

*Continued from page 10*

to ensure compliance by the patient. But it is good practice and certainly a moral imperative for the specialist to follow up and, as we have already seen with the issue of informed consent, the process is a dynamic one and future demands are changing as new case law evolves.

If the appointment is critical (infection, life threatening, timing etc.) to their care and for some reason the mail or your method of delivery of the letter is deficient then a telephone call is just good practice sense. The attempt at appointment protocol should be documented and also efforts to rebook after the missed appointment should be made and also documented.

*What type of follow up to the initial consultation is required to make each practitioner bullet proof? Are we our brother's keeper?*

If the question is directed at the informed consent issue then the courts approach each situation on their individual facts. What did this patient reasonably understand as a result of the dentist explaining the proposed treatment, its risks, the benefits, the cost etc?

If the question is following up on the attempt to reach a patient when they do not show up for a critical care appointment then the test reverts to what a reasonable dentist would have done in similar circumstances.

*Is the onus on the referring dentist to explain the need for a specialty referral and then is a referral letter/ telephone call required along with a copy to the patient?*

The onus is on the dentist who is considered the patient's general dentist to provide the patient with enough material information to make an informed decision

(informed consent) to go ahead with referral. The patient should be provided with enough material information from the general dentist to be able to decide if he/she wishes to proceed with specialty referral. The referring dentist may attempt to explain the material information associated with the proposed specialty treatment to the patient but is not required to. I think he or she would be wise to leave it to the treating dentist in your example a specialist, to avoid any contradictions, misunderstandings or mistakes.

*On the day of consultation, the quality of x-rays are checked, duplicates are usually of such poor quality that originals are requested right from the get go. If I insist on new x-rays do I need the consent of the dentist who supplied the originals?*

The re-ordering of x-rays or obtaining x-rays that show you clearly what you need to see to determine what if anything is necessary and to properly explain the proposed treatment to the patient is between you and your patient. You do not need the consent of the referring dentist. You may wish, as a courtesy only, to give the referring dentist a heads-up call that you decided to order new x-rays before you started the treatment.

The patient is paying for the new x-ray. If the quality of care is materially affected by the poor x-ray then you the treating dentist have no choice. Either the patient consents to the new x-ray or you decide not to proceed as you do not know what you are getting into without the proper equipment/information (the x-ray) to perform the work. The referring dentist and the patient can be told that the x-ray did not show enough and you re-x-rayed to be careful.

*If I insist on new x-rays the patient may report the referring DDS?*

That may be so; I think this is very unlikely as you are the specialist and the patient expects you to be thorough in your review. The law requires, on a general basis that experts/specialists in most circumstances perform at a higher standard than generalists. Without hopefully sounding too unsympathetic but simply to make the point; better him/her than you. The x-ray could prove to be your defense in this circumstance and all the more reason to be careful before proceeding. The written consent to obtain the x-ray and the reordered x-ray itself adds to your ability to prove that you fully explained the material information associated with the contemplated procedure to the patient and the patient understood the need for the treatment and the risks of proceeding and gave "informed consent" to proceed with it.

*The Get Acquainted Questionnaire is standard but within that document I want to know if the patient has ever used any illegal drugs and if they are involved in therapy (psychiatric or otherwise). Do these questions place the patient or the dentist at risk in any future investigation?*

This is a different area of the law, not related to informed consent; essentially criminal law or civil insurance actions focused on the misbehavior of your patient, not you, the dentist. The answer to your question is yes. A defense insurance company's lawyer or even less likely the Crown may subpoena you to determine if your file discloses anything that may be of use to them in defending a civil claim brought by your patient in another context or prosecuting your patient in a criminal proceeding in some fashion. This question relates to a patient's rights to privacy and the dentist's duty to maintain the duty of confidence between himself or herself and the patient. It is wise to seek