

Medical emergencies

NEWS2: potential pitfalls

Sir, we read with great interest the recent article by Jevon and Shamsi regarding the use of National Early Warning Score (NEWS) 2 in the dental practice.¹ From our combined experiences of working within hospital medicine and general dentistry we write with great perturbation that NEWS2 might open a Pandora's box of cognitive shortcuts, confusion and increasing medico-legal claims against dentists.

Whilst we recognise and agree with the article that the use of NEWS2 in the community can be a useful tool in communicating with emergency services and potentially help to improve triage, the potential problems and risks associated with this are paramount and should not be ignored. The authors highlight that the NEWS2 can improve the objective assessment of patients with suspected sepsis, asthma attack and anaphylaxis. However, it does not consider how commonly these issues are encountered in a primary dental care setting. A general dental practitioner will on average experience a medical emergency at least once every two years, the most common medical emergency being vasovagal syncope.^{1,2,3} There is no mention of how the NEWS2 score may be applied in such a scenario. Rather, in such a scenario and for more fatal emergencies such as a cardiac arrest, it is imperative that practitioners apply the Resus Council Life support algorithm.⁴ In contrast, implementation of a NEWS2 score may confuse practitioners about whether they should calculate a NEWS2 score or start resuscitation, with the latter being critical.

The authors comment that a completed NEWS2 observation form is an excellent documentation record, providing the dental team with justification for their actions. However, it may also create a culture of fear of 'failure to act'. In a hospital setting NEWS2 has a pre-specified response, however, this may be difficult to replicate in a primary dental care setting. Therefore, failure to take appropriate action may be grounds for a negligence claim. Furthermore, the evidence provided regarding benefits of NEWS2 is limited to GP practices where medically-trained professionals are available to interpret this score alongside clinical experience and judgement. This is most certainly absent within a dental practice.

The issue of NEWS2 scores in primary care is complex and ongoing, and it is likely to continue throughout our medical and dental careers. Whilst we acknowledge the benefit in communication and urgency of transfer, NEWS2 is best used as an adjunct to clinical judgement with its sole use being limited by the posed associated risks.

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Dental education

Personality traits and learning

Sir, we write in response to a recent paper on understanding the personality traits of dental students and creating a supportive student culture.¹ We totally agree that certain personality traits tend to correlate with academic and clinical success through the various stages of educational experience of a student in a professional programme. Moreover, we would like to further highlight how certain personality traits affect the learning of an individual.

Personality traits can be articulated through different learning styles (auditory, visual, read/write, kinaesthetic) which facilitate a student for better understanding and learning, aiming to achieve the desirable learning outcomes or goals. Conscientiousness is also associated with work discipline, generating interest in the subject, attentiveness and considering studying as relatively easy.² Students using the planned approach are good at work organisation, time management and believe in putting hard work in their studies as they have already set clear goals. Openness is linked to critical thinking, analysing problems, a logistical approach and correlating along with building on their existing knowledge. Students with this trait are self-motivated, focussed on their self-development and they look for personal comprehension independent of the programme syllabus.³

Neuroticism is associated with a lack of attentiveness, anxiety of failure and experiencing studying as always stressful. It can be linked to the surface learning style which focusses on mugging-up and memorising content without any understanding as the main concern is to only pass the examination.^{3,4} Hence, personality traits play a major role in the overall development and academic performance of a professional student.

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Open-book exam support

Sir, the recent article on open-book exams reminded me of when I was a dental student at New York University College of Dentistry (1967 to 1971).¹ It was not an option then but with hindsight after almost 50 years of clinical dentistry I wish it could have been as it would have greatly lowered stress levels and improved my learning experience. The authors reported that students disagreed with open-book exams for several reasons such as 'did not feel there were any rewards' and 'concern on their preparedness in subsequent years' but I have found after all my years as a clinical dentist that these are not valid.

My experience has been that regular use of information is a better teacher than memory, which can be flawed. The exponential growth of data and research assures that whatever was learned in dental school will be obsolete within a short time after graduation, which is the reason for mandated life-long learning. In addition, online computer resources for facts, technical data, and clinical technique demos are available to all dentists with the click of a button. Therefore, the focus of dental school education should be on teaching students to think and analyse, not memorise, and create a comfortable atmosphere to use information from any reputable source with repetition the essential ingredient.