Paediatric Dentist interview questions

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What to expect

Paediatric dentist interviews typically assess your clinical judgement, communication with children and families, and ability to work within a multidisciplinary team. Expect a mix of technical and behavioural questions.

- **Process:** Questions about how you structure a consultation or manage a treatment plan.
- **Behavioural:** Questions asking for examples of past experiences, such as managing a difficult case or a nervous child.
- **Scenario:** Hypothetical situations that test your clinical reasoning and communication under pressure.
- **Technical:** Questions on preventive care, sedation, or restorative techniques.
- **Safety:** Questions about infection control, child protection, and workplace health and safety.
- **Client-facing:** Questions about explaining treatment to parents or handling complaints.

The interview usually starts with a meet-and-greet and a tour of the practice, followed by a panel interview with the principal dentist and practice manager. You may be asked to discuss a case or complete a short clinical scenario. Some practices include a working interview or a second stage with the wider team.

1. Walk me through how you approach a new paediatric patient who is anxious and has never been to a dentist.

Why they ask

This tests your behaviour management and preventive philosophy.

How to structure your answer

A step-by-step walk-through: from initial greeting and tell-show-do, to assessment, to treatment planning and follow-up. Emphasise communication with the child and parent.

Example answer

“I start by welcoming the child and parent, and I use tell-show-do to explain each step in simple language. I let the child touch the mirror and count their teeth, which builds trust. I assess the teeth and gums, take radiographs only if needed, and then discuss findings with the parent. If treatment is required, I plan the least invasive option first, such as fluoride varnish or sealants, and schedule a follow-up to build confidence. I also give dietary and hygiene advice that the family can act on immediately.”

2. Tell me about a time you managed a child with severe dental anxiety who needed a restorative procedure.

Why they ask

Assesses your behaviour management and problem-solving.

How to structure your answer

STAR: Situation, Task, Action, Result.

Example answer

“A six-year-old was referred to me with a large cavity and a history of refusing treatment. The task was to restore the tooth without traumatising the child. I spent the first appointment on tell-show-do and a practice run with a dummy tooth, then used nitrous oxide sedation for the actual procedure. I broke the treatment into short steps and gave frequent breaks. The result was a successful

restoration, and the child returned for a recall without anxiety."

3. A parent insists on a treatment that you believe is not in the child's best interest. How do you handle it?

Why they ask

Tests your communication, ethics, and ability to manage conflict.

How to structure your answer

A judgement-under-pressure structure: acknowledge the parent's concern, explain your clinical reasoning, offer alternatives, and if needed, seek a second opinion or involve a colleague. Keep the child's welfare central.

Example answer

"I would listen to the parent's perspective first, then explain why I recommend a different approach, using evidence and plain language. I would present all reasonable options, including the risks and benefits, and ask what matters most to them. If we still disagree, I would suggest a second opinion from another paediatric dentist. Throughout, I would keep the child's safety and comfort as the priority."

4. How do you decide between using local anaesthesia, nitrous oxide, or general anaesthesia for a paediatric patient?

Why they ask

Tests clinical judgement and knowledge of sedation options.

How to structure your answer

A decision-tree structure: consider the child's age, anxiety level, medical history, treatment complexity, and parent preference. Explain contraindications and safety protocols.

Example answer

"I assess the child's age, ability to cooperate, medical history, and the invasiveness of the procedure. For simple preventive care, local anaesthesia may be enough. For anxious children or longer procedures, nitrous oxide can help. General anaesthesia is reserved for complex cases, very young children, or those with special needs, and only in an accredited hospital setting. I always discuss options with the parent and obtain consent."

5. What steps do you take to ensure child protection in your practice?

Why they ask

Assesses your awareness of mandatory reporting and safeguarding.

How to structure your answer

A process explanation: recognise signs, follow practice protocol, document, and report to the relevant authority. Emphasise the dental team's role.

Example answer

"I stay alert to signs of abuse or neglect, such as unexplained injuries or poor oral hygiene. If I have concerns, I document them carefully and discuss with the practice principal. I follow the practice's child protection policy and report to the state or territory child protection authority as a mandatory reporter. I also ensure all staff are trained in safeguarding."

6. How do you explain a complex treatment plan to a parent who is worried about cost and time?

Why they ask

Tests your communication and empathy.

How to structure your answer

A client-facing structure: acknowledge concerns, simplify the plan, prioritise treatments, and offer a phased approach. Use plain language and avoid jargon.

Example answer

“I start by acknowledging their concerns and reassuring them that we can prioritise. I break the plan into stages, explaining which treatments are urgent and which can wait. I use simple terms and visual aids like the intraoral scanner images. I also mention payment options or public schemes if relevant. Then I check their understanding and answer questions.”