



CONAMED (National Commission on Medical Arbitration) and orthodontics

CONAMED y la práctica en ortodoncia

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The National Commission on Medical Arbitration (CONAMED for its syllables in Spanish) was created in June 1996 with the aim of helping to resolve disagreements that arise between patients and physicians or other health care providers both in the public sector as in the private. In the field of Dentistry, the largest number of complaints is submitted in the area of Prosthetics (fixed, removable and total), followed by Orthodontics, Endodontics, and Implantology, in that order. In comparison with public institutions, is in the private sector where the largest number of complaints is filed.

In the case of Orthodontics, the majority of the complaints filed in the CONAMED are related to failures of the clinician. On many occasions by an excess of confidence or familiarity with the patient, parents or guardians, the clinician does not register in the medical record all the indications, contraindications, consequences or complications that may result from orthodontic treatment; omitting also the signing of the informed consent. The foregoing is that when the patient files a complaint, there is no written and signed history that endorses prior knowledge of the difficulties or complications that may arise during or after treatment.

Complaints related to the fact that the dentist in general practice performs orthodontic treatments without having an Orthodontics Specialty professional title that endorses such a practice are very common. In many cases these people do not even have a degree in General Dentistry. On the other hand, another item where complaints are commonly filed is when orthodontic treatment is begun in spite of the existence periodontal problems that have not been treated, as well as when there are facial-skeletal problems that were not explained extensively to the patient so that when biomechanics make these problems more apparent, it causes disagreement.

The clinical record should be kept for five years, as legally required. There should be an odontogram

at the start of treatment and another at the end. It is necessary for the patient to sign the progress notes at each appointment in accordance to the performed treatment.

Recently, the Mexican Official Norm NOM-013-SSA2-2006 suffered a modification in relation to the informed consent, clarifying that it must be specify if the patient will be treated initially with orthopedics and subsequently with orthodontics, or only with orthodontics. Similarly, it must be specified in the clinical record if the patient was treated with some other area of specialty. It is strongly recommended to write a letter of informed consent for each treatment that is going to be performed.

The NOM-071-SCFI-2008 called «Business Practices-Medical Care with Direct Payment», where the Ministry of Economy intervenes, talks about the reimbursement conditions that it is recommended to discuss with the patient prior to initiating any treatment. These should clearly explain the amounts and conditions for reimbursement in the event of disagreement. Unfortunately few clinical charts include this concept.

When a patient files a complaint, the first contact is in the Direction of General Orientation. Subsequently a letter is sent to the general dentist or specialist, specifying that they must provide a copy of their professional identification, the clinical record with the medical report and a résumé. Afterwards, the professional is subpoenaed with the purpose of discussing the problem, if he or she accepts a date is set for a hearing that aims for reconciliation and when an agreement is not reached between the two parties, the complaint is taken to an arbitration agreement that

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may last from 6 to 12 months. Dentistry has a high percentage of conciliation, approximately 75%.

It is necessary to make awareness of the importance of having a complete clinical record with all the necessary diagnostic auxiliaries, informed consent forms signed by all the specialty areas involved

and treatment evolution records, without forgetting treatment costs.

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