Qualifications of a Pediatric Dentist

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In 1947, Pediatric Dentistry was formally recognized as a specialty in dentistry. There are currently over 7000 members of the American Academy of Pediatric Dentistry. Despite this large number, many people are unaware of the role they serve as health care providers [1]. The purpose of this article is to give a clearer understanding of the educational process of becoming a Pediatric Dentist, the scope of services that they are capable of providing and their role as primary care providers [2].

The American Academy of Pediatric Dentistry defines Pediatric Dentistry as "an age-defined specialty that provides primary and comprehensive preventative and therapeutic oral health care for infants and children through adolescence, including those with special health care needs" [3].

There are currently sixty-five postgraduate pediatric dental residency programs throughout the United States and Puerto Rico [4]. These residency programs may be hospital based where the majority of the clinical training is within a hospital setting or University or "School" based and as the name implies, the clinical training resides in the dental school setting. All residency training programs are a minimum of 24 months in duration and are held accountable to educational standards through the American Dental Associations Council on Dental Accreditation. In order to qualify to receive advanced specialty training education in pediatric dentistry, the student must have graduated from a dental school in the US or Canada that has been accredited by the Commission on Dental Accreditation. A graduate from a

foreign dental school who possesses equivalent educational background and standing may also be considered [5].

The purpose of a pediatric specialty program is to provide special knowledge and skills beyond dental school training. At the conclusion of the residency program, the Pediatric Dentist should be capable of providing services in institutional, private, or public health settings. A Pediatric Dentist should be capable of coordinating care with other members of health care teams including physicians, psychologists, therapists and social disciplines [3].

Each program must provide a didactic curriculum in biomedical sciences to support the clinical and research portions of the training. This includes pharmacology, microbiology, embryology, genetics, anatomy, oral pathology and biostatistics.

The clinical aspects of a residency program provide an in-depth education in the physical, psychological and social development of the child and adolescent. Behavior management of the child in the dental setting and the various aspects of communication techniques are utilized and include the principles and objectives of conscious, deep sedation and general anesthesia.

The medical aspects of training include exposure to those with special health care needs that may include developmental disabilities, genetic or metabolic disorders, infectious diseases, sensory impairments and chronic diseases. Pediatric dental programs stress resident involvement with multidisciplinary teams to effectively evaluate and manage children with special health care needs. This includes providing alternatives in the delivery of dental care that the medical condition may warrant. The resident must be competent in the diagnosis and normal and abnormal craniofacial growth and

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development and when necessary consult and or refer to other specialists in the medical and dental fields.

Pediatric dental residents are proficient in the management of orofacial injuries, including evaluation, diagnosis and treatment of these injuries in the primary and permanent dentition. The experience is achieved in the clinical setting and the required rotations in the emergency room. The residency training program requires participation in the treatment of patients in the operating room setting, as well as the evaluation and medical management of patients admitted to the hospital. Research, an important aspect of postgraduate education, requires participants in a residency program to complete a research paper that involves data collection and analysis with the results reported in a scientific forum [5].

Upon successful completion of a pediatric residency program, the dentist receives a Certificate in Pediatric Dentistry. That individual is recognized by the American Dental Association as a Specialist in Pediatric Dentistry and may practice in this capacity.

Board Certification is a voluntary process designed to validate the knowledge, application and performance delivery of proficient care in pediatric dentistry and is structured in a similar format to our medical colleagues. There are currently two parts to the certification process: 1) the written qualifying examination which is designed towards validation of the candidate's advanced training in pediatric dentistry; and 2) an oral clinical examination or site visit. Upon successful completion of both sections, the candidate becomes "Board Certified" and receives their diplomate status by the American Board of Pediatric Dentistry [6].

The educational process of becoming a Pediatric Dentist is comprehensive and rigorous. The training allows one to play an integral part of the "team" approach to treating the child with acute and chronic diseases. The wide range of services that can be provided assures the patient state of the art care. The complexity of medical conditions and understanding the relationship that exists between the oral health and medical health is critical to ensure optimal oral health for children, adolescents and those with special health care needs.

The mission of a Pediatric Dentist is to promote optimal oral health and to serve as a liaison with other health care groups and the public. We value the unique qualities of every child or adolescent regardless of their development or special health care needs. In addition, we support efforts to improve access to care and eliminate financial and cultural barriers to care [7].

References

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