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Database: Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations and Ovid MEDLINE(R) <1946 to Present>
Search Strategy:
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1  "Referral and Consultation"/ (19297)
2  exp Dentistry/ (337908)
3  1 and 2 (534)
4  limit 3 to english language (486)
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<1>
Unique Identifier 25252474
Status MEDLINE
Authors Marmary I; Kaffe I.
Authors Full Name Marmary, Itzhak; Kaffe, Israel.
Title Online X-ray consultation and diagnosis—new service to dentists.
Publication Type Editorial.
Date Created 20140925
Year of Publication 2014

<2>
Unique Identifier 25215347
Status MEDLINE
Authors Wake C.
Authors Full Name Wake, Charlotte.
Title Direct access for dental therapists and hygienists—when do we refer?.
Source Primary Dental Journal. 3(2):77-9, 2014 May.
Publication Type Journal Article.
Date Created 20140909
Year of Publication 2014

<3>
Unique Identifier 25118517
Status MEDLINE
Authors Brown RS; Buscemi L; David TJ.
Authors Full Name Brown, Ronald S; Buscemi, Leonard; David, Thomas J.
Title Medical consultations for dental patients in 2014.
Source Dentistry Today. 33(7):8, 10, 12, 2014 Jul.
Publication Type Journal Article.
Date Created 20140814
Year of Publication 2014

<4>
Unique Identifier 25106003
Status
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Comment in: J Ir Dent Assoc. 2014 Feb-Mar;60(1):7; PMID: 24665541
Comment on: J Ir Dent Assoc. 2013 Oct-Nov;59(5):252-7; PMID: 24282865
Source
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Publication Type
Comment. Letter.
Date Created
20140326
Year of Publication
2014

Audit of the health service executive orthodontic referral pathway between 2009 and 2011.

Referring periodontal patients: clinical decision making by dental and dental hygiene students.

Abstract
Referral of periodontal patients requires development of a complex set of decision making skills. This study was conducted to determine criteria used by dental and dental hygiene students regarding the referral of periodontal patients for specialty care. Using mixed methods, a thirteen-item survey was developed to elicit the students’ perceptions of their knowledge, confidence regarding managing patients, and clinical reasoning related to periodontal patients. The instrument was administered during the summer prior to (T1) and at
the end of the students’ final year (T2) of training. Seventy-nine dental students (81 percent of total class) and thirty dental hygiene students (83 percent of total class) completed T1. At T2, forty-two dental (44 percent of total class) and twenty-six dental hygiene students (87 percent of total class) completed the questionnaire. While 90 percent of dental and 96 percent of dental hygiene respondents reported a willingness to refer patients with active disease to specialists, only 40 percent of dental and 36 percent of dental hygiene respondents reported confidence in diagnosing, treating, and appropriately referring such patients. The students’ ability to recognize critical disease and risk factors influencing referral was good; however, clinical application of that knowledge indicated a gap between knowledge and applied reasoning. The students’ attitudes about the importance of periodontal disease and their perceived competence to identify critical disease risk factors were not significantly related (p>0.05) to correct clinical decisions in the case scenarios. The study concludes that dental and dental hygiene curricula should emphasize both the acquisition and application of knowledge regarding criteria for referral of periodontal patients.

Publication Type: Journal Article. Research Support, Non-U.S. Gov’t.

Year of Publication: 2014

Unique Identifier: 24528561

Status: MEDLINE

Authors: Hupp JR.

Title: Oral-maxillofacial surgery and the predoctoral curriculum— a key to future referral patterns?


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Audit of the Health Service Executive orthodontic referral pathway between 2009 and 2011 in the Dublin Mid-Leinster region.

Comments
Comment in: J Ir Dent Assoc. 2014 Feb-Mar;60(1):7; PMID: 24665541
Comment in: J Ir Dent Assoc. 2014 Feb-Mar;60(1):7; PMID: 24665540

Source

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Abstract
An audit was undertaken in 2009 to determine the success of the new national orthodontic referral protocol introduced to the Health Service Executive (HSE) in 2007 and operated in the Dublin Mid-Leinster HSE region. It was repeated in 2011 to determine if the HSE austerity measures have had a bearing on the orthodontic service performance in the Dublin Mid-Leinster HSE region. The audit also measured the success of referring practitioners in identifying the correct Index of Orthodontic Treatment Need (IOTN) classification of the patient. In the 2011 audit, the figures were broken down to identify the occlusal variables that caused dental practitioners most difficulties in identification. The audit demonstrates a good referral to assessment timeframe in 2009 (85-80% compliance for IOTN 5 and 4 within three to six months, respectively), which deteriorates significantly in 2011 (26-4% for IOTN 5 and 4 within three to six months, respectively). The ability of dentists to identify the correct IOTN classification was better in 2009 (60% correct) compared to 2011 (51% correct), but both figures fell below the audit standard of 75% of referrals with correct IOTN classifications. The IOTN occlusal dental health components most readily identified by referring practitioners and meeting audit standards were 5a (overjet >9mm), 5i (impacted teeth) and 5h (extensive hypodontia). The remaining occlusal dental health components in the HSE IOTN fell below the audit standard. The audit clearly identifies a requirement for a continued educational effort to maintain the HSE IOTN skill base in primary care, and a need for additional resources to manage the demand for orthodontic assessments.

Publication Type
Comparative Study. Journal Article.

Date Created
20131128

Year of Publication
2013
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**15**

Title: Speaking for another.


Abstract:
INTRODUCTION/AIM: The first written evidence of telemedicine dates back to the times of Sava Nemanjic (the end of 12th and the beginning of 13th century). Nowadays, the use of telemedicine in Serbia gains momentum, and the cause of this lies in the creation of a central telemedicine system XPA3 Online and the establishment of the Center for Telemedicine at the Faculty of Medicine, University of Pristina/Kosovska Mitrovica, Kosovska Mitrovica, Serbia. Dentogenous infections are among the most urgent conditions in dentistry, which may have even a fatal outcome. The aim of this study was to assess the possibility of using telemedicine methods in the pathology of dentogenous infections.

METHODS: This experimental randomized study included 414 patients with suspected dentogenous infection. The patients were enrolled at 7 sites, with systematic photograph-taking, collection, and digitalization of the available anamnestic and laboratory data, tests, and x-rays. Together with clinical findings, the data were uploaded on the XPA3 Online central telemedicine system; after that, 10 teleconsultants reviewed the material, set the diagnosis, and gave their opinion about the treatment. The agreement was determined using the Cohen's kappa (i) coefficient, as well as diagnostic sensitivity (SE), specificity (SP), and efficacy (EFF). Statistical significance and comparisons were done using the z-test, and testing nonparametric properties using the McNemar's X2-test for the significance threshold of p = 0.05.

RESULTS: The results describing agreement of telemedicine diagnosis of the areas primarily involved with infection compared to clinical inspection, indicate an almost complete diagnostic agreement (kappa = 0.971). Diagnostic agreement as to the type of infection was also almost complete (kappa = 0.951), and a similar value was obtained also for the treatment agreement (kappa = 0.892).

CONCLUSION: The method of telemedicine provides us with a tool to make a correct clinical diagnosis of dentogenous infections equally well as in real time, as well as to get a deeper and wider insight into their nature and to suggest adequate treatments.

**16**

Title: Evaluation of telemedicine in the management of dentogenous infections.


Abstract:
INTRODUCTION/AIM: The first written evidence of telemedicine dates back to the times of Sava Nemanjic (the end of 12th and the beginning of 13th century). Nowadays, the use of telemedicine in Serbia gains momentum, and the cause of this lies in the creation of a central telemedicine system XPA3 Online and the establishment of the Center for Telemedicine at the Faculty of Medicine, University of Pristina/Kosovska Mitrovica, Kosovska Mitrovica, Serbia. Dentogenous infections are among the most urgent conditions in dentistry, which may have even a fatal outcome. The aim of this study was to assess the possibility of using telemedicine methods in the pathology of dentogenous infections.

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CONCLUSION: The method of telemedicine provides us with a tool to make a correct clinical diagnosis of dentogenous infections equally well as in real time, as well as to get a deeper and wider insight into their nature and to suggest adequate treatments.
**Title**: Are referred inaccessible human primary molar teeth really inaccessible?


**Abstract**

Despite a body of compelling evidence pertaining to the root canal accessibility of primary teeth, the number of referrals for inaccessibility of primary molars is considerable. The aim of the present study was to evaluate the prevalence of true and false primary molar inaccessibility among subjects who had been referred by general and pediatric dentists. We examined 199 primary molars in 156 patients (87 males, 69 females) aged 3-7 years who were referred by 215 general and 35 pediatric dentists. Problems related to inaccessibility were recorded for each tooth and any individual canal. One hundred seventy-five inaccessible teeth (87.9%) were successfully rehabilitated to accessible status (P < 0.001). The most frequent cause of inaccessibility was an inappropriate access cavity (42.3%), followed by difficult canals (32.6%) and orifice calcification (25.2%). The tooth most frequently reported as inaccessible was the maxillary first molar (40.2%), and that least frequently reported was the mandibular second molar (11.6%). The distobuccal canal of the maxillary first molar and the mesiolingual canal of the mandibular first molar were the most commonly inaccessible canals (P < 0.001). Only 1 out of 8 teeth referred as inaccessible was truly inaccessible. It seems that root canal inaccessibility is mostly attributable to lack of expertise among individual practitioners.
Title
Retrospective examination of the healthcare 'journey' of chronic orofacial pain patients referred to oral and maxillofacial surgery.

Comments
Comment in: Br Dent J. 2013 Mar;214(5):236-7; PMID: 23470384

Source

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Abstract
OBJECTIVE: To gain a deeper understanding of the clinical journey taken by orofacial pain patients from initial presentation in primary care to treatment by oral and maxillofacial surgery.

DESIGN: Retrospective audit.

SAMPLE AND METHODS: Data were collected from 101 consecutive patients suffering from chronic orofacial pain, attending oral and maxillofacial surgery clinics between 2009 and 2010. Once the patients were identified, information was drawn from their hospital records and referral letters, and a predesigned proforma was completed by a single examiner (EVB). Basic descriptive statistics and non-parametric inferential statistical techniques (Kruskal-Wallis) were used to analyse the data. DATA AND DISCUSSION: Six definitive orofacial pain conditions were represented in the data set, 75% of which were temporomandibular disorders (TMD). Individuals within our study were treated in nine different hospital settings and were referred to 15 distinct specialties. The mean number of consultations received by the patients in our study across all care settings is seven (SD 5). The mean number of specialties that the subjects were assessed by was three (SD 1). The sample set had a total of 341 treatment attempts to manage their chronic orofacial pain conditions, of which only 83 (24%) of all the treatments attempted yielded a successful outcome.

CONCLUSION: Improved education and remuneration for primary care practitioners as well as clear care pathways for patients with chronic orofacial pain should be established to reduce multiple re-referrals and improve efficiency of care. The creation of specialist regional centres for chronic orofacial pain may be considered to manage severe cases and drive evidence-based practice.

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Journal Article.

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20130308

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2013

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Authors
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Title
Child dental anxiety, parental rearing style and referral status of children.

Source

Local Messages
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Abstract
OBJECTIVE: Treating children can be difficult for both dentist and child. In some cases treatment fails and those children are referred to a specialist paediatric dentist. Different factors can be put forward for referral of children, such as factors relating to the child, dentist and parent. Possible child-related factors can be dental anxiety and the child's temperament. A possible parental factor is the parental rearing style. The objective of this study was to assess the possible associations between dental anxiety, parental rearing style and referral status of children.

METHODS: Parents of 120 non-referred and 335 referred paediatric dental patients were asked to fill out the Child Rearing Practices Report (CRPR) and the Child Fear Survey Schedule Dental Subscale (CFSS-DS) on behalf of their children.

RESULTS: The questionnaires were filled out by 115 (96%) parents of primary schoolchildren and by 331 (99%) parents of referred children. Referred children were younger than non-referred children, t(442) = 6.9, p < 0.01, and had significantly more dental anxiety, t(430) = -8.7, p < 0.01. No differences existed between parents of referred children
and parents of non-referred children on parental rearing-style. No differences existed between fearful and non-fearful children on parental rearing-style and also no correlation existed between children's dental anxiety and their parent's rearing style. However, non-referred children with parents using an authoritarian parenting style were more anxious than the other non-referred children.

CONCLUSIONS: In the present study, referral status and dental anxiety of 4-12 year old children were not associated with parental rearing style.