Assessment of Predoctoral Students' Confidence in Pediatric Dentistry in U.S. Dental Schools

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Background

- Dental caries is the most common chronic condition among children in the United States¹. Prevalence of early childhood caries (ECC) and severe early childhood caries
- (SECC) continues to increase in recent years². The younger the child's age, the least likely a general dentist will provide care, with research showing that children under 3 being less likely to see a general dentist when compared to other $ages^3$.
- The American Academy of Pediatric Dentistry (AAPD) recommends caries risk assessment, oral hygiene instruction for parents, and exposure to fluoride within the first 6-12 months of life⁴.
- Data suggests there may be a gap in care and comfortability among general dentists providing care to children under 3⁵.
- This presents a great opportunity in dental educations to augment pediatric curriculum for this young population of patients. However, little is known about existing trends in pediatric dental curriculum.
- Hypothesis:
- Dental school characteristics are associated with pre-doctoral educational trends and student educational outcomes related to the oral health care of children.

Objective/Purpose

• The study is an exploration of national pre-doctoral curricula in pediatric dentistry to assess trends in dental education and dental student preparedness to care for children.



- Obtained a list from the AAPD of predoctoral program directors
- Provided an IRB-approved introductory script and survey link to distribute to predoctoral pediatric directors
- Electronic survey administered through RedCap
- School demographic, clinical education, student preparedness, and COVID impact

This research was funded by the Student Research Fellowship grant. UNMC IRB approved protocol #0295-23-EX. Study data were collected and managed using REDCap electronic data capture tools hosted at UNMC. REDCap (Research Electronic Data Capture) is a secure, web-based application designed to support data capture for research studies.

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- 8/11 programs offered infant oral exams
- 5/10 schools ranked their student's preparedness as neutral or below.
- with IDDs, and alveolar trauma.
- management.
- Limitations of the Research
- Response bias is possible due to program directors avoiding discussing their program negatively.
- Survey feedback noted that some questions were not programmed properly.
- Future Research

We appreciate the support of:

- analysis

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Conclusion

• With our sample size, there were no significant

associations between dental school trends and outcomes.

Other areas of lower student preparedness include pulp therapy, voice control, protective stabilization, space management, patients

Experiences least offered by dental schools included pediatric sedation, operating room experience, and advanced behavior

Students on average did not see patients for 4.5 months during COVID and overall did not impact faculty at the responding schools.

- Lower statistical power due to low response rate.

• Surveying new graduate dentists to assess their confidence providing pediatric dental care.

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