**Hello PDC’ers!**

On April 21st, we held our last meeting of the year wherein we hosted **Clinical Assistant Professor, Dr. Ian Marion, DDS MS** to speak to us about his experience with pediatric dentistry, how applicants are chosen into the program and what is expected of them.

“Pediatric dentistry is more than just providing dentistry to kids. Pediatric dentists also see children with acquired problems and special needs patients. In hospitals, sometimes operating rooms are used in surgery because there are cases where the majority of the child’s teeth have problems. Pediatric dentists can be on call. Hospitals can call you in the middle of the night and have you scrub into surgery for patients that really need treatment at that time. In pediatric dentistry, you will be trained in sedation. You’ll need a lot of training to be comfortable with this procedure.

In pediatric dentistry, it’s likely that you will be the first dentist children will see in their lives. So what you do to them will stay with them for the rest of their lives. It’s a lot of responsibility to teach them early to take care of their teeth and to not be scared of going to the dentist. You’ll find kids who hate going to the dentist. The fact that they come back is mystifying. When it’s going good, it’s going great. Happy kids are great, but sometimes, you’ll be the bad guy because you’ll have to do something that they need. You have to stay strong. Parents will not trust you if you get scared of a crying child. UIC has a fantastic pediatric experience. It’s important for general dentists to know where is their line of comfort. They need to know when to send the patient to a specialist. Training at UIC is far superior because of the patients. Talk to the parents about their children’s teeth. You learn how to communicate with people and identify problems not only with children.

In regards to applying to a residency program, it’s very similar to the AADSAS process. Interviews are different though. There’s a match program that helps applicants obtain positions in the first year of training in postdoctoral programs of their choice, and to help programs obtain applicants of their choice. There are many applicants and very little spots. It’s very competitive. There are a lot of people interested in specializing. Where you do your residency is important. There are residency programs in universities, hospitals, and in both. Most programs have a combination of both. Start exploring different specialties. See what life is like for them. Residencies are really hard and lasts 2-6 years. Make sure that before you apply, you know that this is what you want to do. You wouldn’t want to spend your years in school hating what you’re doing. “

**Questions?**

**How did you become part of the dental missions in Peru?**

It’s common in dental school for students to go on mission trips. A lot of churches and organizations hold them. The trip I went on was started by students. I know a faculty member that go on trips 10-12 times a year. She really enjoys it. It’s worthwhile and it gives you a chance to see the world.

**What influenced you the most about getting into pediatric dentistry?**

An assistant actually talked to me about it. I was in dental school and I was figuring out where I’m going to go. I thought about what I will enjoy doing for the rest of my life. Talk to people in other practices. Figure out what they do. Oral surgery is really interesting, but it takes up a lot of your time. What types of patients do you see? What type of toll does it take in your body? Some times you can’t do in a city. Some practices are hard to do in a rural town because they don’t have the patient base.

**Did you have experience working with kids with disabilities prior to specializing?**

No actually. It was shocking to me because I’ve never thought about it. It made me really curious. When I was in dental school, I had a family that drove 3 and a half miles to come see us. There’s not enough people doing this and it pushed me toward pediatric dentistry. The more knowledgeable you are about your field, the better

**Is it a requirement to have patients in the room during the operation of children?**

It’s not a requirement, but it’s up to the practitioner if they want the parents there. Different places have different policies. It’s evaluated by kid-to-kid basis

**How do you handle a child that acts outrageous?**

You learn to manage children in dental school. Sedation makes them relaxed if there’s no other option. Don’t rush into it though. Kids start off bad, but they can get better. Sometimes it just works well for you the first time. You’ll get used to the noise of crying. It’s important to learn about differentiating cries. Don’t freak out about a kid crying. The parents will trust you and would take you more seriously if you were calm.

**If you have any questions for Dr. Marion, you can reach him at** [**imarion@uic.edu**](mailto:imarion@uic.edu) **or (312) 413-9651**