

2761 Patient Attitudes on Screening/monitoring of Medical Conditions by Dentists

Location: Exhibit Hall D (Miami Beach Convention Center)

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Objectives: We previously demonstrated the efficacy and willingness of oral health care professionals (OHCP) to conduct chairside medical screening to identify patients with increased disease risk. We now address patient willingness to participate in medical screening by OHCP.

Methods: As part of an ongoing study, a 5-point Likert-scale (1=very important/willing, 5=very unimportant/unwilling) survey was administered to New Jersey Dental School clinic patients. The Friedman nonparametric ANOVA was used to compare responses to questions addressing “willingness to provide specific types of specimens,” and “important issues when considering participating in medical screening by OHCP.” Post-hoc comparisons were conducted following Siegel and Castellan (1988).

Results: Of the 175 respondents, 40% were male; 42% were 40-60 years old. The majority felt it was important for OHCP to conduct medical screening (94%) and were willing to have OHCP conduct screening for: cardiovascular disease (81%), hypertension (90%), diabetes mellitus (83%), HIV infection (81%), and hepatitis (81%). Respondents were willing to: have OHCP conduct screening that yields immediate results (91%), discuss results during the visit (88%), receive a referral to a physician (89%), provide saliva specimens (88%), provide finger stick blood (75%), and pay \$10-20 (69%). The majority felt their opinion of the dentist would improve for: competence (76%), compassion (76%), knowledge (80%), and professionalism (80%).

Post-hoc comparisons showed respondents were significantly more willing ($p<0.05$) to provide saliva than finger stick blood (mean ranks 2.47, 2.83 respectively). Not being a physician was significantly less important ($p<0.05$) than time, insurance coverage, or confidentiality for participating in medical screening by OHCP (mean ranks: 3.54, 2.75, 2.74, 2.50 respectively). Confidentiality was significantly more important ($p<0.05$) than insurance coverage or not being a physician (mean ranks: 2.50, 2.75, 3.54 respectively).

Conclusions: Patients felt medical screening by OHCP was important and were willing to participate in medical screening during their dental visit.