G19 Case Studies of Failure to Diagnose Oral Malignancies: What Is the Standard of Care for Diagnosing an Oral Malignancy?

John D. McDowell, DDS, University of CO, Dental Med, MS-F844, L 26, Rm 130, 13065 E 17th Avenue, Aurora, CO 80045*

After attending this presentation, attendees will be able to: (1) understand what is meant by standard of care for oral health care providers as they encounter suspicious oral lesions; (2) follow a diagnostic algorithm for diagnosing oral malignancies; and, (3) use the concepts of sensitivity and specificity for choosing tests to determine if a lesion is malignant.

This presentation will impact the forensic science community by illustrating the importance of practicing dentists' abilities to competently make decisions in the best interest of their patients when they encounter suspicious hard or soft tissue lesions of the jaws. Additionally, this presentation will assist forensic odontologists when they are called upon to develop opinions regarding standard-of-care issues.

When confronted with potentially confusing diagnostic dilemmas, the competent clinician should, when reasonable, not ignore the diagnostic imperative (the condition that the clinician cannot overlook or dismiss as not possible to the detriment of the patient). If a clinician ignores the diagnostic imperative then that clinician might be considered to have failed to meet the standard of care.

Procedures will be shown that assist in differentiating a possible malignancy from infections and/or inflammatory and reactive lesions. Attendees will also be able to understand the advantages of an early diagnosis over a late diagnosis and recognize benefits associated with the development of a treatment plan that is favorable to patient outcome.

After attending this presentation, attendees will be able to recognize many of the common and less common signs (including those found in radiographs and other imaging studies) and symptoms associated with oral malignancies (carcinomas, sarcomas, and possible combinations of the two). To reduce confusion that may occur when viewing suspicious lesions, different tests are often chosen to diagnose an oral lesion using the principles of sensitivity and specificity. Attendees will be able to understand that a biopsy has high utility and is most often the best way to develop definitive diagnoses leading to effective treatment plans to manage a diagnosed malignancy.

Attendees will further recognize that oral cancer is not common but is certainly not rare. The National Cancer Institute's Surveillance, Epidemiology and End Results Program (SEER) reports that 1.1% of men and women will be diagnosed with an oral cancer at one point during their lifetime. Diagnosis of oral cancers and survival rates following diagnosis have remained stable over the past 20 years in the United States. Increasing immigration from countries where oral/pharyngeal cancers are much more common is expected to increase the number of new cases seen by United States providers.

Several case studies utilizing patient histories, the analysis of physical examinations, and test results leading to a diagnosis of malignancy will be presented. Clinician failures to use a proven diagnostic algorithm resulted in malpractice claims against those clinicians who failed to meet the standard of care.

Attending this presentation will increase the likelihood that health care providers will be able to diagnose oral cancer at the earliest possible time, which will hopefully result in better patient outcomes.

Standard of Care, Diagnosis Utilizing Biopsies, Oral Malignancies