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Each month we highlight a recent publication, recent study results, or other important information from the nation's network.

The National Dental PBRN is now enrolling practitioners

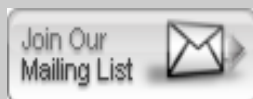
The National Dental PBRN is now enrolling practitioners. You can enroll online by clicking [here](#), and following directions from there. You need to have a functioning email address to enroll. If you previously participated in another network such as the DentalPBRN, PEARL or PRECEDENT, you will need to re-enroll due to revised enrollment questions, the need to update information, and the opportunity to submit ideas for research studies. For more information on the nation's network, click [here](#).

National Dental PBRN Article of the Month

Differences in restoration decision-making: findings from The National Dental PBRN

The May 7th 2012 issue of Dr. Bicuspid features an article on the scientific poster presented by Dr. Tim Heaven, practitioner-investigator from Birmingham, AL at the annual American Association for Dental Research meeting in Tampa, FL in March 2012.

Dr. Heaven and his colleagues set out to describe and quantify decision-making among practitioners for primary caries and existing restorations. Another goal was to estimate concordance between the restorative thresholds for primary and proximal caries and existing restorations. To do so, hypothetical clinical scenarios were sent to 961 network dentists in Alabama, Mississippi, Georgia, Florida, Minnesota, and Oregon; a total of 565 participated in the study.



Those surveyed were presented with five separate low- and high-risk patient scenarios:

- The restoration of primary occlusal caries
- The restoration of primary proximal caries
- Three scenarios requiring the repair or complete replacement of existing restorations

They then quantified the probability that dentists who recommended restorative intervention for primary caries (occlusal and proximal) at deeper lesion depths were the same ones who recommended that existing restorations be repaired instead of replaced entirely. The authors found that if the practitioner was willing to wait longer before they placed an initial restoration in the tooth, they also tended to repair more restorations. Also, those who treated primary caries earlier tended to replace more restorations entirely.

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