

## **Don't let communication let you down (dentistry)**

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Dental practitioners are highly trained professionals, and part of our education is focussed on the use of specific language related to the sophisticated procedures performed. We learn technical anatomical terms that quickly become part of our vernacular. Although this is functional and invaluable in our professional communications, and is second nature to us, it is an impediment in our communication with our patient.

“Dental Speak” gives rise to misunderstandings, friction, and ultimately complaints. If a proportion of complaints could be decreased simply by focusing on the way we speak, and the names we give things, it would be extremely helpful to ask each practitioner to give consideration to the matter.

It is vital to use language which your patient can understand simply, when explaining a procedure to them.

If our patients do not understand the technical terms we use, how then are they able to provide truly informed consent to procedures? In the eyes of the law, obtaining a signature on a consent form does not go far enough to prove that the patient completely understood what was said to them. If we consider that our patients only retain 35% of what we tell them, we need to ensure that they are able to understand 100% of the content, to keep the odds as favourable as possible. This means that we need to use clear, simple language that is aimed at the educational level of the patient. Remember to consider the cultural background of the patient and their command of the English language.

Good communication also relies on being a good observer, trying to understand our patient's concerns, eliminating distractions and maintaining eye contact. Consider the importance of Non Verbal communication including the gestures we make, our posture and facial expressions.

It is therefore significant when relaying important information to our patients that they are in an optimal position to receive it. A discussion about a complex treatment plan should ideally take place in an office environment, possibly on either side of a desk, where both parties are able to maintain eye contact and are at similar heights. In many dental surgeries such a space may not be available. If discussions are with the patient in the dental chair, the chair should be in an upright position. Place the operator's chair so you are face to face with the patient. Remove your mask and gloves so that your facial expressions are visible and the patient can focus on what is being said.

Consider using aids to simple language when seeking consent such as:

- Diagrams, which many patients understand and relate to best. Use simple drawings to illustrate your explanation.
- An intra-oral camera can show a patient an area of the mouth that is difficult for them to view.
- Study models and educational models.
- Patient Education Pamphlets.

Feedback from a chairside assistant is another way to sense the message conveyed. Ask your assistant if they felt your explanations were clear; if your message was unclear to them, it's likely it was also unclear to your patient. Asking the patient to explain what has been understood from your discussion is perhaps the best indicator to you as to what has been comprehended and retained. Allow the patient ample time for questions and make yourself available to answer them. A written, itemised and costed treatment plan that the patient can consider at home, is invaluable.

A relief of pain appointment is not the ideal time to discuss complex treatment plans. Insurance companies have encountered several situations where the patient may have agreed to one course of treatment, only to have misunderstood or changed their mind at a subsequent visit. Consider a scenario regarding the situation your patient is in. They may have last visited 6 months ago. They are uncomfortable, and unfamiliar in a clinical setting. They are in pain, and consequently poorly rested, outnumbered by the dentist and his staff, apprehensive about procedures likely to happen, worried about meeting their cost, and intimidated. It is within these confines that the patient must decide whether to extract a tooth or embark on a complex procedure to save it. Costs need to be considered. The patient feels pressured to make a decision in the next few minutes and, unwilling to display their ignorance, feeling nauseous from lack of sleep and nervousness, they choose an option. You would have to ask yourself, is this truly informed consent?

The real purpose of informed consent is to protect the patient. The patient needs to understand the risks versus the benefits of a procedure in simple language. They need to be in an environment where they can be receptive to information offered for them to consider. A few minutes spent talking with a patient, can be considered well spent to prevent the several hours necessary in preparing a response to the HCCC (Health Care Complaints Commission) or a visit to the Dental Council. By simplifying the language you use as a Dentist, you are keeping the channels of communication open, investing in your own risk management, and saving time, money and considerable stress and heartache in the future.

### **Summary**

- Don't assume the patient understands the terms you are using
- Use simple language, and use diagrams and other communication aids where possible.
- Remember Non Verbal communication as well: body language, eye contact, and remove your mask to let the patient see your facial expressions.

- Clear communication between you and your patient may avoid you struggling with legal jargon in the future.

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