To some, the word “diagnosis” is taboo for hygienists to even consider using, let alone doing! Diagnosis is simply recognizing the signs and symptoms of disease, something all hygienists are required to do to take their licensing exam. Hygienists also must practice this in the clinical setting to provide care for patients. If a hygienist can’t tell the difference between health and disease, keeping a clinical position will be difficult.

Those who don’t want RDHs to “diagnose” must instead want a robot to simply “scale teeth.” Every dentist I’ve know wants the RDH employed in the practice to “actually have a brain,” to quote Dr. Michael Rethman. Providing dental hygiene care involves critical thinking to assess the health of each individual patient. A wide variety of information is gathered to determine health, disease and individual risk factors presented by each patient. With the identification of the dental hygiene diagnosis, the dental hygiene treatment plan can be devised and followed by the RDH. The dental hygiene diagnosis and treatment plan are part of the comprehensive dental diagnosis and treatment plan created by the dentist. Working as colleagues, the dentist and dental hygienist gather information necessary to accurately assess the health of each patient and provide the necessary treatment, prevention and maintenance care.

In this issue, Lori Frey presents the history of the periodontal probe and advice on effective technique. Information collected with the probe, plus the extra- and intra-oral examination and information gathered through interviewing the patient about eating habits, daily oral hygiene and medical history provides the basis for creating both the dental hygiene diagnosis and a dental hygiene treatment plan. These activities, including diagnosis, are all essential parts of the dental hygiene process of care. ■