



SEATTLE STUDY CLUB®

The SSC Journal: Bridging the Disciplines

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Technological advances continue to shape a challenging and innovative future for the dental health care profession. How can the demands of this rapidly changing field be met? What skills and knowledge will be necessary to move comfortably into the next decade? How can all aspects of dentistry, whether periodontics, oral surgery or endodontics, be incorporated into one's practice, thereby "Bridging the Disciplines?" The answers to these questions are crucial to comprehension of the role continuing education will play in the future of our profession.

Traditionally, continuing dental education programs have focused on slide and lecture presentations offered over one or two days by recognized experts in the field. The theory behind this conventional model of learning would appear to be the notion that knowledge of a technique or treatment is created through visual and verbal description, and further, that ideal dentistry is nothing more than an assemblage of these techniques and treatments. Few, if any, conventional continuing education programs have offered a coherent and comprehensive approach to post-university learning. Instead, the sponsors of these courses have apparently relied upon the practitioner's ability simultaneously to analyze his or her own weaknesses and prescribe the appropriate educational tonic.

While a great deal can be learned from the experts, traditional theories of continuing education utterly fail to appreciate the necessity of (1) understanding the "big picture" into which a technique fits; and (2) "hands-on" experience incorporating the technique into a specific treatment plan, with a given set of real world parameters. How many dentists have attended lectures or courses intended to convey knowledge of "state-of-the-art" techniques, yet remain unable or unwilling to utilize these new treatments? These dentists have been denied both a complete comprehension of the specific technique they had hoped to learn, and an understanding of the larger context into which that technique is placed. In the process, they have forfeited not only a good deal of their money, but also what is rapidly becoming the most precious commodity of all—their time.

Standing in sharp contrast to the conventional theory of learning is that advocated by the Seattle Study Club, a true "University Without Walls." At its core are three major principles. The first principle is the philosophy that neither ideal learning nor ideal dentistry can be attained by a random exposure to various techniques and treatment modalities, even if those techniques, taken individually, represent "state-of-the-art" treatment. Rather, the highest and most beneficial knowledge and treatment results from total case management—an appreciation of the "big picture" and a true understanding of the role any given technique or treatment plays in that picture.

The second principle is the self-evident proposition that we learn more by participation and clinical interaction than by observation. As the goal of the study club is to improve treatment planning skills and familiarize members with the most effective techniques and technology, the opportunity to test one's knowledge and understanding of the science remains central to the learning process. Perhaps the most radical and exciting aspect of the Seattle Study Club concept is its emphasis on participation-based

learning. Through “hands-on” experience in clinical sessions, club members enhance their treatment planning skills and learn how to bring an “expert’s” touch to the type of cases they treat every day.

The third principle is the idea that learning with and from one’s peers in a structured and supportive environment is the most effective way to master the challenges posed by the dental profession. The study club provides a forum for the “University Without Walls”—a well-organized continuing education program, with a comprehensive curriculum incorporating all aspects of clinical, didactic, and academic learning.

Additionally, it is within the framework of the study club that members have access to an advisory board of skilled and experienced clinicians. These individuals provide a source for troubleshooting in more difficult clinical situations, pre-treatment consultations on selected cases, one-to-one mentoring for individual members, and lectures to the group on basic and advanced treatment planning principles, current literature, and case reviews. The advisory board is an educational resource unique to the Seattle Study Club environment.

The Seattle Study Club Journal mirrors and reflects the principles of the Seattle Study Club. First, it focuses on total case management and treatment planning. Cases are presented with all supporting documentation, including treatment planning problems and clearly delineated solutions. Actual treatment are shown in a subsequent issue. As a result, cases may easily be used as learning modules or for group discussion during study club clinical treatment planning sessions. Therapy is reevaluated over the years, and this too provides an opportunity for clinicians to test the parameters of the treatment and techniques employed.

Second, it features articles written by and for members. Through participation in the publication of articles for *The Seattle Study Club Journal*, whether as author or editor, members have an opportunity to hone their analytical skills.

Third, it provides a review of the literature, with an eye fixed firmly on the clinical relevance to practitioners.

The future holds many exciting developments for the dental health field. As the need increases both to understand the most ideal techniques and to incorporate them into our treatment plans, traditional continuing education programs must change or be cast aside. With increasing demands on our time and resources, we must find a way efficiently and effectively to obtain the knowledge and practical skills necessary to remain at the top of our profession. Seattle Study Club and *The Seattle Study Club Journal* are dedicated to that goal.