

Odontology Section – 2003

F14 Dental Task Force Revisited

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After attending this presentation, the odontologist will know the importance of uniformity in preparing antemortem dental records to minimize errors, have examples of common chart interpretation challenges and how to manage them, have examples of WIN-ID code use and how to standardize them, and understand the need for adequate training and preparation of examiners and team leaders to minimize identification delays.

In 1988, Dr. Curtis Dailey presented guidelines for a dental task force. The recommendations are even more valid today with larger incidents and multiple responders. The dental task force saw its largest expression in the dental response to the WTC disaster. During the processing, the use of the WIN-ID program was key to the identification process. With a large number of people of varied experience processing records, the need for standardization of interpretation and coding of the antemortem dental data was very clear. The following ideas and examples will aid teams in minimizing errors that will affect the identification process.

Errors have been analyzed by various authors and can be simplified into two general classifications, those that will affect WIN-ID ranking and those that will not. Errors using primary codes are likely to produce a "mismatch" error that will alter a records ranking. Errors in secondary code characteristics will not affect the computer ranking by can delay identification efforts. Understanding these errors and their effects will aid the WIN-ID user during comparisons.

Developing guidelines for interpretation and coding of any dental characteristic likely to be encountered in antemortem record analysis can reduce errors. Interpretation of such characteristics as third molar status, interpretation of post extraction drift of teeth, antemortem X-Ray charting, and notation of caries should be decided before antemortem record analysis starts. Guidelines will include form preparation, notations used, chartings, and coding of any given dental characteristic.

Another area for pre-determination is the use of the WIN-ID "Comments" section. Such conditions as implants, sealants, orthodontic appliances, etc., can be noted and used as discriminators in the "FILTER" mode. To be of value, the comments should be standard. The most current WIN-ID version has a default menu for many of these characteristics.

Training modules should be developed to standardize examiners. The module offers the examiner an opportunity to use the guidelines and the team leader to promote compliance. Ideally the module will be completed before mobilization to an incident, but can also be used to integrate examiners on-site.

Examples have been provided in the presentation of ways to provide guidelines to ensure standardization in composite antemortem record preparation. Use of multiple examiners, sometimes from different teams and training backgrounds, requires standardization of record preparation. Printed guidelines for record interpretation and coding, linked to training modules, will provide a basis for uniformity of data that will maximize the potential of computer assisted comparison.

Mass Disaster, Computer, Antemortem Records