
PBL Case: Dorothy Williams

— UBC DHYG 325 Term 1 —

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Assessment

1. MH DH significant findings (how does MH and DH affect oral health? What are their etiologies?)
2. EO/IO, Dental Exam, Radiographs
3. SDoH, Unmet Human Needs, Quality of Life
4. Further questions to ask Ms. Williams

Medical History

- ❖ radiation & chemotherapy for breast tumor: age 51
- ❖ terrible flu: age 54
- ❖ thyroid removed: age 34
- ❖ cold sores
- ❖ osteoarthritis (soreness in ankles and knees)
- ❖ upset stomach from medication
- ❖ chronic fatigue syndrome
- ❖ allergic to sulfa drugs

Dental History

- ❖ Teeth are sensitive
- ❖ Loves sweets and unwilling to give it up
- ❖ Cold sores after dental visits

Etiology

Presents with:



SDoH & Unmet Human Needs



Medications

Diagnosis



Short Dental Hygiene Diagnosis

Short DH Diagnosis:

AAP:

Prognosis:

Etiology of ...

❖ Most likely to least likely:



Differential Diagnosis

❖ Most likely to least likely:



Screenings Required for Diagnosis



Working Diagnosis



Protocol at UBC Planning

- ❖ Record MCATSS
- ❖ Ask: pain, recollection of hx, habits
- ❖ Clinical instructor/ floor dentist's opinion prior to care
- ❖ Document and take intra oral pictures, radiographs
- ❖ Possibly find oral lesion specialist (Dr. Laronde)
- ❖ Monitor for 3 weeks
- ❖ Refer for biopsy
- ❖ Follow up with specialist and _____ client

Planning

- ❖ Considerations in Treatment planning
 - Case presentation of the impact of ____ in regards to hygiene services
 - ____ and effects on oral health
 - Causes of ____:
 -

Planning

❖ Considerations (cont.)



Planning

- ❖ Determine a recall interval
 -
- ❖ Keep in mind her concerns and interests in maintaining oral health
 -

Implementation

- ❖ We would introduce SMART goals to Ms. Craig:
 - Explain the benefits of _____ by the last appointment
 - Obtain a family doctor, and undergo annual check ups by general practitioner within 6 months after dental hygiene treatment.
 - Have regular dental visit with a recare interval of 3 months.
 -

Implementation

- ❖ Dental Hygiene Tx Recommendations:



Implementation

- ❖ Follow debridement with PSC lessons: Educate on the severity of periodontitis
 - **Soft toothbrush & Modified Stillman Technique:** Encourages lighter brushing technique to prevent further dental trauma and, x2/ day, 2 min to see full benefits
 - Add a tennis ball to the toothbrush if has dexterity issues.
 - **Fluoridated toothpaste and interdental aids:** Recommend Sensodyne to reduce sensitivity. A floss holder would be beneficial for her interdental product. This will allow easier reach of posteriors, accounting for her lower dexterity.
 - **Mouthrinse:** A mouthrinse such as Listerine Total Care Zero would be beneficial as it contains essential oils and minimal alcohol to prevent burning. Depending on client satisfaction and preference, we could suggest a warm saline rinse.

Implementation

- **Smoking cessation:**
- **Xerostomia management:**
- **Referral for management of __:**
- **Osteoporosis management for dentition:** We would recommend MI Paste, a milk-derivative product to encourage calcium phosphate deposition. This would give her the benefits of fluoride while also supplement her with the strength to combat effects of osteoporosis.

Implementation

- ❖ Determine how invested she is in her dental treatment:
 - If Ms. Williams expresses interest in investing time and money into her dentition we would continue treatment as follows:
 - We would collaborate with a periodontist and discuss gingival problems; recession and possible lack of KT.
 - We could discuss the possibility of a soft tissue graft for the high recession areas in order to aid in the recovery of current periodontal condition.
- ❖ Discuss the importance of recare and encourage further medical testing:
 - Ms. Williams would have a 3 month recare interval in order to manage her periodontal pockets, recession, plaque levels and..... We would stress the importance of having regular check-ups are, rather than going when you don't feel good.
 - We would encourage her to get a primary physician and obtain a full work up to check for any other systemic disease, see if she can find out more about her family's medical history.

Evaluation

- ❖ Re-evaluate all client assessments
 - client's remaining CC:
 - IO/EO: follow up on the status of
 - Perio exam: perio status improving or declining
- ❖ Reassess SMART goal and document SOAP
 - Determine recare interval based on client's motivation and oral health status (ie. 3 mos.)
- ❖ PSC evaluation: brushing and flossing technique,
- ❖ Follow-up on referrals from sleep apnea clinic and specialists

Ethical Dilemmas

- ❖ Identify ethical principles involved through each individual's point of view
- ❖ Possible courses of action
- ❖ Deciding and implementing on the best course of action
- ❖ Possible consequences of action

Ms. William's POV

Ethical dilemma between



Other POV

Ethical issue of

Potential ethical dilemma
between





Dental Hygiene Student's POV

Ethical issues of

Potential ethical dilemma between

Possible Courses of Action

1.)

Implementing the course of action



Possible consequences of decision

Thank you!