Dental Gerontology (D534) Competency Assessment July 27, 2001

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Mrs. Harriet Jones, a 63-year-old African American female presents to your dental offic as a new patient for comprehensive dental care.

SX (Social History): Mrs. Jones is married to Mr. James Jones for 41 years. She and her husband live in a single family home on the 3200 block of Oganz Street. Mrs. Jone is employed in the home as a Homemaker. Mr. Jones is a professor (with tenure) of literature at Beaver College (now known as Arcadia University). She has two adult children Betty, age 44, married to an Ophthalmologist with two children, and James Jr. James Jr. is 34, single and moves back home in-between jobs (he is a CPA, but "has trouble with bosses").

HX (Medical History): Mrs. Jones has a significant medical history as follows:

- 1. Two uncomplicated hospitalizations for childbirth.
- 2. One hospitalization at age 59 for a hysterectomy.
- 3. Mild Hypertension
- 4. Osteoarthritis
- 5. Type II Diabetes

Medication History:

- 1. Estrogen Replacement Therapy daily
- 2. Vasotec 10 mg daily
- 3. Glucophage 10 mg daily
- 4. Tylenol/Motrin pm (as needed for pain)

Dental Examination:

- 1. Intact dentition consisting of 28 teeth. Most of the posterior teeth have allo restorations.
- 2. Periodontal evaluation reveals Mild to Moderate generalized adult periodor disease with generalized 4-5 mm pockets in the posterior quadrants.

Chief Complaint (CC): "I broke a tooth on the bottom right in the back."

Question 1: After reading her medical/dental/social histories, you realize that Mrs. Jones has had good dental care for her entire adult life. She lives in the northern sectio of Oganz Avenue and your practice is in Jenkentown. True, your office is only 15 minutes away from her house but she passes 10 qualified dentists to come to you.

- A. It is inappropriate to ask Mrs. Jones why she left her previous dentist and wants to become your patient.
- B. Who cares why she left her other dentist, she has good dental insurance through her husband's work and needs some crowns.
- C. Ask Mrs. Jones why she left her previous dentist and ask specifically who hother dentist was. It is always interesting to get some "inside information" your competition
- D. It is important to find out why Mrs. Jones left her previous dentist. If you clind this information out it may help you not to make the same mistake.

Question 2: Mrs. Jones has a medical history significant for diabetes, arthritis and hypertension:

- A. This medical history is complex and you should be reluctant to prescribe complex treatment (i.e. full crowns).
- B. Although Mrs. Jones' medical history is significant, she appears to be well controlled and you can feel comfortable prescribing the best care for her.
- C. Diagnose the insurance coverage and maximize the return to the office.
- D. Mrs. Jones' medical history is insignificant and should play no role in developing an appropriate treatment plan.

Question 3: With respect to Mrs. Jones age (63):

- A. Chronologic Age is never a factor in a treatment plan.
- B. Sixty-three is too old for a patient to need a crown.
- C. Sixty-three is not too old for a patient to receive a crown.
- D. Chronologic Age is one consideration in developing an appropriate treatme plan.

Question 4: Mrs. Jones is obviously "at risk" for failure of her restorations. After all, tooth #30 had a MOD alloy restoration that failed. From a preventive perspective:

- A. It is appropriate to evaluate Mrs. Jones from a preventive perspective. This may include the prescription of fluoride to enhance remineralization.
- B. Fluoride is only for children and should not be prescribed for geriatric patients.
- C. Geriatric patients should be thoroughly evaluated to determine if fluoride is appropriate pharmacologic agent. Additional analysis should include prescribing the appropriate type of fluoride (stannous, acidulated phosphoflurodide or neutral sodium fluoride.





Question 5: Upon examination tooth #30 does not have any recurrent decay. You examine all of Mrs. Jones' teeth and see similar restorations in all four posterior quadrants.

- A. It is appropriate to prescribe full coverage for posterior teeth with similar restorations. After all, if one tooth fractured, the others might.
- B. It is inappropriate to prescribe full coverage for posterior teeth with similar restorations: You can restore any teeth that fracture when the incident occurs.
- C. Do not prescribe too much dental care or you might scare Mrs. Jones away from your practice.
- D. Advise Mrs. Jones that she has similar types of restorations in many posterior teeth. Ask her preference regarding restoring these teeth. She may elect to restore them at this time and avoid any further possibility of fracture. She may elect to defer any treatment that is not necessary at this time.



GeronTology 2001

Competency Examination Ethics/Patients Aging in Illness



Walter is a resident in a nursing home. He is a 78 year old widower who has been on antidepressants since the sudden death of his wife five years ago. His daughter visits him often. The staff of the nursing home inadvertently threw out his dentures with the sheets while making his bed. He had a habit of leaving his dentures on the bed, and although the staff usually noticed them, a new person failed to do so.

After his dentures were lost, Walter had adamantly refused to have his dentures replaced and told his daughter that he will not wear a new set. The nursing home administration is more than willing to pay all costs for a new set of dentures. His daughter is agrees with the nursing home administration that Walter should have his dentures replaced. They are all aware that Walter's nutrition is suffering as well as his ability to be understood when he tries to talk.

Question 1. Should Walter be allowed to continue without his dentures? (Choose the most correct answer)

- A. No. Dentures are necessary for proper nutrition and dentures should be constructed for Walter regardless of his desires.
- B. No. Walter will suffer social isolation by loosing his method of communication without his teeth, therefore replacement dentures must be made.
- C. Yes. Although he is depressed, Walter appears to act competently. As such, he has the right to refuse non-emergency care.
 - D. Yes. No justification is necessary.

Question 2. Name the ethical principal that is most appropriate to this case.

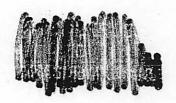
- A. Nonmaleficence
- B. Beneficence
- C. Fidelity
- (D) Autonomy
- E. Veracity
- F. Justice

Question 3. As a practitioner who practices ethically, you could find yourself in an ethical dilemma with respect to Walter's case. Name the ethical dilemma from the following choices:

A. Nonmaleficence vs Justice

B. Veracity vs Fidelity

Autonomy vs Beneficence



E. Mohammed Ali vs "Smokin" Joe Frasier 1974 (The Rumble in the Jungle)

Question 4. What three (3) questions should you always ask a diabetic patient prior to providing dental care?

Select the incorrect answer

- A. Did you take your medicine?
- B. Did you eat today?
- C. How do you feel?
- (D) Have you been to Club Envy, yet?

Question 5. Why is is important to ask patients to show you all of the medicine bottles prior to dental treatment?

- A. Many older patients share medications.
- B. Many patients take herbal remedies and "Over the Counter" medications and do not consider them medicines.
- C. Many older patients have similar classification medications prescribed by multiple physicians.
- D. All of the above.

Dental Gerontology Competency Examination #1, 2002

Mr. John Smith, a 63-year-old African American, presents as a new patient for comprehensive dental care. He has a partial dentition consisting of 18 teeth. Upon initial examination, you determine that Mr. Smith has nine teeth with intra-coronal restorations and three full coverage crowns. Six of the teeth restored with intra-coronal restorations have recurrent caries and you observe five root surface caries.

Questions 1-5 relate to Mr. Smith:



Question 1. How would you rate Mr. Smith's caries susceptibility?

- A. High
- B. Medium
- C. Low
- D. Unable to determine with the information provided.

Mr. Smith takes the following medications: Hydrochlorothiazide (HCTZ) 20mg/day, Corgard 20mg/day, and Lipitor 40 mg/day. Mr. Smith's blood pressure was 152/89 RAS. He complains of difficulty walking on certain days (when it rains) and has difficulty reading a newspaper (with glasses).

Question 2, Mr. Smith does not complain of a dry mouth when questioned. Upon examination you notice that the mucosa is appears "varnished" and the saliva you observe is thick and frothy. Is this finding significant and if so why?

A

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It is significant. You should approach this patient as though he has Xerostomia and begin preventive measures appropriately.

It is significant. The signs and symptoms are not significant enough to begin any interventions now; however, you should be alerted to possible impact of Xerostomia in the future.

C. It is not significant. The patient does not complain and in the absence of subjective symptoms, no intervention is indicated.

D. It is not significant. Many older patients have caries. Younger patients have been exposed to fluoride and demonstrate lower caries activity rates.

3. Using the OSCAR assessment, how would you rate Mr. Smith's Systemic Assessment?

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A Mr. Smith is a Type 1 patient with controlled medical conditions.

B. Mr. Smith is a Type 2 patient with moderate medical conditions.

C. Mr. Smith is a Type 2 patient. His blood pressure and high cholesterol require a written medical consultation.

D. Mr. Smith should not be treated in the dental office until a full written medical consultation is obtained from his physician.

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Considering Mr. Smith is 63 years old, would you consider placing crowns on Mr. Smith's teeth?

A. No. A 63-year-old patient is too old to plan to place crowns on teeth.

This type of treatment plan is considered excessive and inappropriate.

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- B. Yes. All teeth that require extra-coronal restorations should be appropriately treatment planned.
- C. Not enough information provided to make a defendable decision.
- 5 4. Which of the following are important considerations for Mr. Smith?
 - A. normative age changes,
 - B. the patient's diagnosis.
 - C. the patient's pharmacologic regimen
 - D. the dentist-physician interaction.
 - E. All of the above

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- D. A and C
- All of the above

Question 10: Upon examination tooth #30 does not have any recurrent decay. You examine all of Mrs. Jones' teeth and see similar restorations in all four posterior quadrants.

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Japan has the fastest growing percentage increase in the aging population of all industrialized countries. The percentage increase between the years 1994 - 2010 is just over 100%. Singapore has the fastest growing percentage increase in the aging population of the non-industrialized nations at just over 200%. By way of comparison, the United States expects a percentage growth rate increase of just over 60%.





Question 11: With respect to public policy, which nation (Japan or Singapore) will need to resolve issues that are most likely to parallel the United States, and therefore provide useful experiences for American legislators?

- A. Singapore. This nation has the fastest growing percentage of aging persons. They will, by necessity, need to adjust public policy to accommodate to the demands placed on society.
- B. Singapore. This nation has the economy to fund issues that affect the aging population.
- C. Japan. This nation's economy is most like the United States. The rich tradition of respect for elders influences public policy.
- D. Japan. This nation's economy is subject to world market forces similar to the United States. With the recent economic slowing of world economies, the Japanese Parliament is facing challenges similar to those faced by the congress of the United States.

The percentage increase in growth rate of aging patients (60%) that is projected in the United States will impact on the way you practice dentistry. Please evaluate the following answers and their justifications.

Question 12: The majority of patients that require restorative dental procedures in the United States are mature and aging adults. This circumstance is due in large part to the impact that fluoride has on the population. Younger patients who are exposed to fluoride for a longer time tend to have fewer dental caries.



(C)

- A. True
- B. False

Question 13: With respect to the restoration of teeth of aging patients:

- A. I expect to place a high percentage of initial restorations in teeth that have not previously been restored.
- previously been restored.

 B. I expect to place a low percentage of Crowns and Extra-coronal restorations on teeth of aging patients:
 - C. I expect to replace a high percentage of intra-coronal restorations in the teeth of aging patients (re-restoration).
 - D. I do not expect to place a large number of restorations in the teeth of aging patients due to good oral hygiene, compliance with recommended recall intervals, and the effect of fluoride.

Question 14: With respect to scheduling of geriatric patients:

- A. Most seniors continue to work and therefore have busy schedules that limit availability for dental appointments.
- B. Most aging patients are ill and cannot come to the dental office easily.
- C. Most geniatric patients have time available during the middle of the day when most dental practices are not overly busy.
- Most aging patients prefer early morning or late afternoon appointments.

Question 15: With respect to trends of edentulism (select the correct answer):

A. Edentulism affects more geriatric patients today than in 1950.

B. General dentists can expect to make more full and partial dentures as the growth rate of aging patient's increases during the first 30 years of 2000.

C. Edentulism is at its lowest point in dental history and the trend is that this decline will continue for the next 20 years.

D. The demographic trends in poverty of aging in the United States will affect the financial viability of dental practices in urban and suburban communities.

Question 16: The periodontium of the older patient can show a variety of inflammatory and degenerative states. Contemporary literature that focuses on tooth loss patterns of older adults frequently named periodontal disease as a major cause of tooth loss in older patients.

B

A. True

B. False

Question 17: Out of respect for a patient's autonomy, third parties should only become involved with the patients express permission or in situations in which the patient is unambiguously unable to comprehend the proceedings and express himself or herself.

A

A. True

B. False

Question 18: Teeth and Restorations: A lifetime of secondary dentin deposition, often exaggerated by caries, occlusal or incisal wear, cervical abrasions, of the placement of multiple restorations results in teeth that have smaller pulp chambers.

Question 19. Teeth with multiple restorations in aging patients are less responsive to stimuli and have less dentinal porosity.

A

A

A. True

B. False

Question 20. Teeth in aging patients are increasingly brittle and probably have a diminished capacity to mount a defensive odontoblastic response to pulpal exposure.

A. True

B. False