at that practice. Otherwise, dentists can run the risk of providing limited options.

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The key to any case is producing an optimal treatment plan for the patient's requirements, needs, wants and budget. In some situations, it is obvious as to which treatment technique is most suitable. However, after further effective communication with your patient and better understanding of what your patient is looking for, it becomes necessary to look at alternative solutions as well. Thus, limited knowledge of techniques available in dentistry can disadvantage the patient.

For example, the classic options for a missing tooth could be orthodontics, implants, dentures, fixed bridges, composite or porcelain buildup/ restorations making use of line angles of the teeth either side of the gap, or transitional bonded bridges. We could open up further solutions if necessary to comply more fully with a patient's unique and specific needs. These could be with the use of combination techniques of some of the above techniques to produce the desired results.

If a group of dentists were to discuss a given case and what they would consider as an appropriate treatment plan, there would be numerous solutions based upon experience, skill, knowledge and understanding. However, what ultimately matters is suitability of treatment for the case presented and whether it falls into the realms of the patient's requirement and needs. It is then up to the patient to decide and make a fully informed choice, once they have fully understood the implications, advantages and disadvantages of treatment.

ASSESSING

This brings us to the next most important point - that of assessment. The only way to produce an optimal treatment plan for any patient is via a comprehensive examination. This examination should detail and include:

- The TMJ so as not to exacerbate any underlying conditions
- The occlusion to produce stability and



harmony in all excursions

- Awareness and removal of any potential occlusal interferences
- Assessment of the periodontal health
- Assessment of the integrity and structural component of teeth and their restorations
- A thorough aesthetic evaluation of the patient's concerns
- Evaluation of diagnostics that you may need to determine the optimal treatment plan.

Hence, a combination of case selection, fuller knowledge of the parameters of technique and a comprehensive assessment, diagnostics and treatment planning ability can produce superior and more appropriate solutions for your patients. Especially when compared to limiting options to select specific treatment modalities only.

Thus, it does make me wonder should we be more concerned with fitting the teeth to the treatment or the treatment to the teeth?

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