

Internship in public health services: dental students' perceptions and consonance with curricular proposals

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ABSTRACT

Supervised internships in public health services are the moment when students can put into practice in different community settings all the theory they have learned. The purpose of this study was to analyze whether dental students' perceptions about this type of internship are in accordance with the learning objectives of the Supervised Health Service Internship (SHSI) discipline and the National Curriculum Guidelines (NCG) (*Diretrizes Curriculares Nacionais*) for Dentistry. This study had a mixed qualitative and quantitative cross-sectional design. A convenience sample of 135 students from the final year of the course, of both genders and from each of the two course shifts, had finished their (SHSI) in 2018. Participants completed a standard questionnaire, which is administered at the end of the internship. The answers to the open-ended questions were analyzed using content analysis as proposed by Bardin and the categories of analysis were structured according to the general competencies described in the NCG: health care, decision making, communication, leadership, administration and management, and continuing education. The answers to the closed-ended question were analyzed quantitatively by measuring frequencies in SPSS version 21.0. The students stated that they were able to develop skills and competencies in keeping with the provisions of the learning objectives of the SHSI discipline and the NCG. The internship was classified as excellent by 80.0% of respondents. The conclusion was reached that the students' perception about the internship is in line with what is proposed in the documents that guide it.

Descriptors: Curriculum. Dentistry. Health Services.

1 INTRODUCTION

Teaching in Dentistry has, over time, undergone a series of changes. It started with a profile predominantly focused on technical, fragmented and specialized training, based on a Flexnerian model of health care, until the advent of a milestone in higher education in this area - the National Curriculum Guidelines (NCG) for Dentistry degree courses¹. The Guidelines have the clear proposal of training critical, reflective, human individuals, capable of understanding patients as a whole and how people become ill, in addition to being qualified for general practice. In essence, it targets potential professionals for the public health service¹, not least because the attributions of the Unified Health System (*Sistema Único de Saúde* - SUS) include training resources for the health area².

Fonseca (2012)³ points out that the NCG are not just a document in which bureaucratic terms are registered to ensure the adequacy of Dentistry degree courses in Brazil, but rather a representation of the advancement of democracy, in which health is a citizen's right ensured by law, added to the expanded concept of health and to what a professional with solid and humanized training aims for.

The NCG describe the general and specific skills that should guide dental surgeon training. As provided for in this guiding document, the general competencies established are: health care, which incorporates health prevention, promotion, protection and rehabilitation actions, at the individual and collective level; decision making, which refers to making decisions with a view to appropriate, effective use, with adequate cost-effectiveness, capable of solving problems and developing new knowledge; communication - in which the professional is accessible, interacts with other professionals and with the public, transmitting

responsibility and trust; leadership - involves responsibility, skill, empathy and commitment aimed at the well-being of the community; administration and management - i.e. the ability to take initiatives, manage information and material resources; continuing education - the ability to learn continuously, to have commitment and responsibility towards one's education¹.

The list of competencies and skills present in the Dentistry course NCG includes the development of supervised curricular internships. This is a pedagogical strategy that gains complexity throughout the course¹. In this context, the fundamental role of the Brazilian Association of Dental Education (ABENO) stands out, as an entity engaged in discussions about dental training, with special attention to undergraduate student internships. In 2015, a review of ABENO's guidelines for carrying out these internships was published⁴. The authors proposed that the activities carried out in the internships should be directly related to students' reality, in order for them to have an extramural view, a perspective of a social reality different from theirs, in order to align theory and practice.

Teaching-service-community integration is essential and SUS is the ideal scenario in which students will be able to practice their profession with communities from the perspective of the NCG⁵. Studies indicate that curricular internships in the health field allow students to recognize the reality of their professions in external environments and to be more aware of their role in society⁶⁻⁸.

Various actors participate in this process of building experiences, be they service managers, instructors, social service work teams, teachers or students. There is a clear need for integration between all of them, with well-defined purposes, pre-established

agreements and rules, but above all, a partnership established in order to provide the maximum benefit to those involved.

Studies on the role of preceptors/supervisors in Dentistry have identified that they mediate the integration of students with other members of the work team and with the service's routines, in addition to supervising a series of activities, be they clinical, educational or health promotion activities, involved in a relevant exchange of experiences⁹⁻¹³. Finally, the analysis of the students' performance is done by those who accompanied their practice *in loco*^{10,13}.

Qualitative research has been aimed at understanding how teaching-service-community integration occurs, using different approaches. It is known that internship in health services favors more humanistic and consistent training, where students learn how the health service works and become able to develop activities outside the purely clinical sphere¹⁴⁻¹⁶. In the study by Luz and Toassi (2016)¹¹, students identified that working with preceptors favored autonomy, the transition from the academic world to the reality of the world of work, since the rapport between these actors was reported as being more cohesive, contrary to what happens with teachers. However, there is still a gap in the field of knowledge regarding evaluation of the internship in public services from the perspective of dentistry students, despite the existence of literature in the area^{15,17}.

At Universidade Positivo (UP), in Curitiba, the curricular matrix follows the premises of the NCG¹, and the learning objectives of the discipline of Supervised Internship in Health Service (SHSI) are: to experience different scenarios of health services, to identify SUS principles and guidelines, to recognize the multidisciplinary

team work process, to carry out health promotion activities with the community and in social facilities, to perform basic epidemiological investigation of oral health, to understand the collective oral health planning and programming process, to recognize the health situation of individuals and communities, as well as ways of addressing health problems and providing clinical dental care.

Students in the final year of the course (4th year of the morning shift and 5th year of the evening shift) do their SHSI at SUS Primary Health Care Centers or in Family Health Strategy Centers. Dental surgeons, who are municipal civil servants, receive students at the Health Centers (HC) and, although they do not belong to the teaching staff of the educational institution, they maintain a very close relationship and even help with suggestions for the discipline guidelines to be developed by teachers (indirect supervisors).

The learning objectives of the SHSI discipline are: a) to experience different scenarios of health services; b) to identify SUS principles and guidelines; c) to recognize the multidisciplinary team work process; d) to carry out health promotion activities with the community and in social facilities; e) to carry out basic epidemiological investigation of collective oral health; f) to recognize the health situation of individuals and communities, as well as ways of addressing health problems; and f) to provide clinical dental care at a HC.

Fadel *et al.* (2018)¹⁸ report that student learning should be broad, not only concentrated in course clinics, but also enabling experience in situations that lead them to develop the ability to solve them outside the academic world. Thus, the UP SHSI discipline is characterized by this intention. Students are offered a "circuit", where they all have to

identify, recognize and experience the SUS from management to activities on the “front line”, that is, in the clinical environment. Thus, visits to Health Districts, participation in meetings of the Municipal Health Council and in multiprofessional meetings within the HC, accompanying health surveillance and epidemiological surveillance actions, health education activities, health promotion, home visits and application of tools to work with families, such as the genogram and the life cycle. At the end on the internship, the undergraduates hold a large event, with the participation of those involved, so that their experiences are reported in an opportune manner. In addition, students deliver an official internship appraisal report, this being a standard procedure at the University. In this appraisal report, students have the opportunity to reflect on the experience of the supervised internships, highlighting the contributions, potential and challenges of the experience.

As such, we sought to assess whether the perception of students of the SHSI discipline of the Dentistry Degree course at UP, Curitiba/PR, is in line with the proposed learning objectives and the NCG for Dentistry courses.

2 METHODOLOGY

The research project was approved by the UP Research Ethics Committee, as per Opinion No. 2.636.519 (Certificate of Submission for Ethical Appraisal: 87994718.0.0000.0093). The study had a mixed method (qualitative and quantitative) cross-sectional design. The convenience sample included final year undergraduates (4th year of the morning shift and 5th year of the evening shift) of the UP Dentistry degree course (n = 135). Subjects of both genders and from both shifts were included, as long as they had effectively taken

the SHSI discipline in 2018. All participants signed a Free and Informed Consent form.

Participants answered a self-administered questionnaire, an official UP instrument, which they received at the end of the internship. This document includes the following information: personal data, HC where the internship took place, internship period, activities undertaken during the internship, student's perception about whether the activities were consistent with their academic background, how the activities were supervised in the internship, what the place and the resources available were like, how the internship contributed to their professional life and, finally, a general assessment of the internship according to objective classification as: excellent, very good, good, regular and insufficient.

A researcher was responsible for transcribing the answers given by the students on a spreadsheet that served for the qualitative analysis procedure. To this end, the content analysis technique proposed by Bardin¹⁹ was used, which included pre-analysis (“floating reading”) of the concepts presented by the respondents, creation of response categories and subsequent classification of the concepts into the response categories created.

The participants were coded in alphanumerically (E1, E2, E3 ...) so as to guarantee the confidentiality of each respondent's identity.

The Course Teaching Project, Learning Programs with the respective syllabus/learning objectives of the SHSI discipline and the 2002 NCG¹ were used in order to carry out a documentary analysis with a view to discussing the assumptions existing in the NCG and in the learning objectives of the SHSI discipline. This literature served as a support for joint analysis with the original data obtained, which made it possible for the categories of analysis to be

identified.

Still in this qualitative stage, in order to assist the analysis of the data, the students' answers were input to the WordClouds website (<http://wordclouds.com/>) to create a word cloud. The word cloud can be understood as a way of visualizing linguistic data, which shows the frequency with which words appear in a given context²⁰. This technique consists of using fonts with different sizes, according to the occurrence of words in the content analyzed. The result is an image that presents a set of words, in which the word found in the center is the one that appeared most often in the content, and around it are the other words in decreasing order. It should be noted that articles, prepositions, adverbial phrases and words that were not relevant for the analysis, were excluded in order to achieve a more relevant and concise result.

As for closed questions, these were analyzed quantitatively by measuring frequencies with SPSS version 21.0 (SPSS® IBM® Corp. Released 2012. IBM SPSS Statistics for Windows, Armonk, NY, USA).

3 RESULTS AND DISCUSSION

From the analysis carried out with the data collected, it was found that the students recognized that the internship placed them in situations in which they could develop skills and competencies that corroborate the provisions of the learning objectives of the SHSI discipline and those of the NCG.

The texts were organized in such a way that the contents that appear most frequently were grouped into categories of analysis according to the general competencies described in the NCG for Dentistry courses¹: health care, decision making, communication, leadership, administration and management and continuing education. Box 1 summarizes

the findings of the present study.

Students point out that participation in the SHSI discipline is essential for training, since they experience different scenarios, recognize the public health system and learn to work as a team.

Health care, defined not only by aspects of prevention, promotion and maintenance of health, also relates to care that must take into account social differences and cover individual and collective needs.^{1,21} It was found that students were able to practice this care, which can be exemplified by the following consideration:

"[...] taking care of others, caring more for others and trying to find out what is going on, what conditions the person is in during home visits and meetings." (E5)

Given the diversity of contexts to which students are exposed, they are able to recognize that it is the right of all people to have access to health, in this case perceived by the frequency of users at the HC during the period of their internship. With this, SUS principles and guidelines are met, such as the principle of Comprehensiveness reflected in the text below:

"[...] to be a professional who cares more about prevention than restorative treatment. Seeing the patient as a whole, not only the dental problem, not only treating the problem, but understanding why." (E40)

During the teaching-learning process throughout the UP Dentistry degree course, especially in the Public Health Dentistry disciplines, students are given an expanded view of the health-disease process, in an attempt to overcome technician and reductionist practices. Emphasis is given to the permeability of the subjective aspects involved in this context²².

Box 1. Summary of the main findings in relation to general competences

CONTENT ANALYSIS	
HEALTH CARE	<p>"[...] I entered a local reality, in addition to understanding closely how primary (basic) care works, the criteria and the referral process. There is integration between professionals [...]" (E22)</p> <p>"[...] to be a professional who cares more about prevention than restorative treatment. Seeing the patient as a whole, not only the dental problem, not only treating the problem, but understanding why." (E40)</p> <p>"[...] I believe I have developed my ability to empathize a lot, making me always put myself in the patient's place and try to understand his pains, his problems, his feelings and frustrations, his expectations, his dreams and desires." (E49)</p> <p>"[...] as a professional, in addition to applying theory, knowledge, I learned a lot from people about the true meaning of taking care of lives." (E32)</p> <p>"[...] taking care of others, caring more for others and trying to find out what is going on, in what conditions the person is in during home visits and meetings." (E5)</p>
DECISION MAKING	<p>"[...] in the supervised clinical activity, I provided care and performed procedures consistent with the content covered in college [...]. In addition, I also used academic training content to carry out health promotion in municipal schools." (E135)</p> <p>"Care provision to patients with a certain autonomy for clinical decisions. Care provision with a multidisciplinary team". (E24)</p> <p>"[...] I saw many cases with diagnoses that I had never seen before and I solved them, with supervision, but trusting in myself. These were days of great learning." (E27)</p> <p>"I learned a lot in choosing which procedure is most convenient for the patient, and adapting Dentistry to each reality [...]" (E37)</p>
COMMUNICATION	<p>"During the internship at the Health Center, we faced some situations that we did not cover during the course. It helped with some techniques of patient management, positioning, communication with the patient and how to streamline some procedures." (E15)</p> <p>"The internship helped me a lot to improve my communication with patients; it helped me in case management, speaking, how to behave, and helped me to coexist in groups at work." (E36)</p> <p>"The activities that were not directly in the area of Dentistry, involved direct relationship with patients, helping to improve communication and conduct in relation to different types of cases." (E37)</p> <p>"[...] clinical ability, interpersonal relationship, agility, mastery of operative techniques, more contact with the real dental situation of patients [...]" (E30)</p>
LEADERSHIP	<p>"[...] it allowed us to take on our professional identity for the first time, making us feel 'first-hand' commitment to schedules, patients, the institution and the Health Center that entrusted us to serve the community" (E1)</p> <p>"[...] helped to quickly decide the procedures, to have more control in complicated situations and how to behave as a professional." (E28)</p> <p>"[...] I learned to deal with different types of patients and situations, to work with the resources that the Center had." (E5)</p>
ADMINISTRATION AND MANAGEMENT	<p>"[...] health promotion activities, supervised clinical activity, home visits with a community health agent, management of necessary supplies for dental care" (E19)</p> <p>"[...] observing how the structure of a Health Center works has contributed to my professional life, mainly in how to organize myself with the materials used, learn about the resources used differently from a private practice, respect the service hours, know the work of people who work at a health center." (E35)</p> <p>"[...] experience with several patients per period, exercising knowledge of general practice and agenda management." (E24)</p>
CONTINUING EDUCATION	<p>"A lot, in addition to the practice of the course activities, learning far beyond Dentistry; living with different realities, having an approach to unexpected situations. Adapting to the environment and using the tools available to develop your best work." (E15)</p> <p>"It allowed the development of practical skills, socialization of knowledge, greater understanding of the health - disease process, humanization and multiprofessional work." (E9)</p> <p>"[...] welcomed by the entire team at the Health Center, who were always willing to help and guide in whatever was necessary, always giving us the freedom to ask questions about anything". (E54)</p> <p>"The internship contributed in an important way to my professional life. In addition to the fact that I had the opportunity to observe, learn and perform activities focused on Dentistry, I was also able to share with other health professionals experiences and knowledge related not only to the health of the human being, but also to the daily life lived and focused on collective health." (E6)</p>

Among the objectives of the SHSI discipline are the carrying out of health promotion activities with the community and in social facilities, and the recognition of the health situation of individuals, as well as ways of addressing health problems. This proposal is confirmed in the research by Bruder *et al.* (2017)⁶, in which the internships in HC are not only focused on clinical care, but also on multiprofessional care, prevention and health promotion. Fadel *et al.* (2018)¹⁸ point out the need to valorize SUS internships, given the benefit of overcoming the difficulties to which students are exposed and also the demands on public health. Thus, it can be said that both this item of the NCG, as well as the learning objectives referred to, corroborate.

The ability to make decisions is essential for any professional, especially in the health field²³. The students realized this, as exemplified below:

"[...] I saw many cases with diagnoses that I had never seen before and I solved them, with supervision, but trusting in myself. These were days of great learning." (E27)

"I learned a lot in choosing which procedure is most convenient for the patient, and adapting Dentistry to each reality [...]" (E37)

This gain in terms of agility in providing care and autonomy is favored. Handling more complex cases refers to the need to recover the connection between the different areas of Dentistry, with a view to the patient being understood as a whole. According to Bulgarelli *et al.* (2014)¹⁷ the internship allows students to look at an extramural reality, making them prepare themselves to act in any unexpected situation outside the university setting.

Here, it is important to emphasize the role of the preceptor, who gives up his time, makes

his workplace available and directly supervises all the activities performed. Even though he is not part of the teaching staff of the Teaching Institution, it is the preceptor who takes on the role of facilitating learning, guiding students, enabling them to reason, in addition to assessing the conduct of students and sharing their experiences^{11,12}.

Communication is a skill little explored in a Dentistry course and this is a shortcoming, since it improves leadership and interpersonal relationships.

"The activities that were not directly in the area of Dentistry, involved direct relationship with patients, helping to improve communication and conduct in relation to different types of cases." (E37)

In dentistry it is necessary for the patient to be heard and to be sensitive to what the patient reports, understanding and respecting their limits²⁴. In order to establish a good relationship between professional and patient, good communication is necessary and must be worked on during dental professional training²⁵. This improvement was evidenced by the report:

"The internship helped me a lot to improve my communication with patients; it helped me in case management, speaking, how to behave, and helped me to coexist in groups at work." (E36)

There are reports in the literature that failure by professionals to transmit information generates patient dissatisfaction²⁶.

In the present research, the thematic category Leadership gained prominence with the following comments:

"[...] it allowed us to take on our professional identity for the first time, making us feel 'first-hand' commitment to schedules, with patients, the

institution and the Health Center that entrusted us to serve the community" (E1)

"[...] helped to quickly decide the procedures, to have more control in complicated situations and how to behave as a professional." (E28)

Leadership is defined as the ability to influence others, to be proactive, and to determine a direction²⁷. In the dental field, becoming a leader is a challenge, essential for advancing the profession²⁸. There is evidence in the literature regarding the flaw in the education system when dealing with this issue²⁹. It is noteworthy that in multi/interprofessional health work, subjects must be capable of taking on leadership positions, in view of the health and well-being of the individual, family and community. However, it is important to consider that leadership involves and requires commitment, responsibility, empathy, ability to make decisions, communicate and manage effectively and efficiently. In this scenario, supervised internships in health services appear as a unique opportunity to approach and develop this competence³⁰.

As for the Administration and Management category, the objective is to achieve organization, efficiency, effectiveness and efficacy, even in the face of the challenges experienced in public health services in Brazil. Based on the answers given, some students reported cases of lack of material, disorganization and problems with facilities. However, it was clear that they understood that the "manager" is there to solve a series of problems, even when resources are scarce.

"[...] observing how the structure of a Health Center works has contributed to my professional life, mainly in how to organize myself with the materials used, learn about the resources used

differently from a private practice, respect the service hours, know the work of people who work at a health center." (E35)

"First of all, it made us aware of how SUS and the Health Center itself work, making it possible for us to streamline procedures due to the high demand for patients and quick service. We also learned how to do our best with the materials we have available." (E18)

These findings corroborate other reports found in the literature, which emphasize that the organization and commitment of health service managers, as well as the active participation of health workers, are essential for circumventing the problems faced by the HC⁷.

Lorenzetti *et al.* (2014)³¹ state that there is a shortage of professionals with solid training in health service management, in addition to the fact that this is a deficient area in terms of continuing education. In this way, the speeches analyzed indicate that this early stimulus to students in the internship was achieved.

In relation to the development of the Continuing Education competence, based on the students' evaluations there was recognition of the importance of constantly learning and stimulating continuous transformation, by accompanying innovations, methods, experiences, among others. In addition, the students' willingness to remain open to exchanging information and experiences through personal and professional relationships is highlighted, as exemplified in the speech below:

"The internship contributed in an important way to my professional life. In addition to the fact that I had the opportunity to observe, learn and perform activities focused on Dentistry, I was also able to share with other health professionals experiences and

knowledge related not only to the health of the human being, but also to daily life and focused on collective health."(E6)

Morita *et al.* (2004)⁵ state that the Continuing Education competence is based on the pillars of education, considering that it is based on the need for constant and continuous learning. The authors also emphasize that Continuing Education in health plays an important role in making it clear that graduation is not a terminal process, but represents only the beginning of professional learning, which should follow the professional for life. This was evident in the students' evaluation, when they point out learning "beyond the Dentistry course":

"[...]. in addition to practicing the course activities, learning far beyond dentistry; living with different realities, having an approach to unexpected situations." (E15)

The reflection on Continuing Education as

a competence described in the NCG for Dentistry reinforces the need to bring higher education institutions closer to society⁵. In this sense, supervised internships in public health services can be considered as an important strategy to make this approach feasible and assist in the development of this competence³².

Based on the data analyzed, building the word cloud contributed significantly to the visualization of what was most relevant in the evaluation of students on internships in health services (figure 1). The result found corroborated the content analysis performed.

According to figure 1, it is possible to observe that words directly related to the general competencies described in the NCG for Dentistry revolve around the word "Internship", with greater emphasis on the words: "health", "communication", "autonomy", "management", "learning" and "knowledge". The result thus obtained through the word cloud also helped to recognize the richness of the SHSI experience, providing students with experiences and fundamental contributions to their training process.



Figure 1. Word cloud prepared based on the students' evaluation of the SHSI.

An analysis regarding the sufficiency of theoretical topics for the practice of supervised internships in Collective Health was carried out by Leite *et al.* (2018)³³. The authors confirmed this sufficiency, however, there are contents that the students indicated that need to be studied further, such as multiprofessional work, conflict management and work tools in primary care. This is an interesting perspective of analysis, but it was not considered in the present research.

Finally, the results of the quantitative analysis revealed that 80.0% of the students rated the internship as excellent, 17.8% as very good and 2.2% as good. Again, as in the studies referred to earlier^{6,7,15,17,34}, the internship experience was positive for students.

4 CONCLUSION

Dentistry students at UP, who took the SHSI discipline in the public health system, indicated that the activities developed by them are in accordance with the provisions of the discipline's learning objectives and with the general skills described in the NCG.

RESUMO

Estágio em serviço público de saúde: percepções de estudantes de Odontologia e consonância com propostas curriculares

O estágio supervisionado em serviço público de saúde é o momento no qual o estudante pode colocar em prática toda a sua carga recebida de teoria em diferentes cenários comunitários. A proposta deste estudo foi analisar se a percepção dos estudantes do curso de Odontologia acerca dessa modalidade de estágio está de acordo com os objetivos de aprendizagem da disciplina de Estágio Supervisionado em Serviço de Saúde (ESSS) e com as Diretrizes Curriculares Nacionais (DCN). O desenho deste estudo foi o transversal quali-quantitativo. Uma amostra de conveniência contou com 135 estudantes do último ano do curso, de ambos os gêneros e turnos, que haviam concluído a disciplina de

ESSS no ano de 2018. Os participantes responderam a um questionário padrão, o qual é entregue ao término do estágio. As perguntas abertas foram analisadas por meio da análise de conteúdo proposta por Bardin e as categorias de análises foram estruturadas de acordo com as competências gerais descritas nas DCN: atenção à saúde, tomada de decisão, comunicação, liderança, administração e gerenciamento e educação permanente. A questão fechada foi analisada, quantitativamente, pela medida de frequências, em SPSS versão 21.0. Os estudantes afirmaram que puderam desenvolver habilidades e competências que corroboram o disposto nos objetivos de aprendizagem da disciplina de ESSS e nas DCN. A classificação do estágio como excelente foi feita por 80,0% dos pesquisados. Concluiu-se que a percepção dos estudantes acerca do estágio está em consonância com o proposto nos documentos que o norteiam.

Descritores: Currículo. Odontologia. Serviços de Saúde.

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