

# MANAGEMENT & MARKETING

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*(Editor's Note: This quarterly JCO column is compiled by Contributing Editor Howard Iba. Every three months, Dr. Iba presents a successful approach or strategy for a particular aspect of practice management. Your suggestions for future topics or authors are welcome.)*

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After a few years of experience, every orthodontist discovers that cases prolonged beyond their estimated treatment times create a substantial drain on time and profits. Equally important, extended treatment causes disappointment and frustration for patients and parents. Most of us spend considerable time and money on marketing efforts, but we sometimes forget that meeting or exceeding the expectations of the patient is one of our most powerful referral tools.

In this month's column, Dr. Gerald Phipps gives us his seven keys to finishing treatment on time. I was especially pleased to see his "orthodontic contract" for patients. This is a tangible way to help adolescents begin to take responsibility for the outcomes of their own behavior, both positive and negative. I applaud the efforts of Dr. Phipps and his staff in that direction, as well as their standard of completing 97% of their cases on time. Establishing a system for finishing on time or ahead of schedule is one of the best ways to enhance the bottom line, both financially and emotionally.

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Dr. Iba



Dr. Phipps

## Seven Keys to On-Time Finishing

**T**he best way to promote an orthodontic practice is to make sure our patients smile those beautiful smiles. Nothing makes them smile more than getting their braces off on time, but it can be a challenge to fulfill patients' desire to finish treatment while still achieving the professional goal of excellent esthetics and occlusion.

Over the years, my staff and I have implemented a series of systems that allow us to maintain a 97% on-time completion rate. These are offered as our seven keys to on-time finishing.

### 1. Appropriate Diagnosis and Treatment Planning

Do it right, from the start. As we are all taught in residency, a carefully assessed diagnosis, combined with a well-designed and properly implemented treatment plan, is the orthodontist's best tool. Although the popular trend is toward streamlining this process, what little time is saved by shortcutting the diagnosis or relying on spontaneous treatment planning is soon lost in extended treatment times, compounded by unhappy patients.

Take the time necessary for a thorough examination and evaluation of records. Cephalometric analysis is still indispensable for evaluating dentofacial proportions, growth patterns, tooth positions, and the need for anchorage, extraction, orthopedics, or surgery.

Design and follow a treatment plan that effectively utilizes each patient visit and is sufficiently detailed to allow you and the staff to determine where you are at any given time. The



**Fig. 1** Dr. Phipps reviewing progress panorex during chairside mini-consultation.

more thorough the plan, the easier it is to assess progress and appropriately respond to inquiries about treatment time.

Resist the temptation to start treatment before the optimum time. In most cases, treatment should be delayed until the second molars have erupted, to avoid the unpleasant surprise of ectopic eruption during the finishing stages.

### 2. Efficient Appliances

Become proficient with appliances and techniques that minimize the need for patient compliance and maximize the physiology of tooth movement: self-ligating brackets, fixed distalizing appliances, wires with shape memory and superelasticity, microetched bands cemented with modified glass ionomer cements, light-cured adhesives with bond enhancers. Take advantage of the latest in orthodontic science and technology to benefit your patients and practice.

Relying on a retainer or positioner to finish the case and settle the final occlusion does not qualify as finishing on time, since the results and time required can vary. Finish the case in fixed appliances so you can be certain to complete the correction and “sock in” the occlusion. Then, if you prefer, use a positioner to maximize an already great finish.

### 3. Realistic Treatment Time Estimates

In my 16 years of private practice, I can recall only one patient who did not want her braces removed yesterday. Most patients count the days beyond the estimated treatment time with the desperation of shipwrecked sailors, constantly appealing to be rescued. With that in mind, promise only what you know you can

deliver. It is far better to estimate a longer treatment time and finish early than to go beyond the estimate and repeatedly confront the question, “When do I get my braces off?” Once you exceed what patients perceive to be the acceptable limit of treatment time, they are far less inclined to participate at the level of cooperation necessary to achieve additional treatment objectives.

Coordinate your efforts to keep treatment on schedule, frequently inform patients about treatment progress, and finish treatment before they lose interest. In my practice, to constantly remind us where we are in treatment, we include a box in the corner of the treatment card listing the start date, midway point (for progress review), and completion date.

### 4. Progress Reviews

All patients and parents should be given frequent progress updates. Their feedback helps us remain accountable to our treatment plans and estimates of treatment time.

Except in short-term, limited cases, we provide a more thorough progress review midway through treatment. This consists of a mini-consultation at chairside, with the aid of a current panorex (Fig. 1). The radiograph is used to assess bracket positions, discuss third molar status, and screen for abnormalities. Marginal ridge heights and root positions are evaluated, and brackets are debonded and rebonded to correct any discrepancies. The mini-consult, which usually takes about one minute, is used to reevaluate the original treatment plan and update the patients and parents on treatment progress (or lack thereof), compliance, and the current estimate of treatment time. These routine reviews are also critical in identifying problem patients.

Patients who demonstrate excessive breakage, consistent poor oral hygiene, or chronic missed appointments must be dealt with early and effectively, before it's too late. In most cases, associating a lack of progress with an extension of treatment is sufficient to improve behavior. Still, we all encounter patients who, for whatever reason, either don't get it or just don't care. In my

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**ORTHODONTIC CONTRACT**

This is an agreement made this day between Dr. Phipps and me.

I know that the success of my orthodontics is dependent on my being a full partner in the treatment. I agree to take care of my braces and cooperate in the following ways:

- 1) Keeping my teeth and appliances clean by thoroughly brushing twice a day.
- 2) Avoiding foods that are too hard or sticky that may break my braces.
- 3) Closely following directions about wearing rubber bands or other appliances that might be prescribed.
- 4) Keeping my appointments and arriving on time.

If at any time I change my mind about this agreement, I will tell Dr. Phipps about my decision.

While this agreement is not a legal document because of my age, I realize that I am the only person that can accept responsibility for my orthodontic treatment.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
Witness \_\_\_\_\_

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520 SOUTH COWLEY - SPOKANE, WA 99202-1395  
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**Fig. 2 Contract signed by each child or adolescent patient.**

experience, the sooner we conclude treatment of these patients, the better. This may mean removing appliances with the understanding and expectation that additional treatment will be necessary in the future. I have found that when the termination can be negotiated with sufficient tact and understanding, most of these former problem patients will return a few years later with a renewed conviction to complete the process.

## 5. Patient Incentives

Adult patients are motivated simply because they are financially bound to the treatment

and, within the confines of what's reasonable and possible, want the agreed-upon results as soon as possible. Children and adolescents, on the other hand, require a greater effort. Because we don't always know exactly what will ignite younger patients' interest and impel them to cooperate, in my office we use two incentive programs to help ensure success.

We ask our younger patients to read and sign an Orthodontic Contract that communicates the need for compliance to achieve an acceptable outcome (Fig. 2). Although the "contract" is not binding, it helps us characterize treatment as a partnership and thus share the responsibility of

### THE GREAT PATIENT RAFFLE

Once a month, Dr. Phipps will draw five names from our raffle basket of GREAT PATIENTS. Each person whose name is drawn will receive a \$50 cash prize.

Here's how it works: To be included in the monthly GREAT PATIENT RAFFLE, you will need to earn three credits. To earn credits, follow these rules:

1. Be on time for your appointment.
2. No broken or failed appointments.
3. Have clean teeth and healthy gums.
4. Wear appliances and rubber bands, as instructed.
5. Nothing loose, broken, or lost.

When you do all of the above, you will earn one credit. Once you have earned three credits, you will receive a raffle ticket for our monthly drawing. With a little effort, you should be able to participate in several drawings throughout your treatment.  
GOOD LUCK!!!

**Fig. 3 The Great Patient Raffle incentive for patient cooperation.**

treatment with the patient.

In addition, all patients, including adults, participate in our Great Patient Raffle (Fig. 3). At each appointment we grade the patient on keeping appointments, following instructions, and maintaining good oral hygiene and appliance care. The patient receives either an X (good) or an O (not good enough). Whenever a patient has accumulated three Xs, his or her name goes into a monthly drawing, in which five patients each win \$50 cash. After trying and abandoning several less effective and more costly incentive programs, we have found the Great Patient Raffle to be a winner. The majority of patients are sufficiently motivated, and costs are fixed.

### 6. Practice Management Software

Information technology can have a huge impact on how you manage your practice. When you select the appropriate software and use it properly, it can help you effectively monitor all areas of the office, including on-time finishing.

Sixteen years ago, a consultant advised me to purchase Orthotrac\* as my management software, and, while there are comparable orthodontic systems on the market, I am still an Orthotrac Classic user. The software allows us to create and print reports of patients without appointments and patients beyond their completion dates.

\*PracticeWorks, 1765 The Exchange, Atlanta, GA 30339.

\*\*Trademark of TeleVox Software, Inc., 1210 Hillcrest Road, Mobile, AL 36695.

These functions alone have justified our investment. In addition, computer-generated appointment reminders (HouseCalls\*\*) have substantially reduced our missed appointments.

### 7. Making It a Priority

As with any goal, the best way to accomplish it is to set your sights in that direction. Make on-time finishing a priority in your practice, and concentrate your efforts on making it happen.

Identify the systems in your office that need improvement, make the necessary changes, and monitor your progress. Share your vision of consistent on-time finishing with your staff, and provide the training needed to achieve that goal. Since each patient has a limited number of visits, it is critical that the staff understand the importance of effectively using each appointment to keep treatment on track. With the entire team on board, success is inevitable.

The effort and time required to finish treatment on time should be treated as an investment; it may not always be simple or pleasant, but the payoff can be huge. When we can provide excellent results in the promised time, we make our patients smile those beautiful smiles, and they become missionaries for our practices.

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