

Timeliness of Primary Care Provider Referral and Reasons for First Dental Visit in Children <72 Months of Age in Central Brooklyn, New York

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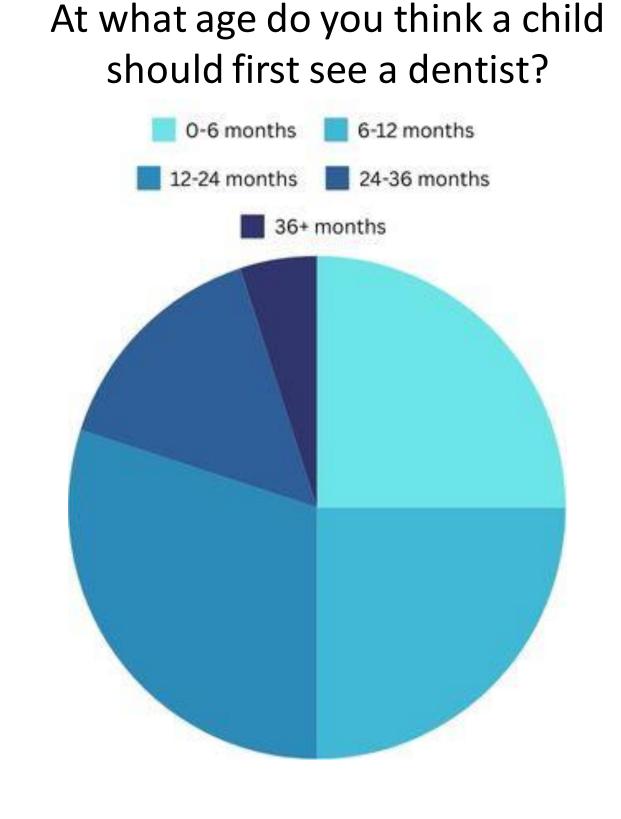
Abstract

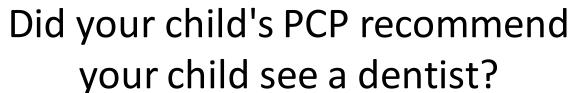
The American Academy of Pediatric Dentistry advises establishing a dental home for children by 12 months, offering evidence-based oral health care. Early visits reduce cavity risk, with each year before the first dental visit doubling the risk. Primary care providers (PCPs) play a crucial role in educating and referring patients. Early preventative visits lead to lower costs and increased subsequent preventative services, addressing issues like dental pain or caries. Limited caregiver education and social determinants affect timely dental care access. This study aims to assess the extent to which primary care providers refer children for their first dental appointments.

Prospective Survey Study

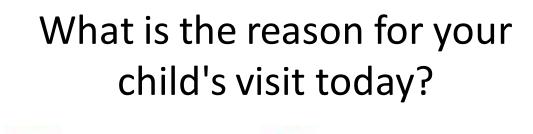
Central Brooklyn, NY is representative of a vulnerable community significantly impacted by Social Determinants of Health. An 18-question survey was given to clients at five pediatric dental clinics in Brooklyn, New York. These surveys assessed the reason for pediatric patients' first visit to the dentist in Brooklyn and included demographic factors, age at time of first dental visit, reasons for visit, as well as current understanding of oral health and parents' perceived importance of early dental visits.

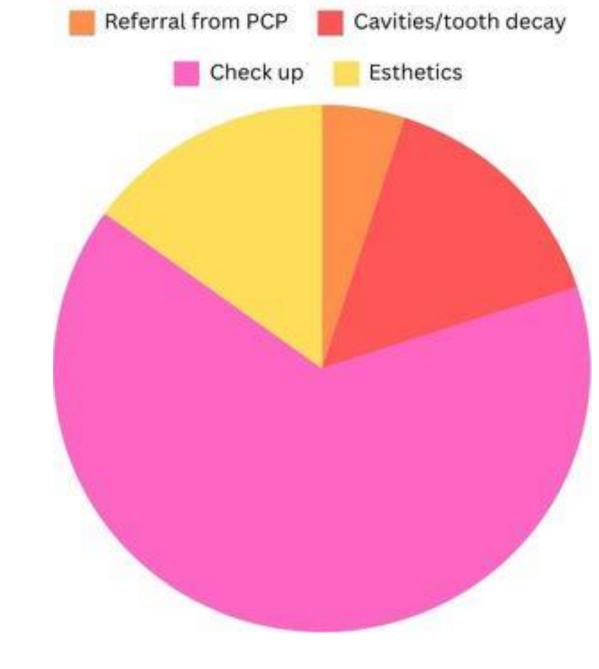
Results



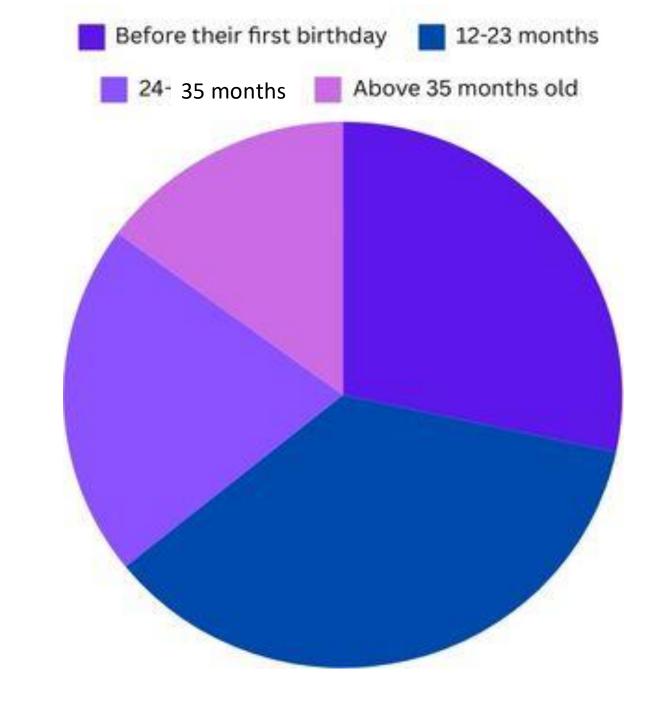








At what age did your child's PCP recommend they first see a dentist?



Discussion

Surveys were completed by 21 caregivers. Of these patients, 12 were male and 9 were female. From the surveys received, 38% of parents reported that their PCP recommended their child see a dentist. Of these limited referrals, parents report that only 28% of PCPs recommended their first dental visit be before the child's first birthday. This means that 28% of those primary care providers who referred a child to a dentist were aware of the AAPD guidelines, according to parents. Furthermore, only 5% of parents report the PCP referral as the reason for their child's first visit. This means 33% of parents were referred but did not follow through until they felt their child had other reasons to come to the dentist. Caregivers report reasons for delay in making an appointment included insurance concerns, limited availability of dental appointments, managing daily responsibilities, and lack of oral health awareness, all of which are components of Social Determinants of Health. These concerns are significant determinants of pediatric oral health.

Conclusions

These data suggests that the timeliness of PCP referral and the child's first dental visit is not adequate for the pediatric demographic in Central Brooklyn. Strategies and effective processes are needed to improve the timing of PCP referral and dental visit compliance for a child's first dental visit. The lack of PCP participation is a limitation of this study.

References



