

Perception of Second BDS Students about Early Clinical Exposure in Prosthetic Dentistry

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I. Introduction

William Osler was quoted in 1925 as saying: "We expect too much of the student and we try to teach him too much. Give him good methods and a proper point of view, and all other things will be added, as his experience grows." A major teaching and learning objective of the preclinical curriculum in complete denture removable prosthodontics is to introduce students to the fundamental laboratory and clinical steps involved in the fabrication and delivery of complete dentures. The subject of Preclinical Prosthodontics is traditionally taught during the second year of dental education, with a major emphasis on the laboratory component¹⁻⁴. This laboratory emphasis is one of the major deficiencies of this model⁵. Students spend a majority of their time in the laboratory, with minimal or no patient contact. Teaching dental students clinical procedures in the laboratory setting requires that students gain an abstract understanding of the process of denture fabrication, rather than creating a process that involves alternating sequences of clinical and laboratory procedures found in clinical practice. If the primary objective of the preclinical curriculum is to provide dental students with the knowledge and skills to successfully initiate patient care, the traditional curriculum in removable complete denture prosthodontics falls short of adequately preparing students for this transition in their education⁷. The lecture format is still the most widely used didactic educational method for the transfer of knowledge. Without purposeful planning, lectures tend to be passive experiences from student's point of view and have questionable learning outcomes. These shortcomings of the traditional curriculum have been previously identified in reports from the Institute of Medicine and the American College of Prosthodontists⁵.

Dental students enter dental school eager to help people and treat patients; however, patient care is usually delayed until the third year. Clinical preceptors often note that, by the third year, the eagerness to treat patients is replaced by loss of interest.

This article presents the description of a study conducted on under graduate students in Department of Prosthodontics in order to evaluate the impact and perception of Early clinical exposure (ECE) on second BDS students in Department of Prosthodontics, SPDC, Sawangi (Meghe), Wardha for a period of 6 months.

II. Method

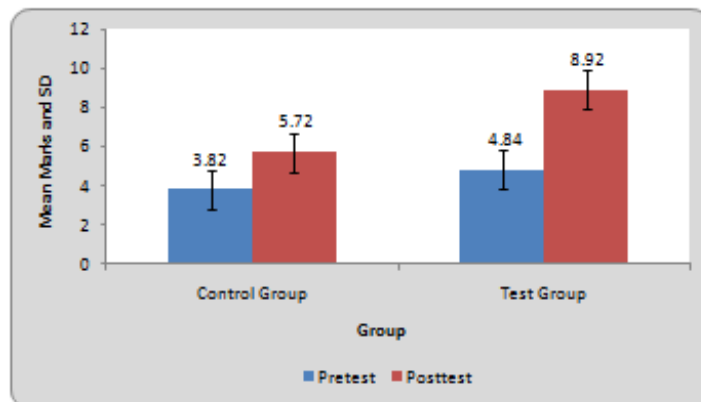
This pilot study was used to explore the impact and reflections of dental students about early didactic and clinical experience. The purpose statement of the study was:

1. To evaluate the impact of ECE
2. To know what the students reflect about their first clinical experience. This study was carried out on 50 students of second year B.D.S regarding their perception on different types of teaching programs.

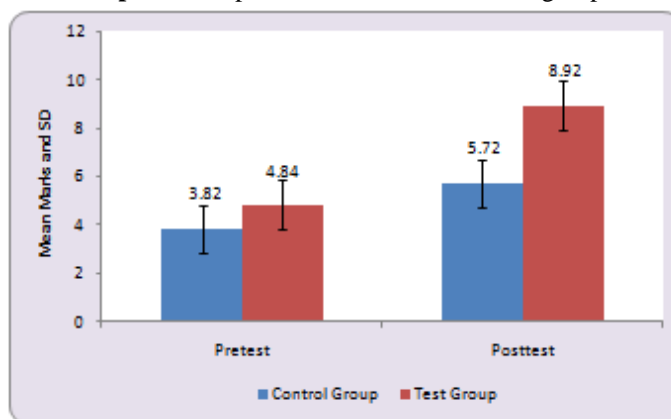
In this study students were divided into two groups. Group A consisted of students exposed to conventional style of teaching and group B consisted of students exposed to ECE. Pretest was conducted for both the groups. The students were then exposed to conventional style of teaching and then post test was conducted. In Group B student were provided patient exposure on clinical steps in prosthetic dentistry, demonstration of clinical step on the patients were given to the students in order to incorporate better understanding of the same. Again feedback was taken from them in the form of post test and then conclusion was drawn from this feedback about the effect of patient exposure on the understanding of the students about the clinical step.

III. Results

Graph 1: Comparison of marks in both the groups at pre and post test



Graph 2: Comparison of marks in both the groups

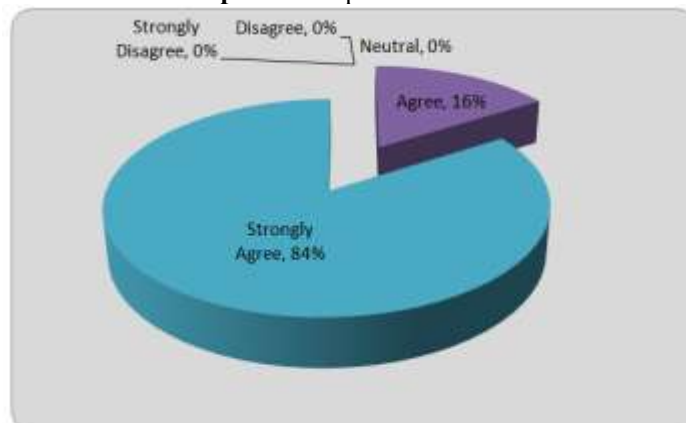


The graph shows the increase in the student's perception of the subject when the steps are being demonstrated to them clinically. The feedback which was obtained from the students in the form of post test showed that the students were strongly in favour of such type of teaching programme.

Table 1: Perception of students

Perception	No of students	Percentage(%)
Strongly Disagree	0	0
Disagree	0	0
Neutral	0	0
Agree	8	16
Strongly Agree	42	84
Total	50	100

Graph 3: Perception of students



IV. Discussion

The traditional pre-patient complete denture curriculum plays major emphasis on laboratory techniques, with minimal or no exposure or relation to patient care. Due to time constraints in most dental curricula, even the teaching of clinical procedures has often been reduced to student observations rather than direct involvement.

Teaching removable prosthodontics with the complex interaction of the laboratory and clinical phases requires careful balance¹³. Focusing these early student experiences entirely on one of the two components of the process (i.e., the laboratory) can easily translate into ignoring important roles of the diagnostic process and patient-clinician relationship¹⁴. The students apply the newly acquired clinical and laboratory concepts promptly and without the need to memorize the procedures in abstract form.¹³ Entering the clinical environment early is also overwhelmingly favored by dental students, as expressed .similarly, it has been reported that dental school graduates rank early clinical exposure as the factor most important in preparing them for clinical practice¹⁵⁻¹⁷. In this study when pretest and post test results were compared early clinical exposure showed better results than conventional teaching. The questioner prepared gave a reflection of better understanding of this step by the students. This was because they were able to correlate the findings they had read in books and didactic lectures with the patient, better when ECE was conducted. The student's perceptions which was recorded as 8 point Likerts scale also shows strong agreement to learning by this method. The questionnaire also comprised of two open ended questions which provided an insight to the reflections of the students about ECE. The students commented that this method was immensely helpful for them as they could retain the knowledge better as compared to only didactic lectures

Some students also commented that they felt a greater sense of satisfaction while treating patients rather than doing it on the cast. This also lead to boost up of confidence in the students leading to increase in post test scores.

V. Conclusion

ECE leads to highlight clinical relevance and have a positive effect on the student with respect to quality of learning environment itself. In addition it also places a sense of responsibility on the student for patient care. This also helps seamless transition from pre-patient to clinical exposure. In our institution a clinically based ECE curriculum in complete denture has recently replaced some part of traditionally taught laboratory based course.

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