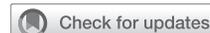


## BEHAVIOR MANAGEMENT

### Managing expectations for behavior in children



#### BACKGROUND

Working with pediatric patients presents a challenge from a behavioral standpoint, and dentists will have to adjust their method to deal with this type of patient. Another adjustment needed with children involves the accommodation of parents' expectations as well as their parenting style, both of which can adversely affect treatment.

#### MANAGING PARENTAL EXPECTATIONS

It's important to understand the mindset of parents today so that the dentist can manage their expectations when delivering care to a child. Parents today commonly question each step of the dental experience. In addition, some believe it's possible and desirable for the child to have entertaining, pain-free treatment at every dental office visit. Parents and guardians also expect to be allowed to remain with the patient throughout treatment.

Dentists must also be aware of cultural differences, which can alter the expectations of parents. Recent immigrants often have had dental experiences that are vastly different from those available in the United States. The acceptance of treatment and the behavior management techniques used will vary based on cultural factors and the dental knowledge of the parents. Should an interpreter be required when delivering treatment, a further challenge can exist with respect to clear communication.

Parental styles have changed, with children often seen as essentially equal to the parents with respect to their expectations and demands. The dentist must then assume the role of “co-parent” and balance the need to guide the patient and the need to respect parental wishes and desires. Multigenerational or blended families offer additional challenges, with a range of behavioral expectations seen in these situations.

The parent's behavior can influence children and color their experience in dental settings. Anxiety is widely present in dental patients and can be transmitted from parent to child. The anxiety may be based on the parent's previous experiences, but regardless of the reason, it can negatively impact the child's behavior and acceptance of treatment.

Parents can also interfere with the dentist's ability to communicate with the child. It's important to inform, set expectations,

and prepare the child for each step of the treatment. The communicative language used is geared to the child's age or developmental maturity. Parents should provide positive reinforcement and comfort during difficult aspects of care. They should be cautioned to not use negative terms such as “hurt.” In addition, they should avoid negative behavior reinforcement and repetitive or contradictory information. Generally, children choose to listen to parents rather than the dentist, which can create problems in care delivery.

#### BALANCING EXPECTATIONS AND ASPECTS OF CARE

Several suggestions may help the dental practitioner achieve a good balance between parental expectations and the demands of professional care for the child. These include giving full explanations of all options, establishing ground rules and expectations for each party in the treatment journey, and realizing that it's impossible to please and help everyone.

##### Explaining options

During the informed consent process, the dentist should include all realistic options that are available for treatment. He or she should also acknowledge parental desires and expectations regarding behavior management and possible settings for treatment delivery. The risks and benefits of each behavior management option should be explained.

For well-behaved children, the conversation can be very straightforward, but for uncooperative or pre-cooperative children, advanced behavior management techniques such as sedation or general anesthesia may be required. Parents may prefer that the child be treated in the office rather than in a hospital or ambulatory care setting. The discussion of treatment delivery sites should be aimed at reaching the best professionally acceptable solution while respecting the parents' wishes.

##### Establishing boundaries

Before beginning treatment, a discussion of the ground rules for the child, parent, and provider is wise. The initial examination or re-care appointment can be the best time to evaluate the child's behavior and parental interactions. For parents who are likely to interfere in doctor-child communication, it may be helpful to stress that the parents should be silent partners in the care

delivery. When one parent appears to influence the child's behavior negatively, that parent may be asked to stay out of the child's sight, while a more "cooperative" parent or family member remains with the child.

Should the child require advanced behavior management techniques, the dentist should establish a "go/no go" system with the child and parent. In this system, the dentist will stop and check in with parents at strategic points to ensure that he or she is not exceeding the child's or parents' comfort level. If the parent is uncomfortable at any point, alternatives for care settings can be offered.

### You can't help everyone

Some families may have unrealistic expectations, some desire treatments that don't meet the standard of care, and some will just be more comfortable with a different practitioner. After a thorough discussion of the options, if no consensus regarding behavior management can be reached, the dentist should refer the family for a second opinion. This may allow the family to hear the same message from a different and a neutral individual.

Sometimes the new dentist fits more in line with the parents' expectations, leading to a change in dental care provider. The goal is to meet the child's needs and act in his or her best interests, so either option would be acceptable.

### Clinical Significance

It can be fun to work with children but it can also be challenging. Dentists should see the opportunity as a chance to shape the growth and development of the child and provide a positive basis for dental experiences that can last a lifetime.

Nickman J: Behavior management. *Dentaltown*, May 2018, pp 99-101

Reprints not available

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# DENTAL PRACTICE TRANSITION

## Life after you sell your practice



### BACKGROUND

Transitioning of a dental practice is not just a financial process but also an emotional one. Often dentists plan out the financial aspects carefully, taking years to ensure that it is done right. Less often, dentists seek to determine what their role will become with the transition and fail to plan to maximize their time in the best way possible.

### FINANCIAL PLANNING

The financial steps that help to prepare for a practice transition are designed to create, manage, and distribute wealth that has been accumulated. The strategies that have proved their worth include the following:

1. Pay yourself first.
2. Always know where your money should go.
3. Always know where your money does go.
4. Align your financial priorities (needs, wants, savings) properly.
5. Align your loans with the right debt payment ratio.
6. Develop the best pension strategy for your cash flow.
7. Make peace with how much you can afford to spend.
8. Adopt a comprehensive approach to investments.
9. Manage risk through proper insurance coverage.
10. Establish an estate plan that fulfills your objectives.

### NEW ROLES, NEW IDENTITY

Few dentists anticipate the emotional side of transitioning a dental practice. These individuals are used to having roles related to building and maintaining relationships with patients, managing a business, and leading staff members. After they transition, they generally choose 1 of 2 roles: to serve as an associate or partner or to walk away.

### Becoming an employee

A continuity plan generally involves the dentist serving as an associate or partner for a few years. The benefits of this

### Clinical Significance

Dentists have to plan for their life during retirement years as well as their financial health over that time. They need to begin years in advance so that they are ready when they decide to sell the practice. It's important to talk with family, current retirees, charities, universities, recreational facilities managers, and anyone else who may be able to offer some insight into life as a retired dentist. It's your time and you should spend it wisely.