

Parental Presence/Absence in Pediatric Dentistry

Question

Should pediatric and family dental practices encourage or discourage parental presence in dental operatories during pediatric patients' appointments?

Answer

Having or not having parents present in dental operatories during their children's appointments — referred to as parental presence/absence — is recognized as a behavioral management technique in pediatric dentistry. However, the question of whether and when parents should be present or absent in the operatory during their child's dental care is somewhat ambiguous, with no clear consensus among the dental community. Opinions on this topic may vary widely among dental professionals as well as between dental professionals and parents.

In some cases, dental professionals might find that the presence of a parent in the operatory during a dental encounter helps minimize a pediatric patient's anxiety, improves communication, helps support compliance, and mitigates negative behaviors. Other times, the presence of a parent might create safety concerns, lead to disruptions in care, increase the patient's anxiety (particularly if the parent is anxious or dental phobic), and prevent the dental professional from building a healthy provider–patient relationship.¹

Because each patient and dental encounter are unique, a rigid approach or policy related to parental presence/absence is not advisable and will likely not be well-received, which may lead to conflicts, complaints, and legal risks. Thus, dental practices should develop flexible policies related to the presence of parents in operatories and make decisions on a case-by-case basis with patient safety as the top priority.

Risk Q&A: Parental Presence/Absence in Pediatric Dentistry

The following considerations and strategies might be helpful when making decisions related to parental presence/absence and communicating with parents and patients:

- Work with other providers and staff members in your practice to develop an organizational philosophy on parental presence/absence, and include this philosophy in patient brochures, welcome packets, your website, etc.
- Discuss with parents the concept of parental presence/absence as a behavior management technique, and describe to them how their presence or absence in different situations might help or hinder the clinical encounter.
- Develop safety guidance and rules for the presence of parents in the operatory, and communicate this guidance to parents prior to initiating care or treatment of the pediatric patient. Safety guidance should take into account the physical location of parents in the room, X-ray exposure, use of technology, the presence of other children, and more.
- Have an agreement in place with parents about when they might need to leave the operatory (e.g., if the patient is being disruptive or uncooperative). Make sure the agreement is in place before the clinical encounter begins. Pediatric patients also should be aware of this agreement.
- Carefully consider each patient and the clinical encounter when making decisions related to parental presence/absence. Even children who are the same age might have vastly different emotional needs, coping skills, and behavioral conditions.
- Conduct a thorough informed consent process with each patient/parent prior to commencing treatment. As part of that process, describe in plain language the patient's diagnosis, the proposed treatment (as well as alternatives), and expected outcomes. Make sure to allow ample time for questions. A thorough consent process can help identify areas of concern, address issues that may become distractions during the procedure, and put parents and patients at ease.
- Educate parents about other behavioral management techniques that dental professionals might use in addition to, or instead of, parental presence/absence. Describe how these methods might benefit the patient and improve the clinical encounter, and consider showing parents a video that demonstrates how these techniques work.

Remain flexible during clinical encounters and ready to adapt if the circumstances require it.
Make sure that both patients and parents know that acting in the best interests of the patient's safety is always your top priority.²

For more information on parental presence/absence and other behavioral considerations in pediatric dentistry, see the American Academy of Pediatric Dentistry's *Behavior Guidance for the Pediatric Dental Patient*.

Endnotes

This document does not constitute legal or medical advice and should not be construed as rules or establishing a standard of care. Because the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney or other professional advisors if you have any questions related to your legal or medical obligations or rights, state or federal laws, contract interpretation, or other legal questions.

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¹ Riba, H., Al-Shahrani, A., Al-Ghutaimel, H., Al-Otaibi, A., & Al-Kahtani, S. (2018). Parental presence/absence in the dental operatory as a behavior management technique: A review and modified view. *The Journal of Contemporary Dental Practice*, *19*(2), 237–241. Retrieved from https://pubmed.ncbi.nlm.nih.gov/29422477/

² Litch, C. S. (2006). Risk management issues for parental presence/absence. *Pediatric Dentistry Today*. Retrieved from www.aapd.org/assets/1/7/2939.pdf; Riba, et al., Parental presence/absence in the dental operatory as a behavior management technique: A review and modified view; American Academy of Pediatric Dentistry. (2022). Behavior guidance for the pediatric dental patient. In *The Reference Manual of Pediatric Dentistry* (321-339). Chicago, Illinois: American Academy of Pediatric Dentistry.