Indications for Referrals to Pediatric Dentists in a Hospital-Based Dental Clinic



Amira Omar, DMD¹; Olutayo Odusanwo, DMD, MS²; Daniel Kane, DMD, MA³

¹PGY-2 Resident; ²Pediatric Dental Attending; ³Program Director

NYU Langone Hospitals-Advanced Education in Pediatric Dentistry, Division of Dental Medicine, NYU School of Medicine

NYU Langone Dental Postdoctoral Residency Programs

INTRODUCTION

Hospitals in underserved communities often struggle with a larger patient base and fewer providers to deliver patient care. At St. Joseph's dental, we provide comprehensive dental treatment for our communities, but are receiving a plethora of referrals from private practices. It is challenging to accommodate our patient base as well as the incoming referrals within an adequate time frame. The nationwide average wait times for children in pain with a complex treatment plan was 28 days if with GA, for children not in pain it was 71 days waiting period, and for children in need of sedation that wait was an average of 36 days.²

This research is focusing on the reasons for the incoming referrals to potentially help mitigate a solution. This will help the patients receive treatment earlier, and help to limit future emergency room visits due to dental pain. Most causes for seeking emergency dental care are due to disease/caries, which could have potentially been avoided by early treatment intervention. In a study done in Casablanca, it was reported that "41% of parents stated that their children needed analgesics, 28.5% stated sleep disturbance of children, 32.9% showed chewing problems and 49.4% of children took antibiotics" while waiting for their GA appointment. Few studies have analyzed the reason behind the referrals.

This research will focus on the factors behind these incoming referrals, and may help children in need of treatment receive timely treatment. The data from this study will provide more insight as to why dentist are referring their patients, and not providing their dental treatment. This information will aid in easing accessibility for patient care.

PURPOSE

The purpose was to evaluate the referrals received by pediatric dentists located at a hospital-based dental clinic, and to assess the main indications for referrals.

METHODS

FIGURES

A retrospective review of one hundred (100) charts over the span of the year 2021 was completed to investigate the reasons for referrals to a Rhode Island hospital-based pediatric dental clinic. Referrals were analyzed for indications for the referral, presence of dental pain, barriers to treatment by referring doctor and zip code of referring doctor. Statistical analysis of referrals was performed using overall percentages, and p-values.

RESULTS

One hundred charts were included in this study. The most common statistically significant indications for referral were 'Decay' and 'Sedation/GA'(p<.01), followed by referrals for 'tooth pain' and 'Sedation/GA'. There was no statistical significance found among reasons for treatment barriers, or zip codes of referring dentists. Most common treatment barriers cited were extreme apprehension and extensive treatment needs with an overall 31%.

CONCLUSIONS

The location of referring dentists did not influence referrals, with patients being referred from offices throughout Rhode Island and Massachusetts.

However, the presence of pain, decay or need for sedation or general anesthesia greatly influenced the need for patients to be referred.

The presence of extreme apprehension and extensive treatment needs were the greatest barriers for children in need of dental treatment.

It appears that with an increase of the presence of decay and patient apprehension, private dental practices are preferring to refer these cases to a hospital-based pediatric clinic for comprehensive dental treatment.

Figure 2: Indication for referrals Figure 2: Indication for referrals *Decay and 'Sedation/GA' (pc.01)

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