

HOW TO PROFIT FROM...lasers

Glenn A. MacFarlane, DMD

Patients expect to have the best dentistry done in their mouths — heck, all of us should have taken clinical courses on providing supreme restorations for our patients. My clients don't worry about tight marginal fits, gorgeous anatomy, superior esthetics — that's my bag! They know it works and that's it.

What patients don't expect is comfortably pleasing dentistry. This is the dentistry done with new "less" technologies from us, as in pain-less, needle-less, drill-less, and blood-less. Ask most people and they will tell you, "I hate going to [who] the dentist [why] because of the things he does needlessly."

To incorporate new technologies into your practice, you must have a shift in your thought processes from "How can I afford this new technology" to "How can I afford not to have this new technology?" One such technology which keeps getting better and more patient-friendly is dental lasers. Two laser types, the diode laser for soft tissue and caries detection and the water laser for both hard- and soft-tissue applications, are used extensively in my practices. I use the DIAGNOdent by KaVo, the only diode-based, fluorescence caries detector.

Before ever picking up the laser handpieces, my offices established four criteria that needed to be met for total patient comfort and maximum investment return.

Criteria No. 1: Comfort for the patient

For a patient to experience true comfort during a laser procedure, the doctor must implement a clinical paradigm shift. You must now approach procedures from the standpoint of conservative care, and microdentistry fills the bill. The ability of lasers to find incipient decay and the fact that composites and porcelains can bond to nonconventional preps means less tooth removal. The elimination of scalpels, sutures, and anesthesia allows me to do minimally invasive soft-tissue procedures, such as a frenectomy or gingivoplasty, with little, if any, discomfort during or after the procedure.

An additional and critical part of this criteria is your focus on little details that show patients you care. These are the special support systems provided to occupy them while they are in your chair. I see these as necessities, rather than considerations, because they add "character" to the gentle laser experience and give your clients more to talk about

when they mention your laser to others. My system is "universal" and used for all dental procedures. It includes a heated chair massager (Homedics makes the best), stereo headphones, dark goggles, and a fleece blanket. When needed, my favorite assistant, PAM, is employed for the day (lorazaPAM, diazePAM, etc.). After every procedure, the patient is given a warm face towel and we confirm that the procedure was comfortable for them.

Criteria No. 2: Quality of treatment (Accuracy, precision, and predictability)

One goal I have set in stone is to perform microdentistry whenever possible. A procedure I call "Sweet 16" refers to the 16 teeth (premolars and molars) on 16-year-olds (median age for post-orthodontic patients) who need four quadrants of therapy. This has become the No. 1, nonlaboratory, profit procedure in my offices. Since employing the DIAGNOdent, I have found that 35 percent of the teeth that I previously would have placed sealants on required restorations. So, I no longer leave anything to chance. Whether the problem is decay or residual pumice left in the fissures, I open all occlusals with the water laser. This does three things:

- 1. It completely opens the pits and fissures**
- 2. It exposes any decay areas for treatment**
- 3. It sterilizes and etches the tooth**

I now can place flowable composite as a restoration or a sealant. Either way it's the best treatment modality for my clients. For insurance purposes, I submit a claim for a composite (Code No. 2385) or laser sealant (Code No. 1351) with narrative. These procedures are done in one hour and without local anesthesia. Add it up!

The second most profitable nonlaboratory procedure for me is the mandibular incisal edges of mature adults. Most older adults have worn, fractured, or hollowed-out mandibular incisors that may not have decay. I offer these patients a quick and drill-free option to restore them using the water laser. Six teeth can be completed in 30 minutes without anesthesia or drill vibration (Code No. 2335).

A crucial area where lasers are at their best is cosmetic recontouring of the gingiva. It is critical for the gingival heights of contour to be established prior to prepping veneers, crowns, and onlays, or you will have an aesthetic failure. Using the laser compliments your dentistry. I also use the laser exclusively to perform quick "sulcular redevelopment" prior to impressions. This is a soothing word for "troughing" with no bleeding, cord-packing trauma, or waiting (only 15 seconds per tooth). The result is a healthy sulcular environment that heals nicely.

New procedures I now am performing with my lasers include sulcular debridement, soft-tissue crown-lengthening, biopsies, frenectomy, fibroma removal, incision and drainage, implant recovery, hemangioma and mole removal, bone-sculpting, hyperplastic-tissue removal, treatment of herpetic lesions and aphthous ulcers, and interceptive exposure of an unerupted tooth. These procedures all receive a No. 9999 code, and presently are equivalent to three times my total lease payments.

Criteria No. 3: Efficiency (speed) of treatment

This is the part where staff training is the key. Your staff should be trained to keep you at the chair no matter what. All 15-minute coffee breaks must be eliminated. I no longer let the anesthesia "soak" while I run to make a call. When performing conventional crown and bridge or restorative procedures in a quadrant where anesthesia is necessary, your front-desk person should be scheduling a quadrant of treatment where virgin teeth need restorations or a soft-tissue procedure needs to be performed without anesthesia. With the Waterlase[®], I can restore four occlusals, or do a frenectomy, or I can bleach a half arch of teeth with my LaserSmile[®] in the time it takes the anesthesia to set. Plus, it gives me time to check the anesthetized quadrant to make sure the patient is profoundly numb. (Don't we all get frustrated when patients don't get numb quickly enough!) This isn't a problem anymore

If I choose to do laser teeth-whitening as a stand-alone procedure with my LaserSmile, total lasing time for the patient is 16 to 24 minutes. This is one-fourth to one-third of the time it takes all the plasma-arc-curing (PAC) light systems to perform ... and I keep all the profits!

A new endo procedure has been established for the laser that takes less than 45 minutes to do on a molar. Again, performing microdentistry, a minimal access opening is made and several special tips are used to complete the procedure. The canals are thoroughly debrided without changing their anatomical structure, and the tooth is obturated using a paste and gutta percha fill. Patients appreciate the quickness of the procedure and have reported minimal postoperative pain in the tooth.

Criteria No. 4: Profitability

When considering the return on investment (ROI), you will find this in two areas:

- 1. Efficiency-based incremental income**
- 2. Referral-based incremental income**

Efficiency-based incremental income comes from the use of less materials, such as packing cord, burs, anesthesia, drills (handpieces), and eliminating downtime. For me, this was an average of 1.5 hours per day times four days a week for a total of six hours. This allowed me to change to a four-day work week with no weekend work.

Referral-based incremental income comes from the referrals you receive as a direct result of internal and external marketing of your laser procedures. By performing multiple procedures in less time without the need for anesthetic (in most cases), you will have happier referring clients. You must not be hesitant in letting the public know you have something special for them. Lasers project a high-tech, "sexy" image and people will seek dentists with lasers in the same way patients seek ophthalmologists for laser-vision correction, or plastic surgeons for laser-wrinkle revision. Find a way to write articles for your local papers about the "wonderful laser experience" (my exact words) and the phone will ring!

Finally, after a long search for the right dental technology to increase my efficiency, bring in new clients, and increase my revenue, I found laser dentistry allowed me to achieve my goals of doing "less" and having "more."

Dental Economics March, 2003

Author(s) : Glenn MacFarlane

Find this article at:

http://de.pennnet.com/Articles/Article_Display.cfm?Section=Archives&Subsection=Display&ARTICLE_ID=173168&KEYWORD=macfarlane

 [Click to Print](#)

[SAVE THIS](#) | [EMAIL THIS](#) | [Close](#)

Check the box to include the list of links referenced in the article.

MEDIA FOR