



## Referral Pathway for Management of Oral Diseases- Creating Care Pathways with A Smile..... For A Smile

**Rakhi Issrani\***

*Lecturer, Department of Preventive Dentistry, College of Dentistry, Jouf University, Sakaka, Kingdom of Saudi Arabia*

**\*Corresponding Author:** Rakhi Issrani, Lecturer, Department of Preventive Dentistry, College of Dentistry, Jouf University, Sakaka, Kingdom of Saudi Arabia.

**Received:** September 03, 2019; **Published:** September 23, 2019

**DOI:** 10.31080/ASDS.2019.03.0648

In the past, there was usually one place where the dental patients use to seek all the dental treatments. But now, since a couple of decades, a new approach to a series of dental services called referral pathways has opened lots of gates with new providers- in primary care and secondary care that might be appropriate for the patients' needs. The general dental practitioners (GDPs), other secondary care providers, medical practitioners and community dental clinics refer the patient for a number of possible reasons viz. treatments that are complex and beyond the scope of GDP, treatment requiring special equipment or tests not available in general practice, for a second opinion or advice on a treatment plan.

Literally referrals are a major factor in the way many of the most successful dental specialists have built their practices since the majority of the patients prefer a specialist/consultant as a result of a referral. But then many questions emerge like what are the benefits and risks associated with such referrals? What is the scenario of referral pathways in our country? And so on.

In my opinion, the referral pathways are the means to gain a win-win situation for both the practitioners and the patients. When administered successfully, it is generally accepted that these pathways can lead to improved outcomes for patients by ensuring that the treatment is provided when there is going to be a significant benefit to the patient and when the expected and/or intended outcome is likely to be good. This helps in developing high-quality clinical outcomes for both the parties with the patient receiving the right treatment, in the right place, at the right time and provided by the right individual.

Few of the benefits of referral pathways are greater patient trust and satisfaction, higher patient retention, increased case acceptance for elective procedures, and financial success since the referred patients tends to be more profitable to practices than non-referred patients. But then in each loss there is a gain, as in every gain there is a loss, so there are few risks as well that are associated with such pathways like the increased financial burden to the patient as very often the patients are asked to repeat the tests. Also, it is tiresome and problematic for the patient as they keep moving back and forth in the system until all the necessary information has been obtained.

In our country, the referral pathways for dental diseases are still not completely established to manage the referral of patients from primary care practitioners to enhanced practitioners and consultant and specialist services. Contrary to popular belief, in most interdisciplinary cases, there is generally little teamwork involved between offices due to time constraints and the absence of a structured system. In my view, the other and an important reason for the lack of teamwork is that the production of graduates and postgraduate dental students is more and also the mounting debt barrier to them mainly the educational loan. This all leads to more competition among us for the survival of the fittest. Subsequently, this all results in a disappointed patient.

A lot of people now have an undergraduate degree and having a master's just give an "upper edge" above everyone else. So the specialist conducts workshops/hands-on/diploma courses for the GDPs and specialists of all dental disciplines, thus adding

to more competition among themselves and an unstructured system for a referral. Then again there is a pressure to keep up with the advancing technologies that also adds to the debts of the practitioner, hence restricting the patient referral for the personal financial profits and neglecting what is best for the patient.

So to boost referral pathways and to generate more and better patient referrals, careful planning, execution and process is needed, along with an investment of practitioner's time, his staff's time or that of an expert consultant. The rewards, however, will be well worth the investment. Referrals are worth their weight in gold, but remember that they are also a two-way street. We must actively and consistently work to build these relationships. We must also seek ways to reward referral sources for their business and help build their practices.

Everyone is aware of the fact that the continued health and growth of dental practice depends on bringing in a substantial number of new patients, year-in and year-out. Referred pathways not only bring in more new patients but also it is by far the most cost-effective mode. The way that dental care is delivered in primary care and across into secondary care is undergoing significant change in many countries but it is still in budding stage in our country.

**Volume 3 Issue 10 October 2019**

**© All rights are reserved by Rakhi Issrani.**