This is a difficult determination for a pediatric dentist, as professional judgment along with ethical and legal obligations are involved. The American Academy of Pediatric Dentistry's definition of dental neglect is as follows:

“Dental caries, periodontal diseases, and other oral conditions, if left untreated, can lead to pain, infection, and loss of function. These undesirable outcomes can adversely affect learning, communication, nutrition, and other activities necessary for normal growth and development.

Dental neglect is willful failure of parent or guardian to seek and follow through with treatment necessary to ensure a level of oral health essential for adequate function and freedom from pain and infection.”

The “willful failure” phrase allows the pediatric dentist to distinguish between parents who have been informed of and understand the need for their child’s dental treatment, versus parents who simply didn’t know any better.

A dentist’s ethical and legal duty is described in the ADA code of ethics:

“3.E. ABUSE AND NEGLECT.

Dentists shall be obliged to become familiar with the signs of abuse and neglect and to report suspected cases to the proper authorities, consistent with state laws.

ADVISORY OPINION

3.E.1. REPORTING ABUSE AND NEGLECT

The public and the profession are best served by dentists who are familiar with identifying the signs of abuse and neglect and knowledgeable about the appropriate intervention resources for all populations.

A dentist’s ethical obligation to identify and report the signs of abuse and neglect is, at a minimum, to be consistent with a dentist’s legal obligation in the jurisdiction where the dentist practices. Dentists, therefore, are ethically obliged to identify and report suspected cases of abuse and neglect to the same extent as they are legally obliged to do so in the jurisdiction where they practice. Dentists have a concurrent ethical obligation to respect an adult patient’s right to self-determination and confidentiality and to promote the welfare of all patients. Care should be exercised to respect the wishes of an adult patient who asks that a suspected case of abuse and/or neglect not be reported, where such a report is not mandated by law. With the patient’s permission, other possible solutions may be sought.

Dentists should be aware that jurisdictional laws vary in their definitions of abuse and neglect, in their reporting requirements and the extent to which immunity is granted to good faith reporters. The variances may
raise potential legal and other risks that should be considered, while keeping in mind the duty to put the welfare of the patient first. Therefore a dentist's ethical obligation to identify and report suspected cases of abuse and neglect can vary from one jurisdiction to another.

Dentists are ethically obligated to keep current their knowledge of both identifying abuse and neglect and reporting it in the jurisdiction(s) where they practice."

The specific law in your state should be reviewed. For example, in Illinois:

- Dentists and dental hygienists have reporting obligations, if they have "reasonable cause to believe a child known to them in their professional or official capacity may be an abused child or a neglected child . . . "

- "Neglected child" means "any child who is not receiving the proper or necessary nourishment or medically indicated treatment including food or care not provided solely on the basis of the present or anticipated mental or physical impairment as determined by a physician acting alone or in consultation with other physicians or otherwise is not receiving the proper or necessary support or medical or other remedial care recognized under State law as necessary for a child's well-being, or other care necessary for his or her well-being, including adequate food, clothing and shelter;"

- A dentist or dental hygienist who willfully fails to report suspected child abuse or neglect shall be referred to the state Board of Dentistry.

- There is immunity from civil and criminal liability for any reporting person or institution acting in good faith.  

Putting aside cases of direct physical abuse, the issue of reporting neglect is a sensitive one since a pediatric dentist wishes to educate parents about effective oral health care for their children. He or she usually prefers the carrot versus stick approach (that is, wishing the parent to consent to treatment because it's in the child's best interest, not because failure to do so may lead to reporting to child services). Each case must be considered on its own merits based on the applicable law in your state, but clearly some cases will fall into the area of dental neglect. For example, earlier this year a pediatric dentist in Pennsylvania reported parents who had failed to get help for 14 abscessed teeth of their 6-year-old. The pediatric dentist was quoted in a local paper indicating it was the worst case of dental disease ever seen in the practice. The child was examined and scheduled for pulpotomies, but the parents failed to schedule a preoperative appointment. Caseworkers from the child services department were also able to determine that the child was never given the antibiotics as prescribed by the pediatric dentist. Both parents were charged with endangering the welfare of a child.

For further information contact Chief Operating Officer and General Counsel G. Scott Litch at (312) 337-2169, ext. 29, or slitch@napd.org.

1 See: http://www.napd.org/media/Policies_Guidelines/D_DentalNeglect.pdf
3 025 ILCS 5/ Abused and Neglected Child Reporting Act.
4 Note that Pennsylvania law specifically mentions dental care under this definition: "Serious physical neglect—A physical condition caused by the act or failure to act of a perpetrator which endangers the child's life or development or impairs the child's functioning and is the result of one of the following:
   (i)  Prolonged or repeated lack of supervision.
   (ii)  Failure to provide essentials of life, including adequate medical and dental care." PA Code § 3490.4 Definitions.