

Testimony **HB 5616** ADHP

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Senator Musto, Representative Tercyak and Members of the Human Services Committee,

I am writing this personal testimony in response to the need of the proposed Advanced Dental Hygiene Practitioner.

I have been a practicing hygienist in private practice for twelve years. There is much that I have seen in many years but until I took on a job in the public health sector, I realized that the dental conditions I have seen, especially in children, was by far just the tip of the iceberg.

In November I began a part time position as a mobile dental hygienist in a local school system. The independent company I work for provides the equipment and supplies necessary to perform my job. Currently my job consists of hygiene screenings, prophylaxis, fluoride treatments and sealants when necessary. In the four short months I have been treating children aged three to seventeen, I have seen the most unfortunate (and preventable) cases of rampant decay, severe gingivitis, initial periodontal disease, tenacious calculus and draining abscesses.

I feel from my perspective that the ADHP would be unbelievably beneficial, at least to this age group, based on the fact that our presence is already in the school system and we see these dental problems right off the bat. We can't always be sure that the child's caregiver will have the time or the necessary transportation to get them to the dental clinic. Couple that with the fact that there are so many individuals seeking out the help of our company's dental services, the schedules are so full that it may take weeks before an appointment can even be scheduled. With dental hygienists serving in the capacity of an ADHP, certain dental anomalies can be remedied within a day or two.

Look at it this way, does it make sense that a child can walk into my room and tell me they have a loose tooth that hurts and have me do something about it, but in reality, under our current licensure, the school janitor is more qualified to pull the tooth out because it's considered a "simple extraction?" That has happened many times over the few months and sometimes they presented with an abscess because of newly emerging secondary teeth that were hampered by the deciduous tooth unwilling to exfoliate.

Now is the time to get on board with the ADHP and seriously look at how we are delivering care to an entire community that is completely underserved. Private practice certainly has its place, but the ADHP can help out in a way that the private sector does not seem to want to participate in whole-heartedly.

Thank you,

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