

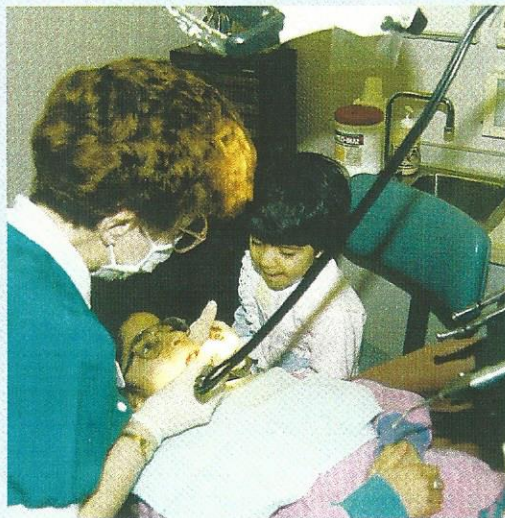
What's a Dentist to Do? Values, Part One

This installment of Northwest Dentistry's continuing series of articles concerning dental ethics carries the simple subhead "Values" — plus the somewhat daunting caveat "Part One". The ongoing examination of the most basic philosophies driving the practice of dentistry is a complex and demanding task, but an essential one. As Dr. Churchill stated in the previous installment of this column, "Each of us must regularly examine our practices to make sure they reflect our profession's central values." Blue books in hand? You may begin.

The Editors

THE SIX CENTRAL VALUES OF DENTISTRY†

1. The patient's life and general health
2. The patient's oral health
3. The patient's autonomy
4. The dentist's preferred patterns of practice
5. Esthetic values
6. Efficiency in the use of resources



†From *Dental Ethics at Chairsides: Professional Principles and Practical Applications*, by David T. Ozar, Ph.D. and David J. Sokol, D.D.S., J.D., F.A.G.D. Washington, D.C.: Georgetown University Press.

Jack L. Churchill, D.D.S.*

We ended our previous column** in reference to dentistry's central values. These values, of which there are six, play a central role in the numerous decisions we make in our practices every day. They certainly are not consciously thought of every time we make a decision, but through years of training and experience are habitually established within each and every one of us. As listed in *Dental Ethics at Chairsides* by Ozar and Sokol, these values are:

1. The patient's life and general health
2. The patient's oral health
3. The patient's autonomy
4. The dentist's preferred patterns of practice
5. Esthetic values
6. Efficiency in the use of resources.

The Patient's Life and General Health

It is certainly true that the patient's life and general health are a dentist's primary value — without which no other values are worth discussing. A dentist who recommends treatment that puts a patient's life or general health at risk is certainly unprofessional.

The Patient's Oral Health

Although the patient's oral health is the most obvious central value, it is a complex notion. There are "general standards of appropriate oral function", of course, but what constitutes appropriate oral function for a specific patient depends upon several variables, including age, health status, functional needs, and so forth. Oral health, in other words, is not clear cut and factual, but rather more subjective.

The Patient's Autonomy

The patient's autonomy is defined as "choosing and acting on the basis of one's own values, goals, purposes, and principles of conduct." Today's dentist must involve the patient in treatment decisions. It is an interactive dentist-to-patient relationship involving the concept of informed consent.

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***"What's a Dentist to Do? The Competitive Spirit and Professional Integrity" by Jack L. Churchill, D.D.S., Northwest Dentistry, Volume 83, Number 5, page 39.*

Ethics Committee

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Preferred Patterns of Practice

This brings us to the fourth value: the dentist's preferred patterns of practice.

We as skilled dentists have many choices to make. On any given day a dentist may ask him- or herself any, even all, of the following:

- What type of hand instruments should we use?
- What dental materials should we use?
- Should we computerize or not?
- What type of dental equipment should we use? Lasers? Intraoral cameras? CAD-CAMs?
- Should we do endo, or refer?
- Should we "sell" veneers?
- Should we do a porcelain onlay or a gold onlay on a given tooth?
- Should we sell bleaching products or not?
- How aggressive are we regarding periodontics?
- Should we recommend a DO amalgam or a DO posterior composite in #28, or should we just let the patient decide?

You get the picture. These are all questions involving practice philosophies. We can all answer these questions differently and still be practicing competently. Through our training and experience we have habituated a particular pattern of practice that we feel is right for our patients.

Esthetics

A dentist who pays no attention to esthetics in dentistry is unprofessional. There are accepted standards of form (i.e., size, shape, color, and placement of teeth) to which we subscribe.

We as skilled dentists have many choices to make.

Conversely, though our patients demand excellent dental esthetics, there is no single standard within the general population, so it is our responsibility to guide each of our patients to judge his or her "form" according to our own standards. The dentists' own standards of esthetics, developed through training and

experience, play an important role, therefore, in how he or she treats his or her patients. The standard of care here is to honor the patient's esthetic needs unless harmful to his or her well being.

Efficient Use of Resources

The final value on the list concerns the efficient use of our resources. The dentist's expertise and the specialized physical equipment and instrumentation we use have come with considerable effort and are not in unlimited supply. Therefore they should be used efficiently. There is nothing unprofessional in controlling costs — in time, effort, or materials — provided the other values are tended to.

Looking Ahead

In our practices, when two or more of these values come into conflict, we must prioritize. That will be the subject of our next installment. ■

Ideas and material quoted in this article are from Dental Ethics at Chairside: Professional Principles and Practical Applications, by David T. Ozar, Ph.D. and David J. Sokol, D.D.S., J.D., F.A.G.D. Washington, D.C.: Georgetown University Press.

Please e-mail us at kdegrote@mndental.org or fax us at (651) 646-8246. We look forward to hearing from you not only regarding this article, but also if you have any ethical dilemmas you would like to present to the membership. Perhaps we can help you decide what to do.