

# Evaluation of Dentist Preferences Among Children Aged 3–10 Years



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DOI 10.23804/ejpd.2025.2402

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## Abstract

**Aim** To determine children's expectations regarding their dentist preferences, considering age and sex differences, and evaluate the results in terms of their communication with dentists.

**Study Design** A cross-sectional study conducted at the Mersin University Pediatric Dentistry Clinic.

**Methods** This study included 250 paediatric patients aged 3–10 years who presented to the Mersin University Pediatric Dentistry Clinic. Patients without comprehension or speech problems who were willing to participate were selected. The questionnaire consisted of 10 questions, with age-appropriate, easy-to-understand visuals created using the artificial intelligence-assisted Midjourney program.

**Results** Children aged 3–10 years preferred a dentist of the same sex who was young, wore a white coat, greeted them while sitting down, and used protective equipment. Preference for plain or patterned uniforms differed between children aged 3–6 and 7–10 years. Although girls aged 3–6 years mostly preferred bright colours and boys preferred pale colours, children aged 7–10 years generally preferred bright colours.

**Statistics** The data were analysed using IBM SPSS Statistics version 21. Chi-square test was performed to assess differences in preferences based on age and sex.

**Conclusions** Physical appearance influences first impressions and is crucial in determining dentist preferences. In order to enhance communication and cooperation, it is recommended to consider children's preferences for a dentist who is of the same sex, young, wearing a white coat, greeting them sitting down, using protective equipment, and wearing different colours of uniforms based on age.

**KEYWORDS** dentist preferences, dentist attire, paediatric dentistry.

## Introduction

Individuals with health-related issues are typically referred to hospitals or physicians. While some individuals prioritise hospitals, others focus on selecting a physician [Yuksel, 2023]. The influence of physical appearance on first impressions has been a long-standing topic of interest for psychologists and sociologists. Children assess dentists based on their attire, mannerisms, and overall appearance before engaging in verbal communication. These factors influence their relationships with dentists and can positively impact their attitudes and preferences, increasing their comfort during treatment [Arslan and Aydinoglu, 2022]. Dental visits are often perceived as unpleasant by paediatric patients, with instances of cooperation problems occurring because of noncompliance during treatment. Their reluctance is not solely

attributable to the technical procedures involved but also emotional factors, often resulting in treatment delays and disrupted follow-up appointments. Fear of the dentist is a primary reason for disruptions in dental visits, affecting approximately 16% of school-aged children. Anxiety and fear may originate from traumatic experiences; however, establishing one-to-one communication between the dentist and the child helps minimise these concerns [Bahammam, 2019]. Effective management of fear and anxiety in paediatric patients is a major challenge for dental practitioners. A positive relationship between the child and the dentist is fundamental for successful treatment. Children's first impression of a dental practitioner and the factors that attract their attention should be carefully considered. Children demonstrate selectivity in their perception of dentists' appearances. In a study by Celine et al., children primarily focused on the dentist's mouth and facial contours, followed by clothing. Distractions from clothes affect the duration of focus [Celine et al., 2018]. Distraction can help manage children's anxiety [Rafatjou et al., 2021]. The dentist's attire serves as the first form of clinical communication with the patient. The impact of colour preference on anxiety and satisfaction levels in paediatric patients needs to be investigated. Since children distinguish colours based on sensory and perceptual factors, it is important to ascertain whether a specific colour has a beneficial effect on them [Rafatjou et al., 2021]. The efficacy of paediatric dentistry is contingent on the expertise and abilities of the practitioner, in addition to the attitudes and behaviours exhibited by the child. Fear and anxiety, the primary reasons for behavioural disorders in children, result in treatment avoidance. The mannerisms of dentists, including attire and gesticulation, can significantly impact the level of anxiety experienced by the child [Ganesh et al., 2021]. This study is important as a good patient-dentist relationship is crucial for successful paediatric dental treatment. The main factors affecting children's anxiety were the characteristics related to the dentists. Physical appearance greatly affects the first impression and is the most important factor in dentist preferences. Understanding paediatric patients' dentist preferences is essential. This study aimed to help dentists enhance communication and cooperation with patients. It examined children's expectations regarding their dentist preferences, considering age and sex differences, and evaluated the results in terms of their communication with dentists. This study is the first to investigate

whether these patients had previously visited a dentist and their perceptions and preferences regarding sex and various features of the dentist.

## Method and materials

This cross-sectional study was approved by the Mersin University Clinical Research Ethics Committee on 22 May 2024 (approval number: 2024/479) and was conducted in accordance with the Declaration of Helsinki. The study included 250 paediatric patients aged 3–10 years who visited the Mersin University Pediatric Dentistry Clinic between June and July 2024. This study included 109 girls and 141 boys who did not present with comprehension and speech problems, whose legal guardians provided informed consent, and who volunteered to participate. Children younger than 3 or older than 10 years, those who did not volunteer, whose legal guardians did not provide consent, who posed a risk of harm to others, who had an intellectual disability, or who were unable to communicate or speak were excluded. The questionnaire comprised 10 questions, beginning with the child's age, sex, previous dental attendance, and preference for the dentist's sex (four questions), followed by age-appropriate visuals that facilitate comprehension (created using the artificial intelligence-assisted Midjourney program) and evaluation of the children's opinions on the use of protective equipment, uniform greeting style (sitting or standing), dentist age (young or old), white coat use, and attire colour preferences (bright or pale) (six questions) (Figure 1).

After obtaining informed consent from all participants and

their legal guardians, the same clinician administered the questionnaire to all parents through face-to-face interviews for standardisation. Statistical analysis was performed using IBM SPSS Statistics v.21. A frequency analysis of the variables was conducted, and data were presented as numerical and percentage data. Chi-square analysis was used to examine the relationships between nominal variables. In the  $2 \times 2$  tables, Fisher's exact test was employed when the expected values in the cells were insufficiently populated; otherwise, the chi-square analysis was applied. Statistical significance was set at  $p < 0.05$ .

## Results

The participants were predominantly male (56.4%), while 43.6% were female. Of the participants, 30% were between 3 and 6 years old, and 70% were between 7 and 10 years old. While 80.8% had previously consulted a dental practitioner, 19.2% had not. While 47.2% indicated a preference for male dentists, 52.8% preferred female dentists. The majority of participants (72%) preferred dentists to use protective equipment. More than half (51.2%) favoured straight uniforms. Additionally, 60% of the participants preferred dentists to greet them while seated. A clear majority (94.8%) of participants preferred younger dentists. Most participants (79.6%) indicated a preference for dentists to wear a white coat, and 69.6% preferred bright-coloured dentists' attire. Among children aged 3–6 years who had visited a dental clinic, 92.31% of girls preferred a female dentist, while 79.31% of boys preferred a male dentist ( $p < 0.05$ ). Among the girls, 84.62% preferred bright colours, and 58.62%

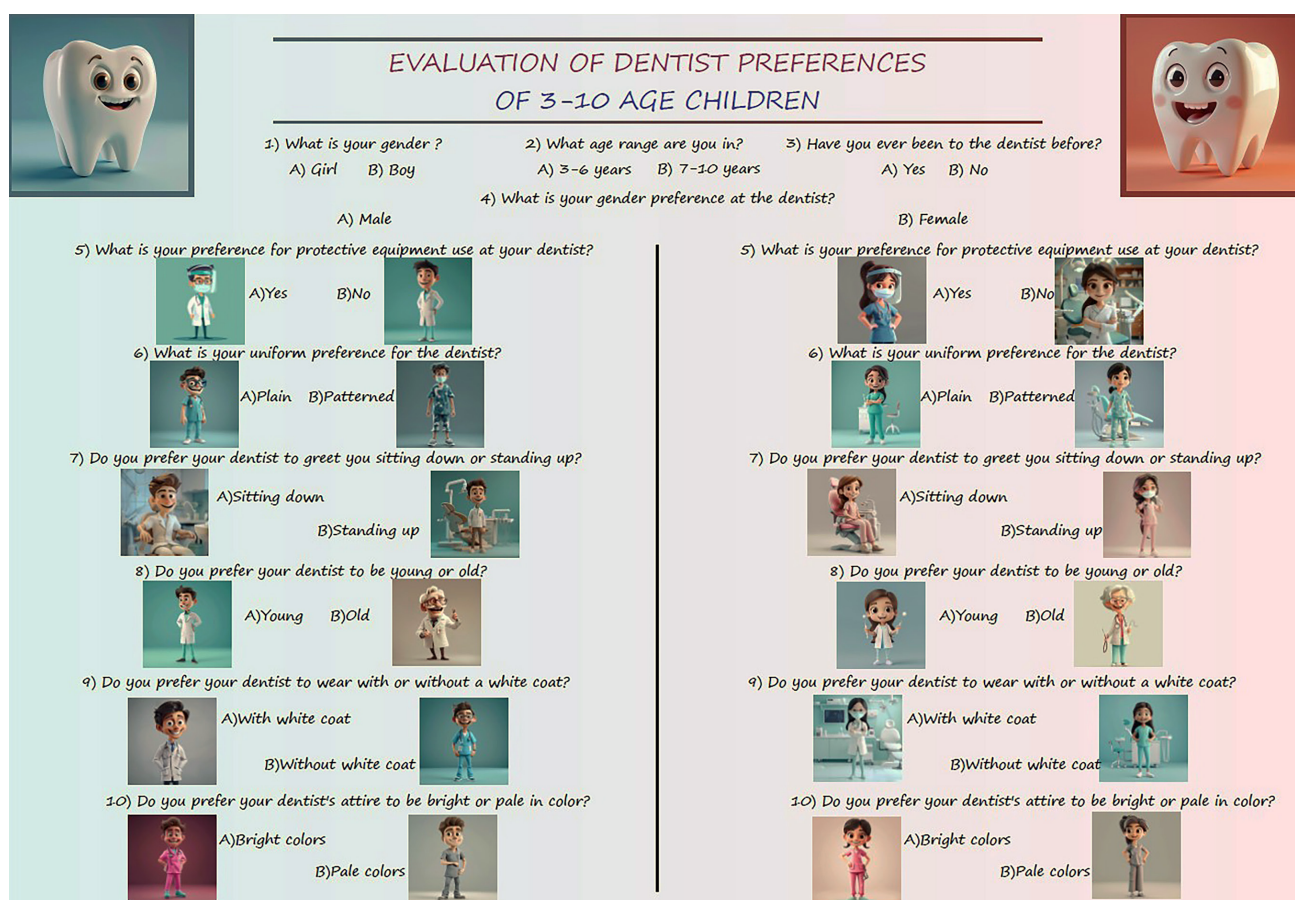


FIG. 1 Flow chart of article collection and selection

			Gender						Chi-Square Test	
			Girl		Boy		Total		Chi-Square	p
			n	%	n	%	n	%		
3-6 age group who have been to the dentist before	Gender preference at the dentist	Male	2	7.69	23	79.31	25	45.45	25.546	<b>0.001</b>
		Female	24	92.31	6	20.69	30	54.55		
		Total	26	100	29	100	55	100		
	Preference for protective equipment use at the dentist	Yes	16	61.54	17	58.62	33	60	0.001	0.999
		No	10	38.46	12	41.38	22	40		
		Total	26	100	29	100	55	100		
	Uniform preference for the dentist	Plain	9	34.62	11	37.93	20	36.36	0.001	0.999
		Patterned	17	65.38	18	62.07	35	63.64		
		Total	26	100	29	100	55	100		
	Preference for the dentist to greet for sitting down or standing up	Sitting down	20	76.92	17	58.62	37	67.27	1.337	0.248
		Standing up	6	23.08	12	41.38	18	32.73		
		Total	26	100	29	100	55	100		
	Preference for the dentist to be young or old	Young	23	88.46	26	89.66	49	89.09	Fisher's exact	0.999
		Old	3	11.54	3	10.34	6	10.91		
		Total	26	100	29	100	55	100		
	Preference for the dentist with or without a white coat	With white coat	22	84.62	18	62.07	40	72.73	2.469	0.116
		Without white coat	4	15.38	11	37.93	15	27.27		
		Total	26	100	29	100	55	100		
	Preference for the dentist's attire to be bright or pale in color	Bright colors	22	84.62	12	41.38	34	61.82	9.103	<b>0.003</b>
		Pale colors	4	15.38	17	58.62	21	38.18		
		Total	26	100	29	100	55	100		

TABLE 1. The relationship between gender and dentist preferences of paediatric patients aged 3-6 years who have been to the dentist before

			Gender						Chi-Square Test	
			Girl		Boy		Total		Chi-Square	p
			n	%	n	%	n	%		
3-6 age group who have not been to the dentist before	Gender preference at the dentist	Male	1	9.09	7	77.78	8	40	Fisher's exact	<b>0.005</b>
		Female	10	90.91	2	22.22	12	60		
		Total	11	100	9	100	20	100		
	Preference for protective equipment use at the dentist	Yes	7	63.64	6	66.67	13	65	Fisher's exact	0.999
		No	4	36.36	3	33.33	7	35		
		Total	11	100	9	100	20	100		
	Uniform preference for the dentist	Plain	6	54.55	3	33.33	9	45	Fisher's exact	0.406
		Patterned	5	45.45	6	66.67	11	55		
		Total	11	100	9	100	20	100		
	Preference for the dentist to greet for sitting down or standing up	Sitting down	10	90.91	6	66.67	16	80	Fisher's exact	0.285
		Standing up	1	9.09	3	33.33	4	20		
		Total	11	100	9	100	20	100		
	Preference for the dentist to be young or old	Young	9	81.82	8	88.89	17	85	Fisher's exact	0.999
		Old	2	18.18	1	11.11	3	15		
		Total	11	100	9	100	20	100		
	Preference for the dentist with or without a white coat	With white coat	8	72.73	6	66.67	14	70	Fisher's exact	0.999
		Without white coat	3	27.27	3	33.33	6	30		
		Total	11	100	9	100	20	100		
	Preference for the dentist's attire to be bright or pale in color	Bright colors	9	81.82	3	33.33	12	60	Fisher's exact	0.065
		Pale colors	2	18.18	6	66.67	8	40		
		Total	11	100	9	100	20	100		

TABLE 2. The relationship between gender and dentist preferences of paediatric patients aged 3-6 years who have not been to the dentist before.

			Gender						Chi-Square Test	
			Girl		Boy		Total			
			n	%	n	%	n	%	Chi-Square	p
7-10 age group who have been to the dentist before	Gender preference at the dentist	Male	10	16.95	62	70.45	72	48.98	40.463	<b>0.001</b>
		Female	49	83.05	26	29.55	75	51.02		
		Total	59	100	88	100	147	100		
	Preference for protective equipment use at the dentist	Yes	49	83.05	66	75	115	78.23	0.913	0.339
		No	10	16.95	22	25	32	21.77		
		Total	59	100	88	100	147	100		
	Uniform preference for the dentist	Plain	31	52.54	56	63.64	87	59.18	1.8	0.18
		Patterned	28	47.46	32	36.36	60	40.82		
		Total	59	100	88	100	147	100		
	Preference for the dentist to greet for sitting down or standing up	Sitting	35	59.32	43	48.86	78	53.06	1.551	0.213
		Standing	24	40.68	45	51.14	69	46.94		
		Total	59	100	88	100	147	100		
	Preference for the dentist to be young or old	Young	58	98.31	86	97.73	144	97.96	Fisher's exact	0.999
		Old	1	1.69	2	2.27	3	2.04		
		Total	59	100	88	100	147	100		
	Preference for the dentist with or without a white coat	With white coat	52	88.14	69	78.41	121	82.31	1.676	0.196
		Without white coat	7	11.86	19	21.59	26	17.69		
		Total	59	100	88	100	147	100		
	Preference for the dentist's attire to be bright or pale in color	Bright colors	51	86.44	54	61.36	105	71.43	10.883	<b>0.001</b>
		Pale colors	8	13.56	34	38.64	42	28.57		
		Total	59	100	88	100	147	100		

TABLE 3. The relationship between gender and dentist preferences of paediatric patients aged 7-10 years who have been to the dentist before

			Gender						Chi-Square Test	
			Girl		Boy		Total			
			n	%	n	%	n	%	Chi-Square	p
7-10 age group who have not been to the dentist before	Gender preference at the dentist	Male	0	0	13	86.67	13	46.43	Fisher's exact	<b>0.001</b>
		Female	13	100	2	13.33	15	53.57		
		Total	13	100	15	100	28	100		
	Preference for protective equipment use at the dentist	Yes	10	76.92	9	60	19	67.86	Fisher's exact	0.435
		No	3	23.08	6	40	9	32.14		
		Total	13	100	15	100	28	100		
	Dentist uniform preference	Plain	3	23.08	9	60	12	42.86	2.516	0.113
		Patterned	10	76.92	6	40	16	57.14		
		Total	13	100	15	100	28	100		
	Preference for the dentist to greet for sitting down or standing up	Sitting	10	76.92	9	60	19	67.86	Fisher's exact	0.435
		Standing	3	23.08	6	40	9	32.14		
		Total	13	100	15	100	28	100		
	Preference for the dentist to be young or old	Young	12	92.31	15	100	27	96.43	Fisher's exact	0.464
		Old	1	7.69	0	0	1	3.57		
		Total	13	100	15	100	28	100		
	Preference for the dentist with or without a white coat	With white coat	11	84.62	13	86.67	24	85.71	Fisher's exact	0.999
		Without white coat	2	15.38	2	13.33	4	14.29		
		Total	13	100	15	100	28	100		
	Preference for the dentist's attire to be bright or pale in color	Bright colors	13	100	10	66.67	23	82.14	Fisher's exact	<b>0.044</b>
		Pale colors	0	0	5	33.33	5	17.86		
		Total	13	100	15	100	28	100		

TABLE 4. The relationship between gender and dentist preferences of paediatric patients aged 7-10 years who have not been to the dentist before



preferred pale colours ( $p < 0.05$ ). Conversely, among those who had not visited a dental clinic, 90.91% of girls preferred female dentists, and 77.78% of boys preferred male dentists ( $p < 0.05$ ). Among children aged 7–10 years who had previously visited a dentist, 83.05% of the girls preferred a female dentist, while 70.45% of the boys preferred a male dentist ( $p < 0.05$ ). Additionally, 86.44% of girls and 61.36% of boys preferred bright-coloured dentist's attire ( $p < 0.05$ ). Conversely, among those who had not visited a dentist, all girls and 86.67% of boys preferred a female dentist and a male dentist, respectively ( $p < 0.05$ ). All girls and 66.67% of the boys in this group preferred bright-coloured dentists' attire ( $p < 0.05$ ).

## Discussion

Effective patient-physician communication and consideration of patient preferences in decisions pertaining to the treatment process, including physician selection, have been demonstrated to enhance treatment efficacy [Bailo et al., 2019]. The divergence in dentist preferences can be attributed to multiple internal and external factors, including sociodemographics, individual tendencies, psychological factors, environmental influences, and contextual factors [Monzani et al., 2020]. After the COVID-19 pandemic, institutions and organisations worldwide have updated their guidelines for dental treatments, emphasising personal protective equipment. Additional measures, such as the use of non-disposable respirators for aerosol-generating procedures, have been recommended [Kumar et al., 2021]. A study of 52 children aged 6–10 years examined the relationship between the use of different types of respirators, traditional protective equipment in dental clinics, and children's anxiety levels. The findings showed no significant change in anxiety levels associated with the use of different types of protective equipment in dental clinics. However, a correlation was observed between sex, previous dental visits, and anxiety levels [Azab, 2022]. The white coat has become a symbol for health personnel and reflects the scientific nature of treatment [Bahammam, 2019]. A study of 597 patients reported that male and female physicians preferred wearing a white coat because they believed it represented trust and professionalism [Alarcin et al., 2021]. In a study conducted with 202 children aged 9–12 years, most preferred that the physician wear a white coat and use protective equipment, such as face masks and goggles [Bahammam, 2019]. Similarly, in this study, 79.6% of participants preferred physicians to wear white coats, and 72% preferred the use of protective equipment by physicians. White coat syndrome refers to high blood pressure caused by the anxiety a patient experiences when seeing a doctor in a white coat. Therefore, white coats can evoke unpleasant feelings in some people [Pioli et al., 2018]. Child-friendly or paediatric dentist attire, such as colourful scrubs and patterned outfits with cartoon-like characters, is more engaging and less intimidating for paediatric patients, helping to create a more comfortable working environment [Ahmad et al., 2024]. A study examining the relationship between physician attire preferences and anxiety levels in 80 paediatric patients aged 5–12 years reported that child-friendly clothing significantly reduced anxiety levels, with boys mostly choosing blue scrubs and girls preferring pink scrubs [Sujatha et al., 2021]. In a study conducted with 148 children aged 4–6 years, 81.2% of children preferred coloured rather than white coats, and 54.6% preferred male physicians [Mohebbi et al., 2022]. A study of 120 paediatric patients aged 6–12 years showed that the dentist's attire had an impact on children's anxiety, with a preference for child-

friendly attire [Ahmad et al., 2024]. In this study, 69.6% of participants preferred bright-coloured dentist attire. Unlike other studies, a study conducted with 120 children aged 7–12 years reported that age, sex, and previous dental experience did not significantly influence children's preference for a dentist; however, child-friendly attire was preferred over a completely white coat [de Amorim et al., 2021]. A meta-analysis evaluating children's perceptions of dentist attire and environment found no significant difference in preference between white coats and paediatric attire; however, children preferred a decorated dental clinic [Oliveira et al., 2020]. A study of 132 children aged 6–9 years investigated the relationship between colour preference and anxiety levels. The findings indicated that children exhibited the lowest anxiety levels in blue and pink clinical environments and the highest in black and red, highlighting the importance of colour considerations in clinic design [Rafatjou et al., 2021]. In another study on dentist attire preference across different age groups, 35.3% of children aged 4–5 years preferred aprons with cartoon-character patterns, while 65.3% of children aged 12–14 years preferred white aprons [Babaji et al., 2018]. A study of 153 patients evaluated the influence of sociodemographic and psychological factors on the preferred sex of physicians. The findings indicated that sex plays an important role in shaping the patient-physician relationship, communication, and physician preferences. Notably, sex congruence in patient-physician interactions positively affects communication and patient satisfaction [Monzani et al., 2020]. In a study involving 250 children aged 6–12 years, children preferred dentists of the same sex. Children with high anxiety levels preferred cartoon-printed shirts, whereas those with low anxiety levels preferred white aprons, leading to a recommendation for colourful, cartoon-patterned attire to reduce anxiety [Arslan and Aydinoglu, 2022]. Additionally, a study of 384 children aged 4–15 years reported that younger children preferred physicians of the same sex; however, this preference diminished with age, and primarily, white coats and cartoon-patterned uniforms were preferred [Sanguida et al., 2019]. A meta-analysis of 5756 individuals aged 2–15 years examined children's and adolescents' preferences for dentist attire. The findings indicated a general preference for female dentists across all age groups, regardless of sex. However, paediatric attire was preferred, especially by anxious children and adolescents, though no significant overall difference was observed [Kastelic et al., 2021].

## Conclusion

A good patient-dentist relationship positively affects clinical outcomes, particularly in paediatric dentistry, where communication is crucial for treatment quality. Dentists' characteristics influence anxiety in children, making it necessary to understand patients and their preferences. Physical appearance, which affects the first impression of dentists, is important. Considering that children commonly prefer dentists of the same sex and younger age, as well as those who wear a white coat, greet them while seated, use protective equipment, and wear uniforms of varying styles and colours based on their age, efforts should be made to enhance their cooperation with dentists and utilisation of paediatric dentistry services.

## Declarations

### Ethics approval and consent to participate

This study received ethics committee approval from Mersin

University Clinical Research Ethics Committee with the decision dated 22.05.2024 and numbered 2024/479. Informed consent to participate was obtained from the parents or legal guardians of any participant.

#### Consent for publication

Not applicable.

#### Use of AI and AI-assisted Technologies

The survey was created with the support of visuals created with the artificial intelligence assisted Midjourney program in order to facilitate the understanding of the questions by young paediatric patients.

#### Availability of data and materials

Not applicable.

#### Competing of interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

#### Funding

No funding.

#### Authors' Contributions

Meryem Sahin, contributed to conception, design, data acquisition, analysis, and interpretation, drafted and critically revised the manuscript. The author gave final approval and agree to be accountable for all aspects of the work. Oyku Peker Gonulal, contributed to conception, interpretation, drafted and critically revised the manuscript. The author gave final approval and agree to be accountable for all aspects of the work. All authors gave their final approval and agree to be accountable for all aspects of the work.

#### Acknowledgements

Study participants are gratefully acknowledged.

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