

Sherry Blair

Make it more than Just a Cleaning

You can watch any team member that has been trained around philosophies and systems cringe when they hear a patient say "well, it's just a cleaning." However, dentistry in general has trained our patients to think that way. Therefore, because you are a Comprehensive Physiological Dental Practice, you might want to consider retraining your patients. Want to know where to start? Implement a clinical system around your comprehensive philosophy and take the time to create value with your patients around that system.

All comprehensive practices will do six screenings for their patients.

Define them, educate your patients as to why you do them, do them in the order you introduced them, educate the patients about the findings of those screenings in the order you did them, and then (existing patients) hand off to your Doctor the information from the screenings in the same order. Voila, you now have a system.



A systems approach will eliminate generalized solutions, seat-of-the-pants operations, employee discretion and everything else left to chance.

Screening # 1 - Risk Assessment

Stop with the "medical history" stuff that was brought into dentistry a hundred years ago with the simple information that kept us from killing our patients. Science has shown us so much more about the mouth/body connection. Change your mind set when approaching their health questions; what is this patient at risk for? Create value around this screening by letting them know that their mouth is a window to their entire health.

Screening # 2 - Head and Neck Oral Cancer

All doctors and hygienists were taught to perform head and neck and oral cancer exams in school. Then we advance to the busy every day, real life dental practice where it gets shortened to the intra oral cancer screening. When did that become okay? PLEASE let your patients know why you do this screening for them! One person every hour dies from oral cancer in the United States. It is our job to educate the public with this statistic.

Screening # 3 - Airway

Oxygen is pretty important for our bodies. 80% of sleep apnea goes undiagnosed and death rate triples for sleep apnea sufferers.

Screening # 4 - Occlusal

Please don't confuse your patients with all of your Physiologic knowledge until the proper time. Simply let them know we will be checking to see if the joint, muscles and teeth are all working in harmony together.

Screening # 5- Restorative

Educate your patients about the fact that we will be checking for active decay and broken down dentistry and by the way those usually go hand and hand.

Screening # 6 - Periodontal

80% of the population has some kind of periodontal disease and this disease is linked to heart disease, diabetes, low birth weight babies, cancer and the list goes on and on.

The entire team must memorize all six screenings in the correct order because it is the foundation of being a comprehensive practice. And in order to set your practice apart from any other practice we will first introduce these screenings during the New Patient phone call. "Mr. Patient, Dr. Jones loves to spend time getting to know her patients and she is very comprehensive. In addition to your cleaning and x-rays she will be doing six screenings for you at your new patient experience and off we go identifying those screenings and creating value around why we do them."

These screenings are always done by the Doctor at the new patient experience and by the hygienist at each and every continuing care visit. Let's adopt the medical model when it comes to repetition concerning exams and screenings. I don't care how many times I go to a physician, they always do the same thing, take my blood pressure, get my weight and do the blood test. Why are we any different? We always do our six screens each and every visit.

By the way, has every member (yes, you too Doctors) been through these screenings? Do we have consistency and continuity with each and every screening? I can't even begin to tell you how we will chip away at the trust of our patients if we are all doing the screenings in a different way. So first and foremost train your team why and how we are doing these screenings. They have to first see and feel the value in something before they can pass that value along to the patients with passion.

In addition to clinical systems you will want to consider your business systems. In order for your clinical systems to work you must have proper stress free scheduling, know how to present financials dealing with insurance objections, mastering the correct communication, and on and on. Michael Gerber said, "Organize around business functions, not people. Build systems within each business function. Let systems run the business and people run the systems. People come and go but the systems remain constant" (E-Myth Revisited). Do whatever it takes to get your team trained on business systems or don't expect your clinical systems to work.

Oh and by the way we will clean your teeth too.

Patient Centered Systems

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nosefacts

Anosmia is the inability to smell.