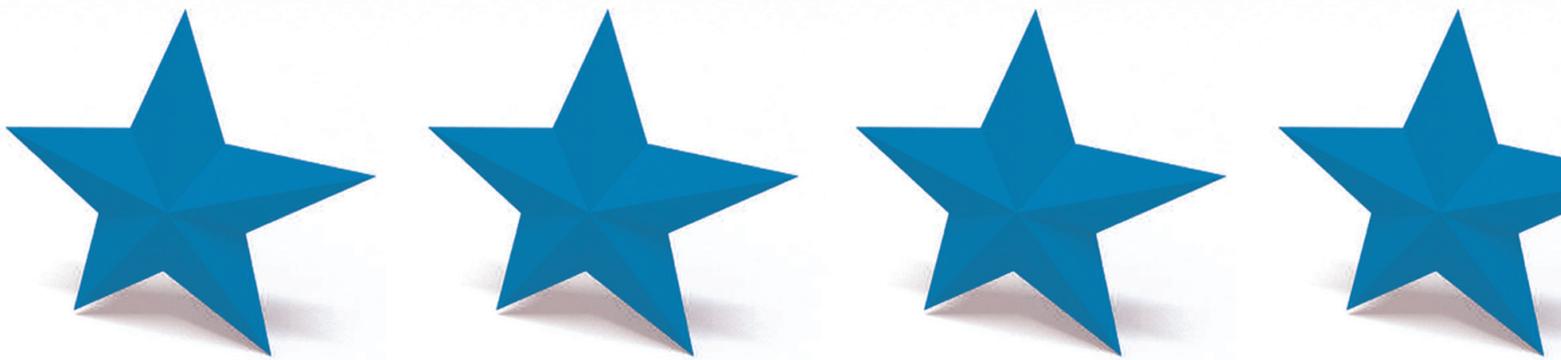


# A five star experience: part two

**Ashish Parmar** examines the stages after the new patient has had a comprehensive dental assessment leading up to the case presentation appointment



In this second of three articles, I will be reviewing the stages after the new patient has had a comprehensive dental assessment leading up to the case presentation appointment, which is the appointment when the treatment plan options and fees are discussed (normally within a week after the assessment appointment).

Once again, the treatment co-ordinator (TCO) plays a vital role in all the stages of the new patient experience.

## Comprehensive dental assessment

We carry out a very detailed initial assessment at the practice, which takes the dentist approximately 1.5 hours to do. The following are recorded:

- Visual assessment of posture and the head position
- Clinical assessment of the TMJ and the facial muscles
- Detailed intra-oral examination (soft tissues, occlusion, teeth, periodontal, etc)
- Dental charting on computer software (Software of Excellence)

- Six point pocket (periodontal) charting
- Smile analysis (detailed review of all cosmetic parameters)
- Joint vibration analysis (TMJ evaluation)
- T-scan record (initial computerised bite records)
- Upper and lower alginates for baseline study models.

In addition, a full series of digital photographs, a dental panoramic tomograph, bitewing and appropriate periapical radiographs would also have been done. I would recommend at the full assessment visit:

- Co-discover the problems in the mouth. It is important to get the patient involved in the assessment so that they begin to understand the problems they have. I use the patient's clinical photographs on the screen that is mounted on the dental chair to educate and explain
- Understand the most important objectives the patient has, i.e. is the main motivating factor health and function, or the appearance?
- It is also vital to overcome objections at this stage. For example, if someone

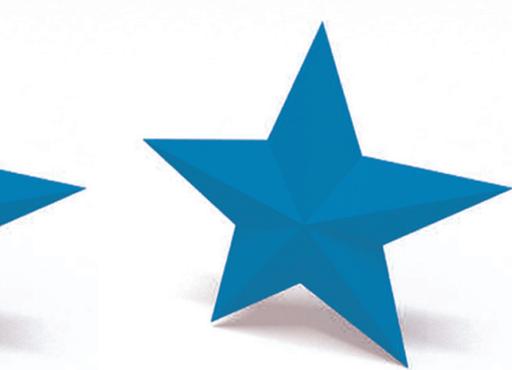
were scared of injections, then I would explain to them that we have different strengths of local anaesthetic (that is warmed up and injected very slowly). We would also show the patient the powerful topical anaesthetic that is placed on the gum for a few minutes before the injection is given. We explain about the relaxing music, calm environment, aromatherapy, etc. In this way, the patient feels more at ease about having future treatment

- Give the patient relevant information sheets to take home before they leave. You can also refer the patient to certain specific pages on your website before they return for the case presentation appointment. This extra information will help the patient understand things more, and therefore make a better informed decision regarding the choice of treatment they wish to have.

Once all the diagnostic data is gathered, it is important to review the key approaches to dental treatment and ask the patient for their budget for the dental care. Based on the

patient's budget, and goals/needs, we can then work out an appropriate treatment plan, with alternative options.

If you are not clear about the patient's budget before they leave the full assessment appointment, then it will not be easy to plan a relevant treatment plan for the patient. If there are multiple problems then it is important to conceptually explain the whole treatment plan, but offer to do things in stages.



The dentist can then end with the following verbal skills for an invitation to a consultation:

'Sarah, I need to evaluate the information we have gathered today so that I can develop a treatment plan specifically for you that meets your needs. I would like to invite you back to the practice within a week for a complimentary consultation appointment. We can then sit down together one-on-one and discuss your particular situation and my treatment recommendations. I will also type out a professional report for you detailing everything about your mouth; this acts as an excellent record of your dental condition and treatment options. Sarah, is there anyone besides yourself who will be involved with deciding what treatment you have? Your husband? Great. Then let's schedule a consultation appointment that will work for both of you. I think it is very important that he hears the recommendations that I will be making for your treatment. Would it be OK for you to ask him to come along to the important consultation visit next time?'

**'The dentist has an ethical responsibility to offer the patient the ideal treatment plan based on their goals, needs/wants and budget.'**

If the decision maker is someone other than the patient (i.e. someone else is paying for the treatment), then it is essential that this person also attends the next appointment.

### Before the case presentation visit

The dentist then needs to review all the diagnostic data and create the ideal treatment plan, with alternative options. The TCO then enters these treatment plans on the computer.

The dentist needs to review the accuracy of the treatment plans with respect to the times required for the appointments, the fees, and the sequence of appointments.

The TCO can then print off the estimates, which the dentist should double check for accuracy. I also initial the estimates so that I know they are accurate and have been verified by me. The TCO would also collect together all the consent sheets ready in a folder for the patient.

The other important task the TCO has to do is to create a PowerPoint of the patient's photographs, OPG radiograph, annotations, etc. If you have treated similar cases and have a comparison case with photographs, this can also be added in to the PowerPoint. This is a very professional and, more importantly, a visual way to communicate with the patient. The photograph sequence that my TCO uses is:

- Introduction slide (practice name and patient name)
- Upper occlusal
- Lower occlusal
- Face
- At rest
- Full smile (anterior)
- Full smile (RHS)

- Full smile (LHS)
- Anterior retracted
- Comparative case photo
- Anterior retracted.

Note that we end with the anterior retracted picture on the screen for the maximum impact to the patient.

The dentist and TCO would also have planned carefully which demonstration aids (e.g. crown and bridge model, implants model, gum disease flip chart, Guru computer software) are required at the case presentation appointment. It is really important to be fully organised and clear what the dentist wants before the actual case presentation appointment. This will allow the dentist to feel confident, organised and well prepared for the discussion with the patient. This is especially important for bigger cases such as smile makeovers and implants.

My TCO highlights important things on my clinical assessment documents so that these facts will stand out when I am presenting the treatment plan to the patient.

### Summary

The dentist has an ethical responsibility to offer the patient the ideal treatment plan based on their goals, needs/wants and budget. All alternative treatment options should be planned for and discussed, with written estimates. The TCO also has many important roles in supporting the dentist after the clinical assessment appointment and before the patient returns for the case presentation appointment. The next and final article in this series will focus on the actual all-important case presentation appointment. **PD**

### Comments to [pd@fmc.co.uk](mailto:pd@fmc.co.uk)

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