Quick Poll Results on Dental Ethics at Chairside

The March 2019 Quick Poll surveyed perspectives on professional ethics in dentistry, uses, and observations in dental practice settings through the lens of *Dental Ethics at Chairside* - a philosophical text that offers idea tools aimed at teaching and learning professional obligations and how they are practiced.

The majority of the 451 Quick Poll respondents—almost 80%, never encountered Dental Ethics at Chairside. About 20% were at least familiar with "Dentistry's Central Practice Values;" about 3% used the book's presentation of central practice values and its other conceptual tools. About 25% never considered ethics as having "tools" or found them difficult to use.

Almost 80% felt that ethics can be taught or taught in ways additional to what is learned at home. A bit more than 11% believed the best place to teach professional ethics was in Dental Schools. About 68% believed professional ethics is a life-long habit; about 17% thought it could be done on their own, where as about 50-60 % indicated that it requires collaboration with other dentists and some systematic assessment process.

Less than 5% believed that evidence-based reasoning and learning were enough to learn everything needed to make good ethical decisions. About 92% believed that ethical reasoning was also needed to make good ethical decisions. In addition, however, about 15% believed ethical reasoning could be both a burden and/or a benefit in good decision making. Strikingly, 61% of those who believed that professional ethics conceptual tools added value to evidence-based ethics saw no need to put more emphasis on educating dentists in professional ethics.

Regarding the notion of professional ethics and professional ethics conceptual tools, 21% never considered ethics as a discipline having tools, 5% found what they understood to be ethical tools difficult to understand and use, 38% either considered or used the ADA or ACD Codes as ethical tools - also indicating they were not aware of other professional ethics tool explored, articulated, and/or assessed outside of these two dental organizations. About 30% indicated they learned about ethical thinking tools in school and use them, but did not use the tools offered by the ADA, ACD, or Dental Ethics at Chairside. About 5% said they were very familiar with and used the reasoning tools presented in either of the first two editions of Dental Ethics a Chairside.

Regarding Professional Ethics programs as Continuing Education, 79% of the respondents never encountered *Dental Ethics at Chairside* in either its first, second, or third edition and indicated they knew nothing about dentistry's central practice values as presented in this text (regarded by its reviewers to be a "gold standard" in professional dental ethics education within dental schools and

dental ethics continuing education courses); 3% used the first two edition's presentations of Dentistry's central

practice values and the methods/practices needed to conscientiously improve their use as tools in professional decision making beyond their already natural role and uses amongst practitioners and within the profession. None of the respondents were aware of or indicated that they explored the third edition.

About 10% (53 of the 451 respondents) offered extensive comments about professional ethics or the role of polls in understanding and/or teaching ethics. The majority of those comments expressed concerns, or offered observations/evidence that professional ethics and professional ethics education were undervalued and/or use in ways that will help the dental profession or oral health move into the future.

Further discussion of the role of mental health in a dental practice setting was generally supported by respondents.