



BULLETIN

CALIFORNIA SOCIETY OF PEDIATRIC DENTISTS

SUMMER, 1992

VOL. XVIII, No. 2

“Discretion Is The Better Part of Valor.”

It was a usually busy afternoon in our pediatric dental office. It all began with a routine call for an appointment. The caller asked for an appointment on Saturday insisting the need was urgent.

“We don’t have Saturday office hours.” The caller then asked for a 7:00 PM appointment that evening. “We don’t have late evening appointments. If you need the Saturday or evening appointments, we might suggest other offices that might be able to accommodate you.”

“My child has a toothache and he needs to be seen right away.”

“How long has he had this problem?”

“About a month.” “My pediatrician recommended you.”

The parent persisted and managed to talk the staff into seeing the child later that afternoon. The parent was told that due to the lateness in the day of the call and the limitations of time, very little other than identifying the nature of the dental problem would be done. She still wanted to come in.

The parent came in and as she was handed the registration forms, she began quizzing the staff in the reception area on our infection control measures. She made references to recent T.V. episodes on cross contamination from handpieces.

The staff answered her questions about the universal precaution procedures of the office. They assured her that we “sterilize” our handpieces in our “autoclave.” She then responded, “The Health Department says I can inspect your autoclave and your office procedures before you see my child.” “I’ve worked with OSHA before and I know I can inspect your facility.”

The parent insisted that the issue was “life or death.” She asked why don’t other parents insist on inspecting the facilities prior to letting us see their kids. The staff responded that our parents are usually satisfied with openness for questions and further, we enjoy an element of trust with the doctor/patient/parent relation. It got to the point where the staff suggested that if we are not meeting her needs that another office might accommodate her expectations. She persisted.

I couldn’t stop working on the scheduled patients at the time. However, as I talked with the other parents for my exit instructions for the patients, three sets of my parents came in warning me about this woman I never met. They were on our side.

I finally isolated her out. She again invoked the Health Department and OSHA in her demands to inspect the facility prior to seeing her child. I asked if she was a governmental agent, or working for the Health Department or OSHA, and if she were trying to entrap us. She said she was not.

I told her that we have nothing to hide but that this is private property and she does not have the right to see any areas of our office on demand. If the limitations are not consistent with her needs than this office may not be the right one for her. If she wanted to have me see her child then she would have to accept our conditions of the examination. She finally acquiesced...or so I thought.

It turned out that her child simply had an erupting lower permanent molar. It wasn’t inflamed. The child said it wasn’t even hurting. He was teething!

We told the mother that the problem was a normally erupting tooth. The condition simply needs time to resolve. No treatment other than home care instructions were needed at this time. The mother seemed satisfied. As she left, she showed me one of our AIDS brochures developed by the Council on Dental Health. I acknowledged the content so far as to tell her that I helped to produce the material in the brochure. The obvious discomfort on our part was disquieting.

After the long weekend, I returned to find a message from the coordinator from the Council on Dental Health. I had worked with this coordinator for the last three years. The coordinator said she had fielded a funny call from a mother who complained about a pediatric dentist who refused to allow her to inspect his infection control measures in his office and demanded to know what her rights were. Before the coordinator could finish relating the story, I told her it had been my office.

The complaining parent had couched and distorted her perceptions of the office visit. Luckily the staff members at CDA knew me personally and my “fragile” reputation was left intact.

Knowing that this person is capable of distorting and overstating the issue, I sought counsel from CDA Judicial Council on the status of my relationship with the patient and how to dismiss the patient. Once I saw the child even though no invasive procedures were performed, the child became a patient of record. The State Practice Act says that I have the discretion of accepting or denying acceptance of a patient as long as it is nondiscriminatory (race, creed, color, AIDS status, etc.). Judicial Council advised to avoid questions of abandonment of the patient and that I formally dismiss the patient with a written notice allowing 30 days for the parent to find another dentist. I am not obligated to find her another dentist nor refer her to the dental society.

Moral of the story: Just as the patient screens dentists for the right one, so should the dentists be vigilant to screen the patients. It’s tough enough for all of us to answer the “dentist-bashing” questions aired by muckraking episodes on T.V. If you need to bow out of the dentist/patient relations, do it the right way to protect yourself.

Steven Chan, D.D.S.

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Join your friends and colleagues for another wonderful CSPD Annual Meeting in the Napa Valley - April 1-4, 1993.

BULLETIN

CALIFORNIA SOCIETY
OF PEDIATRIC DENTISTS

Published 4 times annually.

EDITOR

Stephen Howard, D.D.S.

CSPD members are encouraged to contribute to the BULLETIN. Articles, letters to the editor, or other items of interest are welcome. The next deadline for submission is October 12th, 1992. Items for publication must be double-spaced, typewritten and of reproducible quality for Xerox or Fax.

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PAST PRESIDENT'S REPORT

During the past year many CSPD members have worked on projects benefiting our patients and practices.

Our role as a child advocacy organization has been strengthened through political support of issues which will improve standards of reimbursement, and thereby encourage greater participation of dentists providing care. We have advised and provided input for a highly successful educational video for health care personnel; a CDA resolution on protection/athletic mouth guards; the CDA addition of the AAPD Periodicity Schedule (recommending the first visit by age one); and the shopping bag messages for Children's Dental Health Month '93.

Involvement with the Pediatric Medical Community continues in a positive direction. CSPD sponsored articles routinely appear in California Medical Journals. There has been joint support of the 'Children First' Senate Bill, Bicycle Injury Prevention and BBT projects.

Membership benefits/projects continue to fruition. CSPD had an exceptionally successful Annual Meeting '92 with the greatest member attendance and sponsor support in our history. A package of practice information sheets for patients is close to completion. A CSPD sponsored pediatric RDA course, and an office manuals project will be reviewed in the future.

CSPD has again had an active, fruitful year. The presence of an Executive Director has enabled us to participate more fully in a greater number of activities and help provide the continuity necessary for our role as the child advocate in dentistry.

I wish to thank the members of the Board, the Executive Director, the committee chairs and all active members for their support during this past year.

Respectfully,
Richard S. Sobel, D.D.S.

Seattle '92 American Academy CSPD Reception

CSPD hosted a reception at the recently held American Academy of Pediatric Dentistry Annual Session in Seattle. The reception was held Sunday evening from 6:00 to 7:30. During the festivities we were visited by Dr. Jerry Miller, AAPD outgoing president, Dr. Marty Davis, the 1992-1993 AAPD president, Dr. John Bogert, Executive Director of AAPD and many of the officers and trustees of the Academy. There were over 100 attendees at the meeting from California; about 85# were CSPD members. Efforts will be made to recruit the Academy members from California who were in attendance at the meeting but are not CSPD members. Many of the CSPD members and their spouses or guests enjoyed hors d'oeuvres and cocktails and exchanged restaurant "finds" and shopping "musts". A hot topic of conversation was the handpiece sterilization issue, the 2 television shows highlighting the issue and learning from colleagues what and how they were going to augment changes in their offices. This reception was the only opportunity for the Californians to gather and many took the opportunity to speak with Weyland Lum who represents AAPD District VI on the Board of Trustees. Mark Lisagor was playing his usual pranks, Ron Mack was discussing fulgeration (or something like that) to a bartender and Richard Sobel looked relieved to be the past CSPD president and the past AAPD liaison from CSPD... whatever will Richard do now?

A special thank you to John Christenson from Space Maintainer Laboratory who generously supported the reception.

Editors Note: The CSPD Board moved to support a reception at the Kansas City AAPD Conference in May 1993.

TREASURER'S REPORT 1991-92 FISCAL YEAR (ENDING 4/30/92)

INCOME	
Dues	28,210.00
Interest	2,475.95
Sponsorships	1,800.00
Annual Meeting	6,534.63
Miscellaneous	258.30
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	\$39,278.88

EXPENSES	
President	162.32
Annual Meeting	5,600.00
Board Meeting Expenses	4,082.77
Secretarial & Office Expenses	7,625.07
Executive Director	5,262.50
Accounting	250.00
The Bulletin	4,596.32
Peer Review	227.19
Dental Care	129.33
Public & Professional Relations	766.68
AAPD Liason	1,063.00
Research Awards	1,000.00
Constitution & Bylaws	100.00
Miscellaneous	114.54
	<hr/>
	\$30,979.72

NET SURPLUS 1991/92 **\$8,299.16**

RECONCILIATION OF RESERVE FUNDS

1991-92 Reserve Funds Requirements	
(1-year dues income)	\$27,990.00
1991-92 Actual Reserve Fund	\$38,131.73

Respectfully,
Mark Lisagor, Treasurer

AAPD MEMBERSHIP BENEFIT

The Academy will now provide to the membership a practice management newsletter as a membership service. There will be 6 issues per year. The project has been approved for a one year trial. If you're not an Academy member, consider this benefit as one more incentive to join.

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CAN YOU DIAGNOSE?

Dear Members of the CSPD:

While completing my postdoctoral training surveys to the constituency of the CSPD. The pediatric dentists in cases of suspected child abuse (60#) of the surveys were returned and the data

I would like to take this opportunity to thank you for your survey and share with you, the conclusions to the welfare of our patients and perhaps dentists in preventing child abuse and/or neglect.

1. The sample of the study was representative and members are exposed to a representative number of cases.
2. CSPD members responding to the survey report suspected child abuse and/or neglect.
3. A significantly large percentage of CSPD members report suspected child abuse and/or neglect and the vast majority of cases.
4. Approximately one-third of the respondents reported of suspected abuse and appropriate policy or office guidelines. CSPD can be integrated with community resources.
5. One-half the respondents sought consultation with another dentist or pediatrician due to the complexity of child abuse/neglect.
6. Interestingly, less than one quarter of the respondents reported of child abuse/neglect in dental school education in child abuse/neglect. More continuing education courses for dental school education in child abuse/neglect are needed.
7. There was a significant association between suspected child abuse and/or neglect and suspecting a child. This may again indicate the need for more education.

A more detailed discussion will hopefully see the light of day for all your support and your advocacy for child

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CHILD ABUSE?

in pediatric dentistry at UCLA, I mailed out a survey concerned the reporting practices of child abuse and/or neglect (CAN). Sixty percent was tabulated.

Thank you for the honesty in your responses to the study. I feel the results will be very beneficial to help define the role of the California pediatric dentist.

representative of the CSPD constituency and the membership of children.

They are very aware of their legal responsibility to report child abuse and neglect.

Most respondents have suspected cases of child abuse and a majority of those dentists went on to report the cases.

Dentists have developed a policy to assist in the reporting. Approximately two-thirds indicated a need for a policy that possibly provide a generic protocol that could be used and/or guidelines.

Discussion regarding the suspected cases, particularly in the office. It appears that the respondents recognize the importance of reporting.

Most respondents had dental school or continuing education in child abuse. This may indicate a need to support reporting and/or neglect in the curriculum and to offer continuing education to the private practitioner.

There is a need for training in reporting suspected child abuse, but not with actually reporting the case. There is a need for office policy or guidelines for reporting CAN, particularly in the office.

Please follow in the CDA journal. Thank you again for your interest.

Sincerely,
Robert Ripley, D.D.S.
UCLA Pediatric Dentistry

Child Abuse Conference April 22, 1992

Dr. Richard Sobel represented CSPD at a Health and Human Services conference entitled "We Can Make a Difference: Strategies for Combating Child Maltreatment". Conference goals included increasing public awareness, and enhancing activities relating to child abuse and neglect. Business, religious, education and criminal justice representatives were among those present.

Continuing Education AAPD

Dana Point Resort
Oct. 9-11, 1992

Update in Pediatric Dentistry

Faculty:

Clifton Dummett, Jr., D.D.S., M.S.D.
Louisiana State University

Andrew Sonis, D.M.D.
Boston Children's Hospital

James Steiner, D.D.S.
Cincinnati Children's Hospital

CDA Board of Trustees Meeting 3-92

Specialty Listing-OSHA

Dr. Redig, CDA Executive Director, advised the CDA Board that the July issue of the CDA Journal (The Annual Membership Roster issue) would contain an indication of specialty status for its member dentists.

The California Department of Industrial Relations (DIR) requires employers to conspicuously display numerous posters where notices to employees are customarily posted. It is necessary to contact seven different agencies to acquire these 12 posters. The Council on Education and Membership Services determined that all 12 posters can be combined into two 23" X 26" posters and made available to CDA members as a membership benefit. The Board of Trustees approved a motion to provide all CDA members with these mandated posters using the component dental societies for distribution.

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CONGRATULATIONS 1992 GRADS!

Remember that wonderful, exhilarating feeling of FINALLY being done with school? And then...trying to find that perfect associateship or practice? Please make an effort to take an interest in our recent graduates and to wish them successful and bright careers. From U.C.L.A.

Dr. Seth Hayakawa attended U.S.C. and earned a B.S. degree in Exercise Science in 1986 and D.D.S. degree in 1990. Upon completion of his postdoctoral program, Seth plans to return to his home in Hawaii and join his father's pediatric dental practice.

Dr. Egle Lesniauskas grew up in Palatine, Illinois. She attended Case Western Reserve University and Loyola University. She earned her D.D.S. degree from Loyola University School of Dentistry in 1990. Her post graduation plans are to enter private practice in Southern California.

Dr. Salma Salimi, born in Logar, Utah, was educated in Iran and Switzerland. She completed her pre-dental requirements at U.S.C. and received her D.D.S. degree from U.C.L.A. in 1990. Upon completion of her certificate program and M.S. in Oral Biology, Salma's plans include entering private practice and part-time teaching.

Dr. Alex Trigonis, originally from Arcadia, California, completed his undergraduate studies at U.C.Riverside in 1985 and received his D.D.S. degree from U.C.L.A. in 1989. He completed the three-year dual training specialty program in Pediatric Dentistry and Orthodontics and plans to enter private practice in the Santa Barbara/Ventura County area.

Dr. Janette Yhip spent her childhood years in the Bahamas. She graduated in 1983 from Loma Linda University, La Sierra College with a B.S. in Biochemistry. After graduating from Loma Linda University School of Dentistry in 1988, Janette completed a General Practice Residency Program at Loma Linda University Medical Center. She practiced general dentistry for one year before entering U.C.L.A.'s combined Pediatric Dentistry and Orthodontic Program. Upon completion of her certificate programs and M.S. in Oral Biology, she will enter private practice in South Orange County/North San Diego County areas. From U.S.C.

Dr. Leslie Aspis graduated in 1978 from Fairleigh Dickinson School of Dentistry and practiced general dentistry prior to returning for her post-graduate training. Leslie is interested in joining a pediatric dental practice in San Diego County. Additionally, she is interested in joining a study club and remaining involved in hospital dentistry.

Dr. Bernard Gross attended The Medical College of Virginia Dental School in Richmond, Virginia in 1990. After completing his post-doctoral program, Bernard plans to associate with Dr. Philip Trask in Santa Monica. He also hopes to work in a hospital setting.

Dr. Chi-Hsin James Huang graduated from the Dental School of Taipei Medical College in Taipei, Taiwan in 1985. James completed two years of military service and three years of practice in dentistry before attending U.S.C. pediatric dentistry program. He plans to do a cleft palate fellowship at Rancho Los Amigos Medical Center and eventually will return to Taiwan to care for cleft palate and handicapped children.

Dr. Estela Sanchez completed her undergraduate studies at California State University, L.A. and East Los Angeles College. She received her D.D.S. degree from U.C.S.F. in 1983. She spent seven years with the Los Angeles County Department of Health Services as a Lead Dentist at the El Monte Comprehensive Health Center. Estela will enter private practice as an associate with Dr. Santos Cortez in Long Beach and Downey, California. From U.C.S.F.:

Dr. Kisup Lee graduated from Yonsei University School of Dentistry in Seoul, Korea in 1986. Kisup plans to pursue a M.S. degree in Dental Material Science at New York University College of Dentistry. He will eventually return to Korea to enter private practice and teaching.

Dr. Irma Garcia, from Alameda, did her undergraduate studies at UC Santa Clara and completed her dental degree at UCSF in 1989. Her research thesis is titled 'Retrospective Study of Pediatric Oro-facial Odontogenic Infections'. Irma is currently looking for an associateship in the greater Bay Area.

Dr. Kirsten Valentine graduated from UCSF Dental School in 1989. She completed her pediatric residency program in December 1991 and is currently working in Grass Valley, CA.

Respectfully,
Ann Azama

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WAYNE'S WORLD

At the April CSPD Board meeting, Wayne Grossman provided us with the finished "Baby Bottle Tooth Decay" video. It aired to rave reviews.

The intended audience are professional people involved in child health care. While not designed for parents of our patients, you may, none the less, find it of educational value for them, or as an adjunct to presentations you may make in your community. The "BBTD" video should be available shortly from our good friends at Space Maintainers and Practicon.

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