

### Risk Management

### What Can We Learn From The Case Files

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# Risk Management Modules

- Go to CDPA website
- Log in at Members portal/Education/Self Study Modules
- 36 Risk Management modules which have been created by DPL and are marked
- 11/2 CE points are available free of charge.

## Anaesthesia/Sedation Related Problems

Procedural Codes for Oral Sedation

No code for mild sedation oral route or otherwise.

Facility Permit –required for Moderate Sedation

Also required for change of location

Educational Background-Training must be very specific.

Over dosage-more likely from the oral routeemphasizes need for responsible adult to accompany home and someone to be there. Telephone follow up mandatory.

# Post Treatment Problems

- Amnesia very prevalent with Triazolam
- Be respectful of possible problems observed by other family members-oral sedation can be quite potent and long lasting.



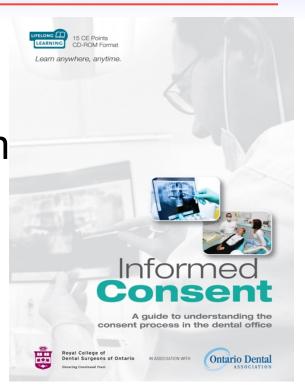
#### **Informed Consent**

- Do not sedate on same day as Informed Consent Discussions.
- Make notes and confirm pick up...
- Handouts given before appointment Pre and Post op Instructions. Emphasize need for responsible adult.



#### Informed Consent

- Cannot alter treatment plan
- Cannot ask permission from
- Spouse





#### Read the Notes

- All dentists treating a patient must be aware of the total treatment plan so that if an emergency occurs unnecessary dentistry will not be performed.
- Happens in same office when notes are not reviewed during a busy day.
  - Perio/endo
- Happens in referral especially surgical.



- Removable directly related to Denture
   Therapists and issues of informed consent and billings.
- A Troublesome Relationship Copy of article at http://www.oralhealthjournal.com/ issues/ISarticle.asp?aid=1000346778



- Implants being used as terminal abutments for long span bridges.
- TMD resulting from long dental procedures
  - Bi-lateral Mandibular Blocks
- Proof the joints before beginning any complex restorative procedure.
- Establish a Treatment Plan weighing risk and benefit.



- Endodontic Treatment completed before restorative component developed.
- Caries Prevalence revealed in Dental History.
- Periodontal Problems
- Attrition Erosion Abrasion
- Pictorial Record is an invaluable addition to the quality of baseline records.



- Shade selection can be much more problematic than you ever imagined.
- Marginal problems can be easily seen years later.
- Occlusal problems-during fitting dentist wants to reduce opposing teeth, metal exposed while adjusting porcelain.
- Adequate training for complex cases.



- Record specific instructions regarding care of crowns and bridges.
- Complex Cases require contractual obligations which sometime need alteration due to problems. Changes to treatment plans especially monetary ones can be viewed as a breach of contract.



- Bridges debonding due to total reliance on bonding R & R is out of favour
- Marginal discrepancies very prevalent.
- Margins must be confirmed 360 degrees before final cementation. I check interproximal fit by Xray.
- Aesthetic Treatment consent should be approached with caution especially when suggested by dds rather than the patient.



### Summary

- Informed Consent more problematic with Anaesthesia/Sedation. Cannot change treatment Plan during the anaesthetic/sedation apppointment.
- Treatment Plans are contractual obligations and should be treated as such.
- Amnesia may become a post operative problem.
- Make sure of release to responsible adult
- If patient is mutual or in the middle of treatment check it out carefully before dealing with emergency.
- Separate yourself and Denture Therapists
- Be vigilant in regard to marginal fit and occlusal harmony.
- More rigorous informed consent for aesthetic cases.