EDITORIAL

After Mentoring

please indulge me as I review a little of my history. After dental school, I spent a year as a general practice resident. This program allowed me to gain practical experience in many of the skills that were taught in the previous 4 academic years. When the residency was done, I started working in a professional association with a very progressive, outside-thebox-thinking dentist. This furthered my knowledge and skills as I gained confidence working with this individual. Thereafter, I started teaching part-time in the residency program that I had previously attended and at a local dental school. So this was a transition from mentee to mentor. That transition did not last, as I was accepted into a graduate training program in prosthodontics, thereby becoming a student once again. I finished my first decade in dentistry during my specialty training and then I became a clinician/ educator/researcher. Last summer I retired from my institutional group practice, with its associated educational and research components, and began a new life as member of a private group practice.

My first observation is that, when one recounts a career, if the number of sentences grows to more than four, this is a sign that you are getting older. Casting aside this narcissistic comment, the second observation is that these turns make for an exciting career.

My situation was one where I went from student to resident to teacher to student and, after a number of years, professor, only to return to clinical practice that is limited to implant dentistry. There were many transitions, but most of the time the target was clearly defined. The well-defined target is the one thing that disappears when we move outside of the academic environment. Within the ivy-covered walls, we know what we must do, but outside of those walls the mentor is not there to define the path.

Frankly, there is nothing that a mentor enjoys more than seeing a former student succeed. The difficulty for the mentee occurs when that individual transitions to independence. Some understand their skills and know how to continuously improve, but many find it difficult to improve because there are so many obstacles to learning and skill development.

One of the greatest roadblocks occurs when a clinician realizes that there are few objective assessments outside of traditional education. When an individual attends a continuing education program, there is no entrance exam (entrance depends upon payment of a fee) and there is no final examination to ensure that

the program provided what it was supposed to provide. In some instances, an individual might attend a program, miss the point of the presenter entirely, and take home an unintended message. The problem might be that the attendee heard something that was not presented or that the presenter simply lacked the communicative skills to clearly articulate the critical points to the audience. Sadly, this situation may not be recognized, a situation that compounds the lack of understanding.

Is there a solution? Personally, I think that everyone needs to lean on colleagues to learn what needs to be learned. This situation is not one of finding a mentor, as mentors provide their input during the early phases of a career. Mid- and late-career improvement comes from collegial discussion and encouragement.

Identifying a colleague who will make you a better clinician is not a simple task. The relationship needs to be mutually beneficial. If one partner is always encouraging the other, the relationship will fail. Instead, there needs to be a give and take with each of the colleagues bringing specific skills to the table that assist the other in self-improvement. If one person is all knowing, the other falls to the level of student, which is fine in the early years of a career but is not productive afterward. We have seen it at meetings, where one individual leads a posse of sycophants. The relationship is not healthy, as the leader gains nothing but recognition or adulation while the followers never learn to think independently.

Once you identify a person or group of people who possess mutual interests and a similar desire for improvement, it is wise to work to make this relationship succeed for all involved: take the time to discuss presentations, create an opportunity to review articles, collaborate on creating a better understanding and then utilize the knowledge gained through these efforts. Also, understand that collegiality is more than just work; seize the opportunity to enjoy the effort and cultivate strong friendships. Ultimately, these are the most rewarding relationships that you will have in dentistry.

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