CLINICAL "MUST HAVES"



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WELCOME!

This workbook is an overview of "must haves" for your practice to achieve our ideal vision as dentists. You will find practical, implementable, step-by-step strategies to learn how to avoid the failures, achieve the successes and be better.

Thank you for your time and participation. I welcome and encourage you to continue the conversation with me at the contact information below.

Regards,

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OUR VISION, AS DENTISTS



- Every day I come to work, I am surrounded by people I like and respect, and they like and respect one another
- The office is efficient, beautiful, and not grody
- The office is so financially secure, so debt free, that even when a crisis occurs, its all good
- Our bodies don't hurt after a career of either being on a phone or in people's mouths
- We consistently come home from work, to our families, without feeling exhausted,
- overwhelmed, or psychologically burdened
- We feel like we are good at what we do
- We longer do dentistry that makes us miserable



What are the things that will make me feel like a good dentist?

When I do a composite

- The patient won't complain about sensitivity later
- The margins don't look crappy 2 years later
- The inter proximal contours look good in an x-ray
- The inter proximal contacts are solid and natural
- The inter proximal contacts stay amazing, even after years of flossing

When I seat a crown

- The margins look incredible in a post-op x-ray
- Cement is easy to remove, especially inter proximal
- I am using the best cementation technique, minimizing the chances of the crown popping off

When I do a root canal

- I maximize the technology available to me in order to:
 - Find all of the canals
 - Eradicate any bacteria within those canals

When I pay my bills

• I use the same materials and equipment used by the best dentists in the world, without going broke

When patients need me

- They never just get a voicemail
- I can contact them after hours without them knowing my cell number
- I can do follow-up calls (even though I hate doing follow up calls)

When I spend an entire day doing dentistry

• I can come home to my family without feeling back, neck, and wrist pain

THE "MUST HAVES"

Lasers

- The least expensive and most portable laser is a diode
- Remove tissue overlying restorative margins
 without blood
- Remove tissue overlying an implant without blood
- Eradicate bacteria in the sulcus or in the pulp, which is surprisingly helpful during endodontic therapy
- Perform minor surgical manipulation with less bleeding, pain, and faster healing



Class IIs

- Interproximal composite restorations using a sectional matrix
- Maintains better, more rounded inter proximal contours
- Maintains a better seal throughout the proximal box
- Creates a tighter contact upon removal of the proximal ring

And Wedge (the little purple sliver)

Matrix Band

DEEPER CAVITIES

Bioactive composites

- Release ions throughout their lifespan that
 - Reduce sensitivity near the pulp
 - Reduce formation of plaque at the surface layer
 - Constantly release and refresh Fluoride
 - Are anti-bacterial and anti-plaque
 - Contribute to a protective material film layer
- Bondable and therefore behave like any other composite (both flowable and packable)
- Highly polish-able
- Are radiopaque, and therefore look nice in radiographs

IntraOral Cameras

- Tremendously helpful during new patient interview and patient education
- Added element of documentation, which comes in handy with insurance claims
- Provide added magnification and illumination, beyond capabilities of our loupes, giving us the ability to notice defects, fractures, overhangs, canals and various grodiness

The best intraoral cameras

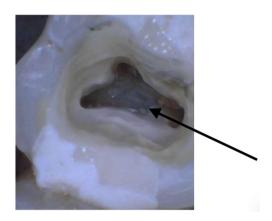
- Cheap enough to have in each operatory
- Simple enough to use that even your lease tech-savvy assistant can easily take photos

Impression Material

- The highest quality material used by the best dentists is often the most expensive
- Minimize cost by utilizing an auto-mix with jumbo packs

COMPANIES CURRENTLY MANUFACTURING BIOACTIVE COMPOSITES

- Beautiful by Shofu
- Regen by Vista Apex
- Activa by Pulpdent







CEMENTATION

What is the best cementation technique, even if

- Wall heights and taper are not ideal
- A chunk of the core material is missing

In cases above, a bonded cement must be used, utilizing the steps below:

- You or the lab must air-abraid the inside of the crown (this can be done before try-in)
- After try-in and adjustments, salivary contaminants must be cleaned out (IvoClean, BisClean)
- A primer must be used inside of the crown
- A bonding agent must be used on the surface of the tooth (I rarely etch)
- The cement should be a dual-cure adhesive

CARING FOR OUR PATIENTS

- Automatic text, e-mail reminders
- Allows text payments
- Automatically texts the patient if we can't pick up the phone
- Allows me to text/call the patient without using my cell number
- Automatically asks for Google reviews
- Allows me to access my schedule from home
- Allows team to text communicate within the office
- Creates list to efficiently fill holes in the schedule

COMING HOME FROM WORK WITHOUT FEELING OVERWHELMED AND PHYSICALLY EXHAUSTED

What are the tools that have helped make dentistry less taxing on the back and hands?

- Isolite by Zyris
- Saddle stool
- Regular wrist and core exercises (these can be accessed on my notes page "how to avoid burnout")