## **KNOW THY PULP**

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## ABSTRACT

One of the biggest challenges that a pediatric dentist faces is to link anamnesis and pulpal status to draw an accurate diagnosis. This editorial focuses on the importance of history taking, emphasizing on the question words that need to be considered in order to determine the pulpal status.

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Students of pediatric dentistry acquaint themselves early in their professional career with the fact that children are poor historians. Hence, during an anamnesis, a conversation with the pediatric patient's parents or guardians is of paramount importance to draw a provisional diagnosis. Eventually, while funneling down to the final diagnosis, the cues given by the caretakers must be linked with clinical and radiographic investigations to understand the basis of dental discomfort of a pediatric patient.

The visualization of the pulp and its relation to a pathology of the concerned tooth is largely the forerunner for deciding upon a treatment plan. However, evaluation of the pulp must also be objectively assessed during the communication with the parent. It is imperative to ask certain basic questions to the parents which in itself in an artful deduction to a diagnosis.<sup>1</sup>

In order to master this skill, clinicians must comfort themselves with question words. This little trick can save you from jeopardizing one's tooth, and the clinical frustration of not achieving optimal treatment goals.

- 'When' gives you an idea regarding the pulp's activity (Acute or chronic?)
- 'Where' helps you understand the nature of the pain (Pulpal or periodontal?)
- 'How' gives you an idea about the severity of the pulpal condition (Reversible or irreversible?)
- 'Why' can help you determine the reason for the pulp to be insulted (Etiology)
- 'Which' adds to your understanding of the various factors that contribute to the

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existing pathology (additional findings).

Amalgamation of subjective and objective findings help you determine whether pulp will be able to heal on its own or would be needing a treatment. Corelating the patient's history of present illness with radiographic findings is an unmissable step, which can help successfully eliminate some of the differential diagnosis.

Pediatric endodontics comprise of both vital and non-vital pulp therapy procedures which are opted for depending on the severity of the pathology and the tooth involved. It is thus important to know the patients' pulpal status before commencing digging into it.

## Reference

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