

Confidence of Clinicians in Performing Minor Oral Surgery Procedures

Presenter: Nerina Tackie

Lyneham Dental Centre

Objectives:

The number of referrals received in secondary care for the treatment of minor oral surgery (MOS) procedures has been steadily increasing, and lack of confidence of clinicians working in primary care may be a contributory factor. Undergraduate and postgraduate teaching and experience, as well as training opportunities were investigated to assess their influence on self-perceived confidence levels in performing MOS procedures.

Methods:

A validated questionnaire was developed and distributed electronically to 178 clinicians within Defence Primary Healthcare (Dental) (DPHC), and open for participation between February to March 2024. Data was collected using a combination of closed and open-ended questions. Likert scale responses were also obtained to measure levels of confidence in performing various MOS procedures.

Results:

A response rate of 64% was achieved following distribution of the questionnaire. 54% of participants did not feel that their MOS undergraduate experience prepared them enough for general practice. Well supported undergraduates were more likely to be confident in performing MOS at undergraduate level ($p < 0.001$). Those who had experience of working in a secondary care environment showed significantly higher levels of confidence than respondents who had not, especially in raising a mucoperiosteal flap ($p = 0.0002$), sectioning a tooth ($p = 0.004$) and bone removal ($p = 0.0003$). Respondents who had experienced DPHC support or mentorship showed the most improvement in confidence for performing an elevation of a tooth/ root using a luxator or elevator ($p = 0.019$).

Conclusion:

Given that 97% of respondents were interested in improving their confidence in performing MOS procedures, further development of training pathways and courses for clinicians would be of great benefit. This would not only result in increased confidence levels to provide more treatments but would also avoid unnecessary referrals to secondary care.