Treatment plan change protocol

Considerations

Changing a treatment plan will delay the patient's treatment. Doing so creates confusion for the student and the patient and interferes with both the learning process and the progress of treatment. Additionally, demanding a treatment plan change may evidence a lack of department calibration, respect, and sensitivity that violates the mission and values of Tufts University School of Dental Medicine.

During treatment planning, it is important to offer the patient the full range of acceptable treatment options and to fully advise the patient. When giving the student permission to begin a procedure, faculty must accept that this was done. The treatment plan is the culmination of hours of work, consultation and collaboration. It is important to support the work of students and other faculty in public. If there is a problem, please discuss it with the student, their practice coordinator, and when necessary, your floor leader or department head outside the operatory without the patient's input. Once we have agreement on a change, then it is appropriate to assist the student with informing the patient.

Procedure

When approving the start of a procedure, consider whether the procedure is acceptable? If not, why not? Did the patient's condition change? If so, it may be necessary to reexamine the patient and develop a new treatment plan. Is the current plan a mistake? A typo? A misunderstanding? Will this treatment harm the patient?

If the instructor does not approve of the need or advisability of the procedure, do not discuss this in front of the patient. Speak with the student away from the operatory. Inform the student of the problem. Inform the group practice coordinator of your intention to change the treatment plan. Delete the procedure after discussing the change with the PC. If the PC is not available, consult with another instructor in your discipline. Then add a case note recording the consultation including the deleted procedure and the names of both instructors.

Always note the reason for a change to the approved treatment plan. If the new procedure is a change of material or surface, ask the student to add the new procedure through the treatment planning module. The instructor may approve the new procedure and delete the original procedure.

When seeing a patient after an exam D0150 or D0120 and the student is continuing with the Restorative phase of the TX plan



Make sure the Perio procedures and follow ups are completed



Operative Faculty should review:

- A. Patient's medical History, risk factors for caries (meds, xerostomia, diet0, CRA form (Cambra), consent forms.
- Review with the student patient's OHC. Remove plaque with pumice or toothbrush if needed



DISAGREE WITH TX PLAN



Review PC's notes during the exam



2nd Opinion with PC.

3rd. Opinion with Operative faculty (If add or remove from Tx plan: inform and discuss with the PC)



- B. Make sure the patient has adequate and updated X-rays (BW and PA no overlapping or short. No more than 6 months)
- C. Perform visual exam (transillumination) and tactile exam (use a blunt explorer, a Perio probe or disposable explorer)



AGREE WITH TX PLAN

Allow the student to start with the procedure