

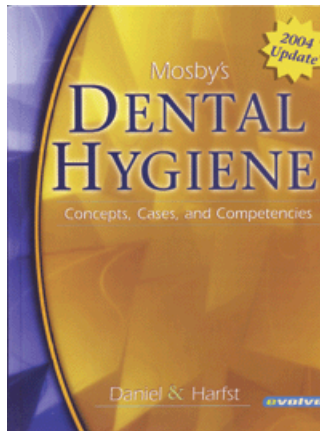
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Review of: Mosby's Dental Hygiene 2004: Concepts, Cases, and Competencies

Mary Danusis Cooper

Reviewed by Mary Danusis Cooper, LDH, MSED, professor in the dental hygiene program at Indiana University Purdue-University in Fort Wayne, Indiana.

Daniel SJ, Harfst SA



Mosby, St. Louis, Missouri, 2004

896 pages, illustrated, indexed, hardcover

ISBN: 0-323-03062-9

\$71.95

This textbook and CD-ROM not only address topics taught in fundamental clinical practice to dental hygiene students, but they also go beyond the basics to cover a broad range of services and techniques provided by the dental hygienist. The text is divided into parts with the corresponding CD-ROM content referred to as sections. Each of the 11 parts lists the American Dental Education Association (ADEA) competencies for entry into the dental hygiene profession-information which is valuable for educators who must include these competencies in teaching. All the competencies are listed in an appendix as well. Additionally, there are 49 chapters that include several features. Each chapter begins with an outline of the content that will be presented, followed by key terms, learning outcomes, and a case study.

CD-ROM icons are also identified throughout the chapter. When noted, the student can access this tool to the supporting interactive exercises and video segments that complement the material being presented. At the conclusion of each chapter, there are critical thinking activities, review questions, suggested agencies and Web Sites, and references. At the end of the text, there is a glossary and answers with rationale to the review questions that were presented in each chapter.

Educators often evaluate materials from a different perspective: How is the material presented? Is the material up to date? And, is the material presented so that students understand and gain the knowledge required to not only pass the dental hygiene National Board Examination, but to also continue in clinical practice after graduation? Several chapters cover the material thoroughly and review all aspects of the topics. Especially outstanding are the chapters on infection control, ergonomics, and instrument sharpening. In addition, the material is enhanced by the use of color photographs, as well as detailed tables and illustrations. In this updated edition, appendices have been added to strengthen the material presented. Appendix topics include the Health Insurance Portability and Accountability Act (HIPPA), a caries risk assessment form, and glove types and indications, to name a few.

However, there are minor shortcomings. After teaching dental hygiene for several years, this reviewer was surprised to find hoes and chisels in the instrumentation and sharpening chapters. With the availability of many ergonomically effective hand-scaling and power-assisted instruments, these instruments are not as popular today. The porte polisher is another example of a device that is not used today because of the use of the engine-driven polisher and the popularity of the American Dental Hygienists' Association's (ADHA) position on selective polishing. For instructional purposes in a dental hygiene program, the instrumentation chapter would need to be supplemented with additional photographs on technique-the "how-to's." This chapter lacks laboratory application. In addition, although the seating positions are addressed in the chapter on ergonomics, the student will need to go outside the instrumentation chapter to access what is needed.

As dental health professionals, our emphasis is on educating the patient on disease prevention. One important area of emphasis is the use of fluorides for patients who have moderate to high risk for caries development. The fluoride chapter could offer more detail on fluoride delivery systems in the office, as well as self-applied topical products. Again, the "how-to's" could be emphasized more, so that the student can appropriately learn this information to educate the patient on not only the best product to use, but also on how to use the product most effectively. Overall, this textbook is a great learning tool for students and dental hygiene educators. In addition, this textbook would be a valuable reference for those in private practice.

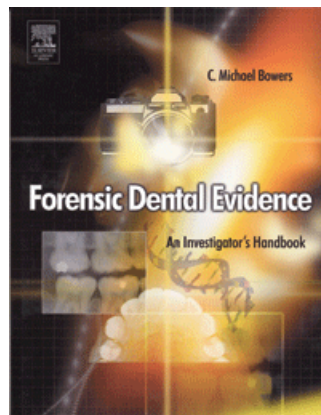
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Review of: Forensic Dental Evidence: An Investigator's Handbook

Ruth Fearing Tornwall

Reviewed by Ruth Fearing Tornwall, RDH, MS, dental hygiene instructor IV at Lamar Institute of Technology in Beaumont, Texas.

Bowers CM



Academic Press, San Diego, California, 2004

208 pages, photographs, indexed, hardcover

ISBN: 0-1212-1042-1

\$59.95

The purpose of this textbook, *Forensic Dental Evidence: An Investigator's Handbook*, is to provide a detailed overview of forensic dentistry as it is practiced today. The textbook is written primarily for law enforcement and legal professionals, but dental professionals who have an interest in this area will find the presentations of dental investigation methods and casework examples very interesting.

For a proper forensic evidence recovery, the professional must have basic knowledge of the five steps used in investigation: recovery (detection), documentation (recording), collection, preservation, and interpretation. The casework examples are used to explain the numerous ways in which a forensic dentist can interact with police investigations. Guidelines for the reconstruction of prior events are described in the text to ensure the successful recognition and capture of vital dental evidence in the actual forensic casework.

Types of dental evidence for recovery are described by the way they relate to questions asked by the investigators. For example, is there direct dental evidence supporting human identification? Is there associative evidence of a person's past presence or activities at a crime scene? Does evidence from one source corroborate evidence from another source?

Suggestions and guidelines are described to increase the certainty of successfully recognizing and capturing vital dental evidence in actual forensic casework.

Each chapter covers a specific area. Chapter 1 describes a qualified forensic dentist and advises readers to use a board-certified forensic dentist. The author then goes on to describe what dentists would do in this role and recommends that law enforcement and legal professionals develop a working relationship with them. Other information provided in this chapter includes the language of dental identification, human tooth morphology, teeth numbering systems, the dental investigator's role in forensic cases, and courtroom uses of dental evidence. Chapter 2 examines case studies of death and abuse investigations. The author details the investigative steps in dental identification: the preliminary examination and detailed search of the crime scene, the collection stage, the antemortem and postmortem dental profiling, and the comparison of the dental profiles. Chapter 3 describes the recognition, recovery, and analysis of bite mark evidence. The author describes the protocols for evidence collection, including photographic documentation and the impression process. This chapter also includes information on the recovery of salivary DNA from bitten objects and skin. Chapter 4 looks at how to blend evidence from multiple expert opinions on DNA and bite marks.

Chapter 5 examines the physical characteristics of child, elder, and spousal abuse and neglect, emphasizing the dental aspects of the investigation. As dental hygienists in most states are legally mandated, as well as ethically charged, to report cases of suspected abuse to the appropriate authorities, this chapter provides for them a useful comprehensive review of dental evidence of abuse and neglect. The chapter also provides a glossary of abuse investigation terms.

Chapter 6 discusses the dental forensic framework surrounding mass fatality incidents. Chapter 7 outlines the methods used in digital imaging in human identification and gives the reader an overview on this subject. Chapter 8 discusses legal issues in the introduction of evidence and the description of findings to the court on forensic odontology. Chapter 9 describes the use of photography, which is commonly the only means by which a forensic dentist can evaluate bite marks and abuse cases. The chapter focuses on proper documentation of dental evidence and problems to avoid.

Overall, this book provides the reader with the concepts and protocols vital to a successful outcome of a criminal investigation containing dental evidence. The author suggests that these methods need to be practiced and the protocols maintained in order to be available and successful under the actual casework conditions.

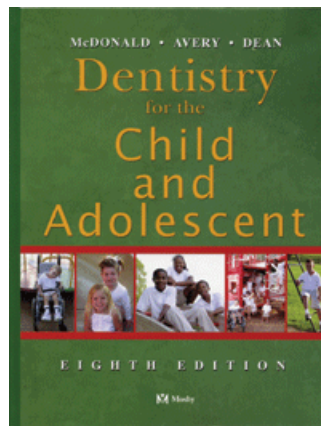
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Review of: Dentistry for the Child and Adolescent

Christine Nathe

Reviewed by Christine Nathe, RDH, MS, associate professor and graduate program director, Division of Dental Hygiene, at the University of New Mexico in Albuquerque.

McDonald R, Avery D, Dean J



Mosby, 8th Edition St. Louis, Missouri, 2004

769 pages, illustrated, indexed, hardcover

ISBN: 0-323-02450-5

\$79.95

Dentistry for the Child and Adolescent is written for dental students, post-doctoral pediatric dental students, and dentists interested in current information on pediatric dentistry. The book presents current diagnostic and treatment philosophies in pediatric dentistry that are based on published research, other literature, and clinical experience.

The authors state that all contributors to the text expressed a coordinated philosophy of the most modern concepts of dentistry for children and adolescents. A by-product of that collaboration is evidenced by the extremely well-flowing nature of the book. The photographs, illustrations, tables, and figures are superb and enhance the reading material and concept apprehension. Keeping a student's interest is paramount in a textbook, and the easy-to-read materials with integrated visuals serve this objective well.

Topics discussed include a brief overview of examination procedures, child abuse and neglect, anatomy, physiology, dental diseases, and pathologies seen in the pediatric population. Coverage of preventive modalities, dental materials, and pharmacological considerations relevant to pediatrics is presented. Moreover, the authors discuss all dental specialties as

they relate to pediatrics and hospital dentistry, including special care populations. A brief overview of dental public health is also included.

One missing link is a chapter on the role of dental hygienists in pediatric dentistry settings. Unfortunately, in many states, dental hygienists are frequently not employed in pediatric settings. Rather, a somewhat superficial version of preventive care is provided by dental assistants as a substitute for dental hygiene care. By expanding the textbook to include roles for dental hygienists, more potential pediatric dentists could be informed about the value of a dental hygienist, both in assessment and therapeutic roles and, importantly, in the education and management of patients. This information would help increase the level of preventive dental hygiene science practiced in a population that could be influenced by this well-educated practitioner. The dental hygienist would have the opportunity to provide a lifelong influence on the value placed on preventive oral health care.

Interestingly, in the chapter on patient management-a section detailing production and fee collection philosophies-the authors state that dental hygiene production usually includes the oral examination. And, although there is mention that some case can be made for the dentist to be compensated on percentages of the examination, more typically these are considered dental hygiene production. Understandably, as a dental hygienist, this seems extremely logical to me.

This comprehensive book on pediatric dentistry is well written and fun to read. This textbook was obviously written for dental students, but it is recommended as an additional resource to faculty who teach pediatric dental hygiene. Moreover, it could be recommended as supplemental reading for dental hygiene students and as a reference for dental hygiene providers practicing in a pediatric setting.

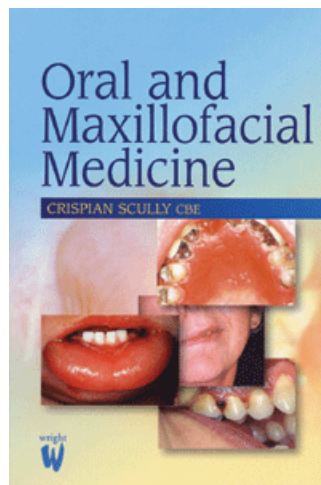
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Review of: Oral and Maxillofacial Medicine

Sandra L Boucher-Bessent

Reviewed by Sandra L. Boucher-Bessent, RDH, BS, public health dental hygienist and dental program manager at Cabarrus Health Alliance in Kannapolis, North Carolina, and adjunct faculty, Department of Dental Ecology, at the University of North Carolina in Chapel Hill.

Scully C



Wright Publishing Co., 2004

556 pages, illustrated, indexed, paperback

ISBN: 0-723-61074-6

\$64.95

Oral and Maxillofacial Medicine provides comprehensive coverage of diseases relevant to oral and peri-oral structures, including detailed oral manifestations of systemic diseases. Senior dental and dental hygiene students, as well as surgery, pathology, and other trainees and practitioners of oral medicine, will find author Crispian Scully's book a valuable resource for both board review and practical application.

Scully provides basic information so that non-medical and non-dental readers may also use the book with ease. Scully explains in his introduction that the book highlights more frequent and serious conditions and guides the reader through didactic and problem-oriented approaches. This book should be considered an adjunct to a student or professional oral medicine library, and not the primary resource for oral pathology subject matter. The author makes references to and directs the reader to several other texts he has authored or other pharmacopoeias.

The content is divided into five sections, each of which is arranged in an easy-to-follow format. The first section is a review of the fundamental principles of a comprehensive and thorough medical history and examination. The first two chapters are so basic that a reader with a non-dental or non-medical background could easily grasp the material. For example, whenever Scully uses medical terminology, he follows the word with an explanation or description of the word in parentheses. Subsequent chapters in Section I become more detailed and provide information and guidelines for investigative protocol and principles of management to assist the practitioner to confirm or rule out diagnoses and prognoses. Each chapter in Section I begins with a thought-provoking, patient-centered quote that captures the essence of Scully's message. Scully reinforces the appropriateness of the phrases by using them in context throughout the book.

Each section is color-coded for easy access. Just as chapters in Section I begin with quotes, chapters in Section II begin with a bulleted list of "Key Points." This format facilitates the reader's navigation through the "Common Complaints" section, which discusses the more common symptoms and signs found in oral medicine. Discussion of each condition is presented in an outline format that introduces the disease and discusses its causes, clinical features, oral complications, diagnosis, management, and references for further reading. Scully provides color plates for many of the oral conditions throughout this chapter and the next. He also organizes written material in table form for easier comprehension and referral. Scully uses algorithmic charts for the diagnostician to use when assessing symptoms and determining definitive diagnoses. Scully provides many examples of patient information sheets that help the patient understand the diagnostician's explanations, as well as Web sites specific to many of the conditions.

Section III describes in detail the most common and important conditions seen in oral medicine. This section also approaches each condition in outline form, including a brief description of the disease; incidence; one's predisposition by age, sex, and geographic location; etiology and pathogenesis; clinical features; and diagnosis and management. Section IV includes a very comprehensive, alphabetical list of other conditions relevant to oral medicine. It includes some color plates and a brief synopsis of each condition. For some conditions, the author includes information on the treatment and management of the illness, while oral implications and manifestations may be described for others. Section V is a discussion of important aspects of HIV infection and iatrogenic diseases and is similar in format to the previous three chapters.

Finally, Scully provides two appendices. Appendix 1 tabulates other relevant oral manifestations of systemic disorders. It includes several tables that specifically detail oral conditions associated with human body systems and that will benefit clinicians and diagnosticians. Appendix 2 outlines the medicines used to treat patients with oral diseases.

The book does not contain biographic information on the author, but does list his impressive credentials and affiliations on the title page, from which the reader may deduce that the author is located in England. The reader should bear this fact in mind when encountering words that are spelled differently than those found in American texts. Examples of spelling differences are "foetus" for fetus, "anaemia" for anemia, "minimise" for minimize, and "enquire" for inquire. The different spelling of well-known words can be distracting to the reader at first, but after mentally processing the various spelling changes, the reader will eventually begin to not notice them.