



OMFS Residency and Silver-Linings Amidst the Darkness of a Pandemic

Jiean Joseph Heifetz-Li¹, Ross Miller¹, Allen F Fielding^{2*} and Samer Abdelsamie²

¹Resident, Department of Oral and Maxillofacial Surgery, Temple University Hospitals, Philadelphia, PA, USA

²Attending, Department of Oral and Maxillofacial Surgery, Temple University Hospitals, Philadelphia, PA, USA

***Corresponding Author:** Allen F Fielding, Attending, Department of Oral and Maxillofacial Surgery, Temple University Hospitals, Philadelphia, PA, USA.

DOI: 10.31080/ASDS.2020.04.0972

Received: October 29, 2020

Published: October 31, 2020

© All rights are reserved by **Allen F Fielding., et al.**

The COVID-19 pandemic has profoundly altered the inherent ways we conduct ourselves and interact. The way that human beings work and play has changed across the globe. The virus has ravaged economies and healthcare systems, leaving no aspect of patient care untouched. As oral and maxillofacial surgeons and residents, our unique position in the hospital setting puts us at the interface of dentistry and medicine, and as a result, we have witnessed this virus' devastating effects firsthand. While maintaining a positive outlook during this trying time is difficult, we have learned that there are silver linings in the darkness of a pandemic.

As the physical effects of COVID-19 become more fully understood as the weeks pass, so does a subsequent understanding of the intangible aspects of health that have been impacted by this virus. As healthcare providers, we have the fortune of being "essential." With unemployment rising, we still have the privilege of going to work every morning as we continue to treat patients. Even so, the economic pressures that the virus has created has impacted our practice by reducing the flow of elective surgeries and procedures.

In an effort to minimize exposure and maximize the use of personal protective equipment and availability of hospital staff in a time of scarcity, hospitals and clinics have cut back on elective cases at the direction of state and local health departments. This has forced us to develop creative ways to serve our patients in North Philadelphia. Inspired by our medical colleagues at Temple University Hospital, who have supplemented their outpatient clinics to telemedicine, we developed and implemented a teledentistry system that appropriately triaged our patients' dental concerns and

minimized the risk of exposure to our patients and our staff. After identifying truly urgent patients, we saw them at our outpatient clinic, which was one of the first to be retrofitted with negative pressure capabilities in Philadelphia. Additionally, we have been able to procure N95 masks, face shields, and procedural gowns through the generosity of donors. This has allowed us to meet some of the needs of our community by providing much needed emergency dental extractions and drainage of odontogenic infections without overloading the Emergency Department.

A silver lining of this pandemic is the gift of learning opportunities that may not have otherwise presented themselves. We have been able to redirect some of our time towards building a strong theoretical foundation. Since the start of the COVID-19 pandemic, local and national groups have generously provided resources to dental providers and, more specifically to us, oral and maxillofacial surgery residents at all levels of experience. The American Association of Oral and Maxillofacial Surgeons (AAOMS), the American College of Oral and Maxillofacial Surgeons (ACOMS), AO Foundation, the American Dental Education Association (ADEA) and the American Dental Association (ADA) have provided countless hours of lectures and virtual conferences to their members with discounts given to residents. Along with increasing our journal club activities, these resources have helped us to better prepare to tackle the complexities of surgery and medical management of those in need once we are able to resume a "normal", or "new normal," work flow again. Additionally, just as it is important to ensure the wellbeing of our patients, the wellness resources provided by these organization have given us tools to make sure we are taking care of ourselves as well.

At this crisis point, a new generation of clinicians will be required to advocate effectively for the needs of our patients and our professions. Our attendings have encouraged us to create lectures to be given by residents for residents, improving our public speaking and leadership skills. As governing bodies like the Centers for Disease Control, the Pennsylvania Department of Health, ADA and AAOMS have worked together to establish guidelines for safe practice, it is incumbent on us as frontline workers to ensure that new guidelines make sense. Using the same technology that connects us to our patients, we have connected with other programs and are in a stronger position to advocate for our patients and our own well-beings.

This pandemic has given us time and cause to reflect. We have gained a better understanding of what specializing truly entails. It has also allowed us to reclaim perspective, which is otherwise often lost in the ceaseless intensity of residency. We have lives, responsibilities, and loved ones who exist beyond the realm of medicine. We have taken opportunities to reconnect with them, even if only via virtual platforms, which has made us more grateful for where we are - and how all struggles are temporary - be they simply surviving residency or working through an unprecedented crisis in healthcare.

Assets from publication with us

- Prompt Acknowledgement after receiving the article
- Thorough Double blinded peer review
- Rapid Publication
- Issue of Publication Certificate
- High visibility of your Published work

Website: www.actascientific.com/

Submit Article: www.actascientific.com/submission.php

Email us: editor@actascientific.com

Contact us: +91 9182824667