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## **“Monday Morning Pearls of Practice by Bobby Baig”**

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### **Medically Complex Dental Patients and Medical Consultation Letters:**

**By Bobby Baig.**

#### **Introduction:**

**Questions to Physicians:** The critical issue is whether the dentist asks the appropriate questions of the physician in order to gain relevant knowledge of the patient's individual health issues.

1. Is the patient's medical condition stable or unstable?
2. What exactly are the therapeutics the patient is presently using?
3. What is the A1c value?
4. What are the results of the blood studies?
5. What is the INR value?

It is important for the dentist to gain relevant treatment information rather than to have the physician impart his or her opinions, because many of the physicians' opinions may be out of date or simply incorrect.

#### **Reasons for Referring Patients For Medical Consultation:**

1: Patient requires a medical evaluation and/or therapy: When a dentist evaluates a patient and makes a determination that a patient may have a **health condition beyond the dentist's capabilities** to treat, it's important that the **patient be referred to the proper clinician** and a health facility. Such conditions are mentioned in the introduction. Patients with severe medical illnesses require clinical expertise before they can be **effectively managed within an outpatient setting**.

2. Dentist require specific medical information that may influence the patient's dental therapy:

- A) **Heart Conditions:** Many patients report a medical history of heart murmurs or mitral valve prolapse, whether there is regurgitation. Such information is important and may require more details to best treat patients under specifications by American Heart Associations.
  - B) **Reflux Disease or Bulimia:** Specific diagnosis of GERD, for instance the dentist may observe tooth enamel loss.
  - C) **Diabetes:** With symptoms as dry mouth or slow healing, requesting Blood glucose test with the patient physician.
  - D) **Anemia:** Red beefy tongue, oral burning, Loss of papillae of the dorsum of the tongue.
- There are **number of clinical presentations** and patient histories in which **evaluation and clarifications** from the **patient physicians** may aid in the patient's dental treatment.

3. Dentist requests a change in patient medical therapy to benefit patient's oral condition:

- A) **Kidney Transplant patients:** Are sometimes placed on both cyclosporine and calcium channel blocking agent. These patients manifest drug induced gingival overgrowth. It's very difficult to render successful periodontal therapy.
- B) **Antihypertensive medications ACE inhibitors:** Drug side effects are oral burning or oral lichenoid lesions.
- C) **Antiepileptic medication Phenytoin:** Long term drug side effect is gingival hyperplasia.

### THE STANDARD OF CARE

The dentist is responsible for the patient's health while the patient is under the dentist's care, and specifically while in the dental operator. The physician is responsible for the care of his or her patients' general health; however, as physicians may not necessarily have an understanding of dental procedures and risks, physicians are not specifically responsible for the health of the patient while the patient is undergoing dental therapy. The standard of care is to demonstrate a reasonable effort to communicate with the patient's physician in order to protect and advance the dental patient's health.

The 3 reasons to write a medical consultation letter for a dental patient are as follows:

1. The patient requires a medical evaluation and/or therapy,
2. The dentist requires specific medical information which may impact upon the patient's dental treatment, and
3. The dentist requests a change in the patient's medical therapy in order to benefit the patient's oral condition

**Medical Consultation Letter:** There are many questions regarding medical consultations letter.

1. When and why is a medical consultation letter necessary?
2. What information is required within the letter?
3. What is the proper layout of the letter?
4. What are the various protocols involved in the dental treatment?

**What information do you place within the consultation letter?**

- A) Dentist to provide his or her contact information.
- B) Patient Contact information: Patient Name, Age, Ethnicity, Birth date, relevant medical history
- C) Patient's Chief complaint (Although the chief complaint may be irrelevant in many health consultation scenarios)
- D) Specific question to be asked.
- E) Room for the physician to respond the query.

## Recommended Script to for the MD

	<b>Suggested scripts for questions regarding medical health consultation</b>
1.	This patient's <b>blood pressure</b> is currently _____. Please evaluate this patient's blood pressure and, if necessary, treat the patient's <b>hypertension</b> .
2.	This patient demonstrates a dental condition consistent with enamel erosion secondary to gastric reflux. Please evaluate this patient for <b>gastroesophageal reflux disease</b> and potential treatment.
3.	This patient reports a history of _____( <b>Kidney disease, HIV positivity, cardiac disease, breast cancer</b> etc). Please report this patient's ASA status.
4.	This patient reports a <b>complicated drug history</b> . Please provide a summary of the patient's present drug regimens.
5.	This patient reports a history of <b>positive HIV status</b> . Please report the patient's WBC, Viral load, CBC and differential, and T cell count.
6.	This patient reports a history of <b>anemia</b> . Please report the patient's most recent CBC and differential.
7.	The patient reports a history of <b>psychological issues</b> . Please report back concerning this patient's ability to undergo dental therapy of anticipated _____(low, moderate, high) stress.
8.	The patient reports a history of allergy for a number of antibiotics including_____. Please evaluate this patient's allergy concerns.
9.	The patient reports a history <b>thrombocytopenia</b> , please report the patient's platelet level and treat if necessary.
10.	This patient reports a history of _____( <b>asthma, angina</b> ) please report whether or not this patient's condition is stable or unstable.
11.	This patient reports a history of <b>congenital cardiac malformation</b> . Please confirm patient's present condition.
12.	This patient reports a history of <b>cardiac disease</b> . Please report the patient's present condition and recent cardiac disease history and medications.
13.	The patient reports a history of <b>heart murmur/mitral valve prolapse</b> . Does this patient currently has heart murmur? If the patient does have a murmur, please report the results of the patient's echocardiogram.
14.	Patient is currently on <b>Coumadin</b> (anti coagulation medication). Please evaluate the patient's bleeding potential with an INR. If the patient's INR is greater than 3.5 please consider discontinuing the patient's current medication for a period of time previous to the patient's scheduled surgical dental procedure. Patients with bleeding problems may require medications adjustments at lower INR values.
15.	Patient reports a medical history for past <b>steroid use</b> . Please report on the patient's adrenal function and previous history of steroid medications. Patients with adrenal insufficiency require evaluation for steroid prophylaxis with regard to stressful dental procedures.
16.	Patient reports she s <b>pregnant</b> . Please advise regarding the specific time of the due date. Please advise if the pregnancy is at risk and therefore requires special considerations.
17.	This patient has <b>oral mucosal lesions consistent with oral lichen planus</b> or other similar autoimmune condition. There is the potential that one of his/her present drug prescriptions _____ may be the etiological trigger for this manifestation. Please consider changing the present drug regimen to another drug from a different drug category in order to further investigate this possible connection.

### Discussion:

Clinicians who merely ask physicians for advice and then follow such advice contradicts current protocols have lost the medical legal protection of the established protocol. Unfortunately, many physicians may provide misinformation including protocols they were taught during their medical school education not the current versions. This may place the dentist who requested the medical consultation in a legal no man's land.

Gary and Glick<sup>2012</sup> discussed the concept of medical clearance, and the misunderstanding of this concept. They reported that many dentists believe that they can limit their liability by requesting medical clearance for their dental patients. They noted that medical clearance does not shift the liability from the dentist to the physician granting the clearance regarding treatment rendered by the dentist.

### Conclusion:

1. The medical consultation letter is a valuable part of many patients dental care. It's important for dental clinicians to have an appreciation for dental patient's medical conditions and how these conditions may impact dental therapy.
2. It is necessary for dentists to gather pertinent medical information in order to aid the clinical decision process in determining which clinical procedures are appropriate and whether the patient should be considered for medical, dental specialty or hospital referral.
3. The dentist must know and understand the modifications and limitations of dental therapies secondary to the patient's medical condition. As such, dentists must attain a minimum competency of medical understanding that cannot be deferred to physicians.

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