## The benefits and newly required practices brought about by innovations in the communication between professionals

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In the last decades, communications was one of the areas of sciences that gained the most resourcefulness, with innovations of its own, and, above all, with the recent technological advances made available to an ever growing public. This resourcefulness has unquestionably contributed to scientific knowledge by facilitating the sharing of information between professionals. Unfortunately, however, this exchange can take on an illegal character, sometimes with questionable purposes.

In the health care field, applying scientific knowledge often requires bringing different opinions together. This is particularly the case in Dentistry, owing to its inherent technical complexity. In order to choose the most appropriate conduct for each particular case – from diagnosing it properly to administering the most suitable therapy – it is necessary to acquire an overall picture based on experienced opinions that look at the problem from various standpoints and with different levels of knowledge. This process of querying and consolidation is called "Second Opinion", which can be more easily shared today because of the constant innovation in the communication media.

An important aspect in this issue is preserving the relationship between patient and dental professional, observing the principles of secrecy, individuality, confidentiality and both personal and delegated property. The exclusive and indivisible responsibility of the professional that provides care to the patient in a direct and personal fashion stands unquestioned. Other concurring professionals merely contribute to the process of building the best possible judgment by the first professional.

These are the underlying circumstances guiding the cautionary measures required in the relationship between the professional directly involved in seeing the patient and the professional providing a second opinion to assist in the case directly or at a distance via internet, whether formally or informally. The ethical responsibility of those who send and receive protocols, images, case reports and other data pertaining to the case – including lab information and data used by lab professionals – is at stake. Here, the required ethical conduct is the same as that recommended in working with any other database, whether physical, digital or of any other nature.

Digital databases should be set up with the same secrecy and reliability as physical ones. Encrypting the information will allow access solely and exclusively by those who have the correct passwords and code keys, but it also involves the costs of building access environments run by encryption systems. On the other hand, the simple exchange of email mes-

sages between professionals should be controlled in order to ensure the receipt of sensitive data only by the authorized addressee.

The issue broached here is of great interest to science, both from a didactic-academic and a clinical research point of view. As to the patient, his/her free and informed consent is contingent to the guaranteed protection of the secrecy and proper use of his/her sensitive data, which includes the storage and transit of these data through electronic media.

The dental community is thus called upon to evaluate the benefits of communication innovations in the various media in which it is put into effect today. The validity of these benefits is contingent on the guarantees discussed above, with the aim of obviating unwanted legal ordeals and unethical outcomes.

The scientific base of these observations is presented in the text titled "Contribution to the Regulation of the Ethical Use of Dental Electronic Records (DER)," available at the homepage of the "Sociedade Brasileira de Pesquisa Odontológica" (www.sbpqo. org.br), the Brazilian Division of the International Association for Dental Research (IADR). A forum of discussions on the subject is available at www. teleodonto.fo.usp.br, and may shed more light on the issue.