

TROJANTODAY

VOLUME 19 ISSUE 08 **AUGUST** 2017

A NEWSLETTER FOR CLIENTS OF TROJAN PROFESSIONAL SERVICES, INC.

A POSITIVE SPIN

ON
Appointments
AND
Periodontal
Intervention

by Janelle Storck

Calls to schedule recare and hygiene appointments are the most frequent outgoing calls in dental offices. How the front desk handles those calls is paramount to creating a full and productive hygiene schedule. How do you explain the need for ongoing care, hygiene appointments, and perio exams? Certain situations became commonplace, and after thirty years of work in dental offices, I developed a way to let a patient (or parent) know what's happening without using technical dental terms that may be too in-depth or "scary". We share this wording to help guide you through the process of explaining scaling and root planing in user-friendly words and phrases.

Never be caught saying, "We don't have available appointments on the day you want to come in."

Know your schedule before you offer an appointment. Take control of the situation and offer options that work for your schedule. It's okay to ask for preferences, but don't paint yourself in a corner with no options other than a negative response. Ask simple, open-ended questions such as:

*"Do you prefer mornings or afternoons?
Great, we have a morning appointment on Tuesday or Thursday; which of these works best for you?"*



But, of course, the process starts before the phone call. Don't start with the statement, "You need scaling and root planing."

Instead, during a thorough periodontal exam, show the patient the amount of bleeding, using intra oral photos, pocket depth, x-rays showing bone loss, etc. Explain the need for periodontal intervention and what that is and why it's needed:

"During your perio exam today, we discovered pocket depths over 4mm and bleeding. (Note severity: generalized, moderate, etc.) This signals periodontal disease is beginning and you are starting to lose supporting bone structure around your teeth. If we leave this untreated, it can lead to more severe bone loss and eventually tooth loss. This obviously didn't happen overnight and you're not going to lose your teeth overnight either; but just as your primary care doctor would let you know if your blood pressure was beginning to show signs of needing treatment, it is our responsibility to inform you of the same with your teeth. We know this type of bleeding and unhealthy pocket depths signal not only bone loss but future consequences for your teeth and appearance, as well as general health problems and bad breath. We can help you control and prevent your periodontal disease from getting worse by reducing the bacteria around your teeth and gums, which in turn will allow your home care efforts to be successful. This treatment consists of a procedure called scaling and root planing and can be accomplished in (# of visits). Our patients have great success with treatment when we catch this disease early like we have in your case and we expect the same results for you with your understanding and agreement to work on your home care regime like we discussed."

You can give the patient information about perio disease as well as detailed home care instructions, and then introduce the patient to the treatment coordinator to schedule the necessary appointments. If a patient asks (and they usually do), "Will my insurance cover this?" you can tell them: "Scaling and root planing are often covered by insurance. Our team will help you receive the benefits you have with your insurance."



If the patient asks, "How did I get this disease?" or "Why wasn't this explained to me before?" the best answer is: *"You have had bleeding and pocketing before, but as discussed at previous appointments, we had hoped your own home care and regular hygiene appointments might have worked to prevent it from getting worse. Unfortunately, that hasn't happened, and we need to take control of this disease now before it gets any worse. We can't ethically sit by and watch your disease progress and not do anything about it because your overall health is important to us and we want to treat you accordingly."*

No cavities, Mom!

A child's situation needs to be handled individually, but here are two basic options you can tweak:

If the child is doing great:

"Teeth and gums look healthy today. I think it is a great combination of your bringing your child in to see us every six months and continuing the great home care that keeps a kid healthy."

If the child is not doing well with home care but has no cavities currently: *"Gums don't look as healthy today as we would like to see. Luckily, there aren't any cavities that were detectable with examination and x-rays, but if your child continues down this path of poor home care, there is a strong possibility we will be discussing a different situation at the next visit. Because we care about overall health and having healthy teeth and gums for a lifetime, we strongly recommend (any treatment) and we will continue to monitor regularly at hygiene appointments."*

How we deliver information to our patients is just as important as the dental care we provide. We want them to understand what's happening with dental care, know their health is our priority, and ensure they leave with a thorough understanding of the scheduled treatment.



Janelle Storck is the Chief Operating Officer for Front Office Rocks, the leader in web-based front office training for dental practices.

FMI: 800.914.3595 x102 or www.FrontOfficeRocks.com