

Importance, Advantages, and Objectives of Taking and Recording Patient's Medical History in Dentistry

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Abstract

Introduction: Taking and recording of medical – pharmacological histories of patients before dental procedures by dentists are extremely important and should be considered as a duty. This study aims to determine the importance, benefits, and aims of assessing the medical history in dental patients.

Methods: This study was a narrative review which reviewed the studies published between 1980 and 2015 by using an electronic, academic and scientific resource approach with the following key words, including: Medical history, Dentistry, Patient, Aims and Benefits. At the end, the collected data were simply content analyzed.

Results: In this study, 12 important and practical aims were identified in patients' history, as follows: 1) Achieving a correct diagnosis, 2) Communicating with the patient, 3) Informing the patient, 4) Planning treatment, 5) Determining appropriate prognosis, 6) Managing the patient, 7) Keeping data, 8) Attaining communication between doctor and dentist, 9) Discovering preventive factors, 10) Preparing legal documentation, 11) Developing clinical studies, and 12) Providing educational programs.

Conclusion: getting to know the patients means having more control on the patient and the disease and is the basis of making the right decisions and designing prevention and definite treatments, which have important benefits for both the physician and the patient.

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Introduction

Taking the drug and medical history of patients by the dentists often relies on the information provided by the patients (1). This means the awareness of the dentist about history, feelings, and attitudes of patients and their ability to communicate with them are among the most important tasks of dentists in the diagnosis process. It is emphasized today that every dentist should have competence in the field of diagnosis. Learning and particularly the responsibility to take and record the patients' medical history properly is an art (2). The effectiveness of taking and registering medical history is significantly based on having a constructive relationship between the dentist and the patient (3, 4).

Importance and Benefits of Assessing Medical History

The emphasis on taking patients' medical history is not only useful for the dentist to use the relevant information to treat the disease, but also emphasizes that before any treatment, the dentist must obtain the necessary information about the following two questions: (5, 6)

A. What risks may the dentist face from the patient's side?

B. What risks may the patient face from the dentist's side?

Studies have shown that taking patients' information, as a basis for decision-making diagnosis and treatment, has reduced medical expenses about 15 to 30%. Thus, accurate and complete gathering and recording information and relying on it have economic effects besides treatment benefits (7).

It is noteworthy that the maximum value of patient's history to determine the diagnosis depends on the constructive communication between the dentist and the patient, so a hasty approach without patience will provide no complete history (8).

According to Mahlon point of view: "During the process of becoming a doctor, something strange occurs; the medical students forget how to talk with others." He also notes that it should not be forgotten that patient's care starts with communication, attention, and interest in the patient (9).

Studies have shown that with careful patient's history, 90% of risky situations can be avoided (10).

So taking a thorough and complete medical history, as an important task and professional competence of a dentist, can be important and beneficial to prevent and resolve numerous issues of the patient and physician.

Methods

This study was a descriptive or narrative review of information. The data were collected by searching texts in dentistry references, and related journals in the field of methods to assess health status and diseases, using library resources, and dentistry electronic data bases. Afterwards the collected data relating to the study title and objectives, were identified, classified, and simply content analyzed and finally selected and approved by some experts' point of view.

Descriptive review includes assessing all the data related to the subject and purpose of the study, but with no specific method, as that in the systematic review. In descriptive reviews, the choice of manuscripts, more or less, depends on the experience and view of the author (11).

Results

The findings of this study focuses on two subjects, as the most important aims of taking medical history in dentistry



as presented below:

A) The aims of taking information: which contains certain aims; some of the most important ones are as the following:

- 1) Achieving a correct diagnosis (12)
- 2) Communicating with the patient (13-19)
- 3) Informing the patient about his situation (10,14,16,20,21)
- 4) Designing treatment planning (20,22)
- 5) Determining appropriate prognosis (22)
- 6) Managing the patient (16,23,24)

B) Aims of data recording: Data recording, beside data collection, is also of paramount importance, mentioned as the following:

- 7) Keeping data (2,13,20)
- 8) Establishing communication between doctor and dentist (25,26)
- 9) Discovering preventive factors (27,28)
- 10) Preparing legal support (10,13)
- 11) Developing clinical studies (17,29)
- 12) Assessing the need to develop educational curriculum (30,31)

Each of the above results will be explained in the discussion section.

Discussion

In the results of this study, 12 essential objectives for taking and recording patient medical history was determined. These are comprehensive objectives that are useful for patients, dentists and physicians. This objectives has been accepted and approved by many experts.

1. Achieving a correct diagnosis

If we accept this standard sentence that “diagnosis is half the cure” and believe that success is based on correct diagnosis and diagnosis is based on the information, in this case the importance of gathering information will be determined for us. Accordingly, achieving diagnosis along with scientific abilities needs skill. Skill refers to the expression of practical knowledge through scientific ability (12). Thus, the research findings suggest that the dentist's skill for diagnosis, results from the following abilities:

- (a) Having sufficient information about the structure and function of oral cavity and teeth,
- (b) Having the ability to differentiate the diseased cases from normal conditions,
- (c) Having the ability of communication in taking history and symptoms of the disease and finally judging and collecting information principally.

2. Establish a Relationship with the Patient

A constructive and correct communication between physicians and the patients has a significant impact on the results of treatments.

Accordingly, we can mention the declarations of Taheri and Drossman who state: “The communication established between the doctor and the patient is the principal of medicine and axis of all clinical measures that cannot be assigned to another.” They also say that: “Those patients who are involved in their treatment plan feel more desire to manage their symptoms more effectively (13-15).

Shafagh quotes from experts that even the way of talking and the sound of the doctor and the dentist can be considered as an important factor in the communication between the patient and the doctor (16).

Hrankowski refers to a study in his article that particularly criticizes the one-sided view of western doctors and dentists on human and seeing him simply as a biophysical element: “Looking at human beings should be done in three levels and as an integrated set of body, mind (thoughts) and spirit”. He also warns dentists that they should not only consider patients from the mouth area or just their disease. In fact this issue will cause them to consider all patients similarly, while each patient must be considered as a unique creature (17-19).

3. Informing the Patient about his Situation

Patients need explanations and information about the cause of their disease and want to know what their problem is or how their treatment affects their daily lives and are often concerned about this issue that their doctor or dentist will not share all the information with them. They want dentists to pay attention to their pain and problem(10). Therefore, the physician must share the findings with the patient (20). Shafagh's quotes from experts: “The cause of failure of most dentists is because of having no correct communication with patients and not explaining the issues to them; this defect is because the patient's psychology and communicating with people are not taught to students in dental schools (16).

Studies have shown that less than 13% of physician's or dentist's time is dedicated to preparing and talking to the patient in a visit, during which averagely 10 questions are asked, mostly by the physician than the patient (16, 21).

While the patient and dentist's agreement on the treatment plan, considered as one of the most important treatment processes, will only occur when the patient is informed about his disease by the dentist, which will increase his power to choose to participate in the treatment(14).

4. Determining Prognosis

Studies have shown that one of the greatest shortcomings of traditional dental education is a neglecting prognosis as a process and how to organize this process. One of the reasons for ignoring the importance of prognosis is associated to the inability to recognize the nature of the disease, which is problematic for dentists to prescribe steps that would ensure accurate assessments of prognosis (22).

Generally, factors affecting the prognosis can be divided into three components: the patient's behavior and resistance to accept medical procedures, local health as an indicator of the appropriate health conditions in the area treated by the dentist like blood supply or healthy connective tissue, and the quality of treatment that affects the prognosis to a large extent (20).

5. Designing and Adjusting Treatment Plan

Treatment planning is a logical, scientific patient-specified layout that is designed through the process of data collection and diagnosis. As the patient is considered as a biological system, the dentist can only predict treatment outcomes and cannot guarantee the possible results, so a treatment plan should be seen as a strategy that can be changed and adjusted.

Several factors, including patient's health, expectations, psychological factors, and financial considerations affect the treatment plan. Most of these factors are related to the patient that can be converted from a challenging condition

to a condition to achieve the best results by the constructive interaction between the dentist and the patient. This will not be achieved unless obtaining the right information from and giving fair information to the patient (22).

6. Managing the Patient

Dental procedures and events cause a stressful situation for patients. Some of the causes include stress and anxiety, inconvenience, treatment costs, treatment duration, and feeling that the dentist has considered him a coward. So, controlling these issues requires management. A critical point to be considered by the dentist about patient management is that the dentist creates the backgrounds of self-management for the patient by this, which is invaluable in treatment processes and makes a good feeling for the patient from his dental experience (23).

Under a law, known as the "3-11" law, patients who have a good experience of their dentist at the first meeting can transfer their good experience to three of their friends and another interesting point is that if they have a bad experience with their dentist, they will transfer this experience to eleven of their friends (24). Confirming this finding, one study shows that 53% of new patients to a dentist is through the recommendations of their friends (16).

7. Keeping Information

Since the field of dentistry is regarded in the third rank concerning patients' complaints compared to the other medical specialties, keeping patients' records and information has a special value (13). In addition, keeping these documents enables the dentist to review the information in leisure or in the process of a study and thereby develops their clinical research(20). Recent studies show that increasing patient awareness of their own rights from dentists, has increased their requests to access medical dental information. So, keeping these information by the dentist and according the available technology can fulfill this right demand of the patients(2).

8. The Possibility of Communication between the Dentist and the Doctor

Today, with the rapid progress of medical science and the discovery of many of these disciplines in this field, the need to establish a relationship between the doctor and dentist is increasingly comprehended.

Dentistry is a younger field than medicine and is therefore not considered dependent to medicine in their procedures from the perspective of medical practices. Thus, many physicians consider dentistry as a purely mechanical profession, which may be due to lack of communication and consultation between doctors and dentists. Therefore, taking and recording patients' medical history by the dentist can rise questions and advices that can bring these two treatment groups together (25, 26).

9. Discovering Preventive Factors

Prevention includes steps during which the disease is prevented, in other words, identifies and eradicates the causes of the disease rather than its effects (27). As taking, recording, and keeping information makes a basis for reviewing and re-assessing patient's medical history, it is a valuable resource for discovering the main causes and origins of the disease, regarding patients' symptoms, complications, or other information that has helped better diagnosis for the dentist. Success in prevention is not only

removing a threat, but also an opportunity that is considered to optimally allocate the national capital and health sector budget(28).

10. Preparing Provision of Legal Support

A lot has been written recently about the legal aspects of dental practice. Studies show that 7-8% of dentists in the United States are called on courts. It is also noted in another study that dentists have the majority of patients' complaints after women and orthopedic specialists (13). According to data presented, it can be assumed that taking and recording patients' information can be provided as the most important document in the court by the dentist, in addition to reducing treatment risks. By providing such information, leading to a successful defense, the dentists can not only support himself, but also strengthens the perception that dentists are concerned about their patients(10).

11. Developing Clinical Researches

It is emphasized in research protocol advices that the research is not done in blankness, but develops previous researches, which is completing them, or criticizes them to offer an overview in the provided or existing knowledge (29). Anyhow, the attention is focused on the fact that resources and primary data is deemed essential for any investigation.

As far as registering the obtained information is concerned as a source of information, studying them enables the dentists to gather dentists for research in problematic matters and thereby helps research in various forms, including clinical research (17).

12. Assessing the Need for Developing Educational Curriculum

Due to rapid changes and growth in contemporary science, formal training programs alone cannot meet the needs of these changes and requires other training programs, referred to as professional development in education (30).

As far as assessing the need for developing educational curriculum is concerned as a principal step, any kind of information, including information obtained from the patients, helps us in identifying needs and can be considered as a basis for developing educational curriculum (31).

Conclusion

Accurate and thorough inspection of patients' history is emphasized in dentistry through adequate and effective communication with patients and having a general and integrated vision of the human aspects, not just the mouth or teeth. Reviewing the whole, taking and recording patients' information systematically is considered as the first step in any planning and the basis of right decision-making diagnosis and designing prevention and treatment plan that has great benefits for both the physician and the patient. The 12 aims presented in this study can guide the dentists and physicians. It can be said that this framework can be an extremely useful and necessary framework for them.

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