THE PROFESSIONAL INTERPRETER IN A BILINGUAL DENTAL SETTING

Dr. Bertha Creager
Dental Workshop
Everyone Smiles in the Same Language:

A practical approach to dental lexicon for professional interpreters

Dr. Bertha Creager
Dental Workshop
“We clinicians are better educated and more scientific than ever before, but we have a great failing: we sometimes do not communicate effectively with our patients or with their families.”

Philip A. Tumulty, M.D Professor of Medicine 1970,22

- Professor of medicine at Johns Hopkins University.
- Native of Jersey City, was the son of Joseph Tumulty, private secretary to President Woodrow Wilson.
- He championed a back-to-basics, HUMANISTIC APPROACH TO THE TREATMENT OF PATIENTS.
- **Book: 1973** The Effective Clinician: His Methods and Approach to Diagnosis and Care
Healthcare Interpreters and the Minorities in Health Professions Languages Spoken at Home
According to the 2000 U.S. Census:

More than 46 million people in the US do not speak English as their primary language.

More than 21 million—an increase of 42.3 percent from 1990, said to speak English “very well” (U.S. Bureau of the Census 2003).

**Figure 1. Reproduction of the Questions on Language From the 2011 American Community Survey**

14 a. Does this person speak a language other than English at home?

- [ ] Yes
- [x] No → SKIP to question 15a

b. What is this language?

[ ]

For example: Korean, Italian, Spanish, Vietnamese

c. How well does this person speak English?

- [ ] Very well
- [ ] Well
- [ ] Not well
- [ ] Not at all

Source: U.S. Census Bureau, 2011 American Community Survey.

[www.sullivancommission.org](http://www.sullivancommission.org)
Massachusetts: Distribution of Race and Ethnicity - 2010

The state’s population grew 3.2 percent in the past decade from 6.5 million to 6.7 million, according to Census 2010 data released today. A look at each community in Massachusetts:

SELECT RACE OR ETHNICITY

Distribution of race and ethnicity, 2010

One dot represents up to 500 people

SOURCE: 2010 Census
Minorities in the Health Professions

April 2003 - Report of the Sullivan Commission on Diversity In The Healthcare Workforce

Made recommendations to change the scarcity of minorities in our health professions.

Recruit and Retain Racially and Ethnically Diverse Professionals in the Health Professions

Nursing
Medical Careers
Dentistry

“The Sullivan Report on Diversity”

It is an extension of a grant from the W.K. Kellogg Foundation --to Duke University School of Medicine.

16 leaders in health, business, higher education and legal experts and other leaders.

Receives its name for former U.S. Secretary of Health and Human Services, Louis W. Sullivan, M.D.

“Strategy of Inclusion in crafting solutions”
What is ORAL HEALTH?

ORAL HEALTH: an integral component to overall health and well-being.

Preventive Dental Care + Good Oral Hygiene

Are the foundation of positive oral health outcomes

Massachusetts Health Professions Data Series:
Dentist 2012
Patient Language Barriers and Access to Care

Research indicates that patients who experience language barriers when receiving healthcare are at increased risk for adverse health outcomes.

- Patients who receive health services from providers who do not speak the patient’s primary language:
  - Are less likely to access primary care
  - Are less likely to access preventive care

Massachusetts Health Professions Data Series: Dentist 2012
Welcome To DentalZone

Tooth Fairy Coupons in different Languages
PRIMARY DUTIES, RESPONSIBILITIES and REQUIREMENTS

Website/Careers

Primary Duties, Responsibilities and Requirements

- Accurate communication
- English speaking patients of all ages
- Work with spoken and written language
- Sharing information and resources through advocacy, leadership, education, and service with individuals in healthcare settings
- Confidentiality
- Empathy and flexibility
- Follow up with patients which may include making phone calls and documentation

Knowledge of Physiology and Anatomy

Don't Forget!!
1: Intraoral structures
A practical review for Dental Interpreters
An Anterior View of the Oral Cavity As Seen Through the Open Mouth

- Hard palate
- Soft palate
- Fauces
- Palatoglossal arch
- Palatopharyngeal arch
- Palatine tonsil
- Lingual frenulum
- Gingiva
- Vestibule
- Uvula
- Openings of submandibular ducts
- Tongue
- Anatomy of the Oral Cavity
  - Lip
  - Teeth
  - Lip
  - Hard palate
  - Soft palate
  - Uvula
  - Tonsil
  - Retromolar trigone
  - Tongue (front two-thirds)
  - Buccal mucosa (lip and cheek lining)
  - Floor of mouth
TOOTH ANATOMY

- Enamel
- Dentin
- Gingiva (gum)
- Pulp cavity (contains blood vessels and nerves)
- Periodontal ligament
- Root canal
- Bone
Names of tooth surfaces

- Inner surface
- Outer surface
- Chewing surface
- Adjacent tooth surface

Facial (Buccal) - Occlusal

Distal

Lingual - Front of Mouth
2: Common Dental Procedures – General Practice

- Cavities (Decay) → Fillings

- Dental Bridge → Crowns

**COMMON DENTAL FILLINGS MATERIAL**

- **SILVER METAL FILLING**
  - Amalgam

- **TOOTH COLOR FILLING**
  - Composite Resin

**COMMON DENTAL CROWNS MATERIAL**

- Porcelain-fused-to-metal crowns
- Full porcelain crowns
- Zirconia-ceramic crowns
Extraction
To Pull a tooth

Root Canal Therapy (RCT)

Full Dentures vs Partial Dentures
Did you know ....

Brain

Heart

Joints

Headache

Irritability
Prophylaxis and Scaling

Prophy Paste
American Dental Association

A SPECIALTY is an area of Dentistry that

Not all areas in dentistry will satisfy the requirements for specialty recognition.

9 Dental Specialties

Recognized by the ADA

It has met the specified Requirements for Recognition of Dental Specialties.

ADA-recognized dental specialties

- Oral and maxillofacial Pathology
- Periodontics

Figure 3. American Dental Association Specialties

Orthodontics: 7.3%
Endodontics: 5.8%
Oral Surgery: 5.8%
Pedodontics: 5.3%
Prosthodontics: 4.2%
Public Health: 1.0%
Oral Radiology: 0.8%

Executive Office of Health and Human Services
Massachusetts Department of Public Health
HEALTH PROFESSIONS DATA SERIES
DENTIST 2012
Informed Refusal of Necessary X-Rays

Date: 

Patient name: 

Dr. has advised me to have necessary X-rays for the accurate diagnosis and treatment of possible dental conditions in my mouth. The doctor and/or staff have explained the importance of using this diagnostic tool. I understand and accept the risks associated with the procedure.

Extraction Consent

Extraction(s) are to be performed on the tooth/teeth indicated. It is normal to expect no complications, but there are some risks involved. The more common complications are:

- Post Treatment Instructions
  
  1. Follow all of our home care instructions exactly as directed. Always use a fluoride containing toothpaste. Continue brushing and flossing your teeth as usual. Success of treatment depends directly on the improvement/maintenance of your oral hygiene.

Post Treatment Instructions

AFTER THE FILLING

1. Follow all our home care instructions exactly as directed. Always use a fluoride containing toothpaste. Continue brushing and flossing your teeth as usual. Success of treatment depends directly on the improvement/maintenance of your oral hygiene.

Patient Premedication Instructions

If you suffer from various heart conditions, have had heart surgery, have a pacemaker, or have a history of allergic reactions, your physician may recommend premedication prior to dental treatment. For others who have compromised immune systems due to HIV infections or other diseases, or if you are receiving treatment...

Patient Instructions after Extractions

To ensure your comfort and safety after tooth extractions, please follow these at-home guidelines, and be sure to call if you have questions or concerns.

- To minimize swelling and pain, apply cold packs to your face for the...

- Tx Consent Forms
- Tx Refusal Forms
- Post treatment instructions
- Referral Forms
4: Dental Instruments

A review for Dental Interpreters

- Syringe
- Suction
- Mirror
- Plier
- Explorer
- Burs
- Forceps
- Hand Piece
- Cotton Plier
5 SLIDES  DENTAL TERMINOLOGY - Anatomy/DENTAL INSTRUMENTS/DENTAL OFFICE/DENTAL PHRASES

Reserved for 3 Hours Dental workshop
6: Hygienist and Dental Assistant Most used ....

- You will hear me saying numbers. 1-4 are Ok but 5-10 are Bad
- Hello my name is ... the Hygienist
- Is there anything you want to improve about your mouth?
- You will be very sore for a couple of days
  - I will remove the plaque
  - Inflammation
    - Rinse
    - Spit
  - Dental floss and Fluoride
  - Dental sensitivity
  - Tooth whitening
- Stages of Periodontal Disease
- I will use local anesthetic
  - Cotton rolls and gauze
7 Slides Dental Terminology and Dental “Most Common” Dental Phrases

Reserved for 3 Hrs/Dental Workshop
Quiz

- Open your mouth and say Ahhh
  - Heart Murmur
  - Mouthwash
- Don’t eat too many sweets and brush your teeth 3 times a day
- You have calculus on your teeth
- When did you last visit the dentist
  - Where exactly is the pain?
  - Alcoholism
- Can you open your mouth please?
  - You will be very sore
  - You have an abscess
- I’m going to have to take this tooth out
  - Brush up and down
- How often do you brush your teeth

✔️ Front Desk
✔️ Dentist
✔️ Dental Assistant
✔️ Hygienist
✔️ Patient
“What Is A Clinician And What Does He Do”
(Dr. Philip A. Tumulty, M.D.)
If my Patient and I speak the same language why do we still find it hard to communicate???

**Video**
Dental Assistants struggling/Confused patients unable to follow DA directions

--Will illustrate Workshop Next Point
Did you know ....

Very often, Patients will retain only part of the conversation which agrees with their own ideas, or is pleasant to them.

Because of Anxiety and Tension, patients are Easily Confused and Poorly Retentive.

Gentle, Firm, Persistent Reiteration is essential if important concepts are to be acted upon.

Therefore Dissipations of Anxiety and Tension is always the first order of business.
Activity/Roleplay - Ribbons

8 Participants
Average comfort levels of personal space
The Struggle is Real: “Real Patients”

“I fear the overwhelming loss of control in the dental chair.”

“I’m petrified of the dentist doing things to me and having little or no say in the matter.”

“Like a turtle on its back”

“We’re never so vulnerable than when we trust someone”
Walter Anderson
“It’s More than Words”
-Dental Patient-

* Language Barrier
* Stress - Appointment
* Proxemics
* Dental chair position
Conduit
A person that is used for passing information from one to another.

Clarifier
To make clear or easier to understand.

Advocate
One that supports or promotes the interests of another.

Culture Broker
The act of linking, or mediating between groups or individuals of differing cultural backgrounds for the purpose of reducing conflict or producing change.

Good job!
Code D9994 recommended for documenting interpreter and translator services
September 08, 2016

By Jennifer Garvin

Beginning in January, the new dental case management and patient education code D9994 will be the code the ADA recommends dentists use when billing plans for providing patients with language assistance services or documenting these services.

Providing language assistance at no cost to certain patients with limited English proficiency is one of the provisions of the final rule on Section 1557. Section 1557 is the part of the Affordable Care Act that prohibits entities that receive federal financial assistance from discriminating on the basis of race, color, national origin, age, disability and sex.

Compliance requirements under the final rule include requiring covered entities to “take reasonable steps to provide meaningful access to individuals with limited English proficiency eligible to be served or likely to be encountered” as well as providing qualified interpreters and translators. Individuals with limited English proficiency may not be charged for language assistance services; the final rule does not require plans to modify fee schedules to reimburse providers for the service.
According to the Code on Dental Procedures and Nomenclature, Code D9994 applies to any “individual, customized communication of information to assist the patient in making appropriate health decisions” and is “designed to improve oral health literacy, explained in a manner acknowledging economic circumstances and different cultural beliefs, values, attitudes, traditions and language preferences, and adopting information and services to these differences, which requires the expenditure of time and resources beyond that of an oral evaluation or case presentation.”

The ADA reminds dentists that the existence of a CDT Code is not a guarantee of reimbursement for the service by a third-party payer; and also notes that Health Insurance Portability and Accountability Act only requires a third-party payer to accept a CDT Code that is valid on the date of service, and does not mandate coverage. Using this CDT Code documents the provision of the service, regardless of payment considerations.

For more information, visit ada.org/cdt and search “Coding Guidance.”

The ADA released CDT 2017: Dental Procedure Codes and the CDT 2017 Coding Companion: Help Guide for the Dental Team on Aug. 30. There is also the CDT Code Check App available for iOS and Android....

“What counts in life is not the mere fact that we have lived. It is what difference we have made to the lives of others that will determine the significance of the life we lead.”

~ Nelson Mandela

"A generous man will prosper; he who refreshes others will himself be refreshed."

Proverbs 11:25

Dr. Bertha Creager
Medico Estomatologo