GORDON J. CHRISTENSEN

INICIANS REPOR

Best Products of 2011: CR BUYING GUIDE

Gordon and Paul's Clinical Bottom Line: For many years, Clinicians Report (previously CRA) has identified and published an annual list of the best materials, devices, and techniques that were evaluated that year. The 2011 guide also includes some classic products, study controls, and products that can make your practice faster, easier, better, and potentially more profitable. Please note the following categories of products selected for this report.

Products listed in this buying guide have been evaluated by the CR in-house science team and CR field evaluators. Each product in this report is color-coded to identify why it has been included in this 2011 listing. Please use the color code as you observe products.

- GREEN-CR Choice designates the best products from recent CR multi-product comparisons (marked with a @).
- BLUE—Additional highly-rated products from CR clinical use and in-house science evaluations during 2011.
- RED-Proven classics / controls: Long-term, well-proven, popular, and accepted classics; current top performers; or controls used to compare and evaluate the new products during 2011. Some categories do not have classics/controls listed.

The following categories identify areas in dentistry where CR conducted active product evaluations during 2011. Products are listed in alphabetical order. Classics/controls (where identified) are listed first followed by CR Choice products then new, highly-rated products. Products that are not listed may still be in testing or were not among the highest rated. This is not an all-inclusive list. There are many other excellent products not tested this year among the various categories.

ANESTHETICS & ACCESSORIES



OneTouch Advanced Topical anesthetic gel (14% benzocaine, 2% bi tetracaine hydrochloride) dispensed from bulk press-top container. \$20/32 gram jar

Hager Worldwide www.hagerworldwide.com 70% of CR Evaluators would purchase this product Dental Hygiene Clinicians Report May/June 2011

Painless Steel Needles

Injection needle with 3-edge lancet tip and siliconized cannula for smooth entry. Plastic hub has bevel marking and color coding by size. \$15/Box of 100 (15¢ Each) www.painless-steel.com

Transcodent 77% of CR Evaluators would purchase this product.

Septoject Evolution

Injection needle with scalpel-designed bevel for smooth penetration, less tissu displacement, and reduced deflection for better contro \$18/Box of 100 (18¢ Each)

www.septodontusa.com rs would purchase this product.

DIAGNOSIS & TREATMENT PLANNING

Carles Detection

Septodont USA

% of CR Eval

Devices in this category have better accuracy than all previous models



CarieScan

CarieScan Pro Occlusal caries detection system. Low voltage current evaluates mineral density of tooth and identifies occlusal lesions reliably and accurately. Device is easy and fast to use, but does not record appearance of tooth.

\$3995/System (through Patterson) www.us.cariescan.com

Clinicians Report November 2011



Logicon Interproximal caries detection

software. Software analyzes grayscale of radiographs and ects interproximal lesions reliably and accurately. Only available with Carestream (Kodak) digital radiography. \$1995 / Software

Carestream Dental www.carestreamdental.com Report November 2011



Acteon

SoproLIFE Occlusal caries detection system Corded handpiece provides intraoral imaging and 450 nm LED blue light for reliable and accurate caries detection. Patican view tooth for education caries indication is subtle. \$6470 / System

www.us.acteons up.com Clinicians Report November 2011



Corded handwiece emit 5 nm LED blue light to show po ivrin metabolites from cariogenic bacteria reliably and accurate Color-coded map and numbe show lesion location and severity quickly, but no clinical view. \$4995/System

stem.

Air Techniques www.airtechniques.com

Clinicians Report November 2011 and Dental Hygiene Clinicians Report January/February 2011

EDUCATION

Drug Interaction Resources

* Five digital drug information systems were compared in Clinicians Report August 2011

- my lawi con
- · Little Dental Drug Booklet, Lexicomp www.lexi.com Additional company contact information may be accessed free at www.cliniciansreport.org (click on "Dental List")

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Patient Education

*Eight digital systems were compared in Clinicians Report July 2011

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- Classics/Controls:
- · ADA Pamphlets, ADA www.ada.org
- . CAESY.* CAESY Education Systems www.caesy.com Dental Documents Booklet and Patient
- **Education Video, Practical Clinical Courses**
- www.pccdental.com · Guru,* Henry Schein www.henryschein.com
- · Patient-Vu Platinum,* Implant Vision implantvisi on.net

Simple Patient Education (now on iPad) Practical Clinical Courses www.pccdental.con DDS GP*



iPad delivered patient education with over 200 demonstrations; clinician can draw with finger customize to fit practice; build, send, or print emails. \$400/App

R

Best of 2011

CHI

Kick Your Apps

www.ddsgp.com 69% of CR Evaluators would purchase this product. Clinicians Report July 2011

Self & Staff Education

- **Classics/Controls:**
- CR Dentistry Update and Clinicians Rep SP. Foundation www.cliniciansrep
- The "Go To" Dental . Coding with Confi Insurance Guide, Dr. Charles Blair and Associates www.drcharlesblair.com
- C Dental Office Medical Emergencies, Lexicomp www.lexi.com
- @ Emergency Medicine in the Dental Office, Healthfirst www.healthfirst.com
- **G** Preparing for Your Next Medical Emergency and other DVDs and Courses Practical Clinical Courses www.pccdental.com

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Classics/Controls: Lexicomp Online for Dentistry,* Lexicomp



GORDON J. CHRISTENSEN Reprint

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Patient Education: Improving Treatment Plan Acceptance

Gordon and Paul's Clinical Bottom Line: It has been estimated that about 50% of the revenue of general dentists in the U.S. is derived from elective procedures and paid for by discretionary patient income. How can dentists influence patients to want dentistry instead of other elective consumer items? There is one major potential solution to this challenge—patient education! Numerous excellent patient education products are available to dentists that allow technology to assist in educating your patients and influencing their acceptance of treatment plans. This CR report describes and compares the most popular patient education products, ranging from inexpensive, simple DVDs to more complex programs, any of which will help with patient education.

Patient education is often overlooked as it may be perceived to take valuable time away from the clinician. This procedure should be delegated to staff. Clinicians agree that spending more time with patients results in higher treatment plan acceptance. If patients are not asking questions about a proposed treatment, some clinicians infer this to mean that the patient understands and accepts the treatment, which is not always true. Excellent patient education includes:

• Complete informed consent • Adequate use of visual aids • Effective use of staff

This article discusses new and existing options for patient education, informed consent, effective use of staff, results from a CR survey, and patient education tips.

CR Survey on Patient Education (n=1003)

 Who: Dentists provide the majority of patient education (50% compared to 36% Hygienists and 12% Assistants) Where: 94% chairside 		Future use of iPad or tablet: 80% would consider purchasing for patient education Provide complete written informed consent: 13% all of the time, 21% most of the time, 43% some of the time, 22% never			
CR Comments and Suggestions on Survey Dentists Providing Majority of Patient Education: For optimum efficiency, dentists should delegate the majority of patient education to well trained staff members. iPad or Portable Tablets: This method of patient education is growing and seems to be a desirable and effective method for educating patients. Staff Oriented Diagnostic Appointment: Before dentists examine a patient, well-					
Purchase computer software or DVDs; majority of dentists plan to renew or repurchase the programs Most effective for treatment plan acceptance: DDS GP Yes! (Genuitive), Simple Patient Education (Practical Clinical Courses), and Caesy (Patterson) Dor no. 144: 11% use for patient education		 trained and educated staff members should gather all the diagnostic day needed and educate the patient on various conditions that are evident. Use of Visual Aids: Dentists should incorporate more of the above listed visual aids as patients tend to learn and comprehend findings and proposed treatments better with both visual and audio learning. 			

What is Informed Consent?

Informed consent includes identifying and educating the patient about the following six components:

- 1. Presenting all treatment options
- 2. Discussing the advantages of each option
- 3. Discussing the disadvantages or limitations of each option
- 4. Identifying and adequately explaining the risk of each option
- 5. Providing the cost of each option
- 6. Discussing the outcomes of no treatment

The clinician is responsible for providing informed consent to each patient and for each proposed treatment. There are a variety of options to best educate the patient, including use of well-trained staff, visual aids (as listed above), and software or video programs.

CR Comments and Suggestions on Digital Patient Education

- Simplicity: Systems vary from placing a DVD in a computer to custom installation of a server. The trend is towards seamless integration with the office's existing computer network, portable, and being available on any type of media.
- Updates: Many systems are a one-time fee, while others require a monthly, annual, or additional fee for continuous updates. Be aware of any additional fees before purchasing.
- Customization: Several systems allow customization of which presentations are played, sequenced, or looped. Take the time to learn how to customize the digital patient education system to maximize its potential.
- Subject Matter: Systems vary from being very focused on one area of dentistry (such as implants and surgery), to covering the most common procedures, to every topic involved in dentistry. Select the system that best suits your practice needs.
- Clinician Involvement: Some systems only provide the presentation without narrative, requiring the clinician to stay by the patient while the presentation is played. Others are set for specific lengths with narrative, allowing the clinician to complete other tasks while the patient is being educated.

Select the system that best meets your practice and patient education goals.

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Patient Education: Improving Treatment Plan Acceptance (Continued from page 1)

Digital Patient Education

Patient education delivered verbally can be very effective, but a shift to incorporating digital delivery of the patient's options can improve outcomes, ensure completeness, and save time. This area of patient education is growing rapidly as more dentists are experiencing improved treatment plan acceptance.

The following table is not all-inclusive, but provides examples of some of the most popular options. CR Evaluators observed and used these educational products with success. Selecting a CR Choice product for this report was not possible because Evaluators varied significantly in their presentation preference; computer and software competency; financial outlay they would accept; and depth of patient education they desired.

Product Company	d	st*	Description	Delivery Method, Equipment	Unique Features*
Caesy Patterson	D	ud: \$295/Start up D: \$1999/Primary Set erprise: \$7999/System	Instant access to all online presentations Continuous play DVD Server based, unlimited stations	PC, Mac, iPad, smart phones DVD player PC networks for Enterprise	Continual updates and full compatibility Video with animation and narration Printables; burn to CD to market practice
Consult-PRO Chairside Consult-PRO	\$3	00/Single 00/Network, 5 licenses 00/Network, 10 licenses	850 animated presentations with total customization for recorded informed consent; 17 languages	DVD to be downloaded on server and terminals; Enterprise system coming soon	Records Dr. / patient interactions for informed consent; notes, image import, email videos to patients; web link with 40 movies on your website
DDS GP Kick Your Apps	\$3	9 DDS GP (one-time fee)	Over 200 demonstrations; clinician can draw with finger; customize to fit practice; build, send, or print emails	iPad recommended; iPod Touch and iPhone compatible	Specifically designed for iPad use, lifetime free updates, no monthly or annual fees, extra fee for narration of 38 tips by Dr. Paul Homoly
Dental Sidekick InfoStar Productions	\$3	00/Office	Easy to use patient education system for unlimited stations; customize for desired presentations, add your own images	PC, Mac, or load to existing server network	All services can be linked to any website and emailed to patients; Smile imaging module; 3 languages including Chinese
GURU Henry Schein	Gu	95; includes 1 year of 11 Web, Guru email, and 11e training	Customized case presentations with 3D animations and narration; allows import of patient's intraoral images and radiographs	TV, practice website, PC, iPad, email presentations to patients with Dr.'s voice annotations	Intuitive user interface; Stop, Draw, and Teach technologies, allows clinicians to draw on video highlighting areas of focus
Orasphere <i>Orasphere</i>		95 Website version 95 DVD version	72 subject patient education videos with 3D models; unlimited use per office	Windows PC for entire practice DVD/TV Practice website	Embed presentations on website Practice edition with unlimited stations
Patient-Vu Platinum Implant Vision		95/Office version 95/Web version	Specifically for dental implant, full screen 3D animations, customize with your own photos and treatment plans		Narrated; 16 languages; printable consent forms; 11 color brochures; embed on website
Simple Patient Education Practical Clinical Courses	\$1	9/Combo DVD 99/Extra combo DVD 9/Single topic DVD	18 separate DVDs or 18 topics on 1 DVD, average topic length 9 minutes, English and Spanish	DVD player, DVD-ROM on PC or Mac, or office server	18 essential topics including information satisfyin informed consent

* Cost is based on initial purchase. Additional monthly, annual, or upgrade fees may apply; unique features may add additional costs.

Effective Use of Staff for Patient Education

- In-service education. Provide scheduled and frequent in-office education to discuss and implement staff-oriented patient education.
- Visual aids available. Have all patient education aids in operatories for quick access.
- Diagnostic data use. The staff should use the diagnostic data gathered during the exam along with visual aids to educate the patient. The clinician reinforces concepts, obtains informed consent, and completes treatment planning.
- **Involve all staff.** Well-educated dental assistants, dental hygienists, business staff should all be involved constantly with patient education.
- Continuing Education (CE). Upgrade staff with broad-based CE courses.
- Clinician should lead by example. Teach your staff effective patient communication then compliment and thank them.
- Professionalism. Expect professionalism from staff in all areas: dress, appearance, communication, and behavior.
- Incentives. Some practices provide an incentive system for staff when the patient accepts necessary treatment or provide a quarterly/annual goal-based bonus system.

Ten Tips for Improved Patient Education

- 1. Be prepared. Look at *all* aspects of patient medical and dental history.
- 2. Listen to patient. Allow patient to express his/her views *first*, then add your perceptions of what can be completed.
- 3. Discuss and provide mandatory items first then provide elective treatment.
- 4. Speak directly to patient, not to the computer monitor, the casts, radiographs, or other visual aids. Speak clearly and slowly using terms the patient will understand.
- Be perceptive. Let the patient ask questions and emphasize key points or summaries.
- 6. Personalize treatment. State what you would for your own oral cavity.
- 7. Be honest. Many patients can sense when something "doesn't add up."
- 8. Opinions. Don't force your opinions on patients.
- Informed consent. Provide all options for treatment. Provide documentation of treatment plans; their commitment and obligations for successful outcomes; and post-operative care instructions.
- **10. Time.** Don't force a decision if the patient needs more time or information before making an informed decision.

CR Conclusions: Educating patients is sometimes minimized because of busy schedules; misunderstanding the patients' desires or comprehension of findings; lack of desire for dentist to explain a condition or treatment; and/or failure to delegate to staff. Clinicians should delegate patient education to well-trained staff with improved use of visual aids. In-office staff education should be implemented on a regular basis. The trend of digital methods for patient education is increasing and can be an effective part of increased treatment plan acceptance. Select the products and devices that best meet your practice needs.