**To:** Erika Paterson

**From:** Miranda Hoang

**Date:** June 14, 2021

**Subject:** Proposal to Gurbaz Sandhu, owner of Spencer Dentistry to develop an office protocol for proper diagnosis of periodontal disease including office protocol on when to refer patients of Spencer Dentistry to a periodontal specialist.

**Introduction:**

Currently there is no one size fits all approach to periodontal care. Depending on the clinician’s education, knowledge, skill level or ability the approach for specialist referral can vary. Knowledge of the current AAP (American Academy of Periodontology) periodontal classifications is crucial as new research and information has emerged which has led to revisions. The redesigned disease classification framework guides comprehensive treatment planning and allows for a personalized approach to patient care. The new guidelines highlight assessment of risk factors and systemic conditions to thus create consistency in diagnosis. Early diagnosis is paramount to reduce and stabilize periodontal disease. This can avoid surgical therapy and increase the prevalence of tooth survival.

**Statement of the problem:**

Spencer Dentistry currently lacks an explicit standardized step by step approach to assessing patients need for periodontal referral. The office has yet to produce a periodontal guide that can be followed to determine when it is time to refer patients. Furthermore, there appears to be an inconsistency in the diagnosis of periodontal disease using the new AAP periodontal classifications, creating a conflicting referral process. Lastly, there is no existing documentation protocol established for when a patient refuses a specialist referral after their condition has been thoroughly explained to them. The client’s chart serves a legal document of services rendered and/or recommended, and failure to have the client sign a ‘Refusal of Treatment or Refusal of Referral’ form can place the clinic and the clinician vulnerable to speculation of negligence. Without a guideline for the treating dental hygienist to follow, Spencer Dentistry could be prolonging effective care which may lead to tooth loss.

**Proposed Solution:**

The proposed solution would be a two-step process. First, setting up a continuing education day at Spencer Dentistry with guest speaker Dr Harinder Sandhu DDS, Ph.D., Cert. Periodontist would be beneficial. Educating the staff on the new AAP Periodontal classifications to calibrate diagnosis would be a good starting off point. Step two would consist of developing a detailed step-by-step protocol based on the AAP for the dental hygienists to follow and therefore raise awareness on the importance of timely referrals. All of Spencer Dentistry clinicians will learn and adopt this protocol. Part of the proposed protocol would include implementing a ‘Refusal of Referral’ form that would become mandatory for all patients to sign who are refusing a referral to the periodontist after their condition and possible outcomes were thoroughly explained.

**Scope:**

To assess the feasibility of the proposed solution aimed at calibrating and educating the staff at Spencer Dentistry. The goal is to identify patients who are at greatest risk for tooth loss and make referrals to specialists based on the periodontal conditions.

Proposed areas of inquiry:

1. What are the guidelines utilized by other dental offices in identifying which patients require a referral to a periodontist?
2. Have staff members at other offices taken a course in the new AAP periodontal classifications?
3. What are the documentation practices regarding the referral process used by other dental offices? Furthermore, what is the protocol being utilized by other offices regarding refusal of referral?
4. What training is required to adequately identify patients that require a referral to a periodontist?
5. What are the benefits of calibrating the staff on the referral process?

**Methods:**

Primary data source will include the results of surveys sent out to dentists and fellow dental hygienists in Ont. to assess their current knowledge in the AAP periodontal classifications, and current referral process protocol. This survey will be sent out via email to be completed at their earliest convenience. Additionally, contact with the College of Dental Hygienists of Ontario via email to explore their current recommendations offered to dental hygienists on when it is an appropriate time to recommend a periodontal referral.

Secondary sources will include publications found within the American Academy of Periodontology, Canadian Dental Hygienists Association, as well as the Ontario Dental Association to review their current recommendations for diagnosing and recommending periodontal referral.

**Qualifications:**

I have been practicing as a Registered Dental Hygienist in Ontario for the past sixteen years. Although Spencer Dentistry does not have a current protocol for periodontal referral in place, I am deeply knowledgeable and familiar with periodontal disease and the limitations to treatment in general practice. I can use my experience to help develop a step-by-step approach to assess the patient’s need for periodontal referral at Spencer Dentistry. I am currently working along side Dr Harinder Sandhu creating an in office periodontal program to optimize patient care which places me in an ideal position to look at current office protocol and to adjust accordingly. I am working towards earning my Bachelor of Dental Science in Dental Hygiene at the University of British Columbia. Through my studies I am developing my ability to evaluate current literature regarding periodontal disease and the assessments required to determine the need for specialist intervention.

**Conclusion:**

Considering the current turnover at Spencer Dentistry as we welcome the addition of new staff, some of which are newly graduated, the office would benefit from a streamlined approach to determine the need for specialist intervention. Such protocol would optimize patient care, improve treatment outcome, as well as calibrate the assessment among practitioners. Ensuring proper documentation of all recommended referrals and refusal of treatment forms as needed is a legal necessity and will protect Spencer Dentistry from possible accusations of failure to inform the patient.