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NEWS AND SOLUTIONS TO DRIVE PRACTICE SUCCESS

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Dreamers & Doers

The people and stories behind dental companies providing enhanced products and services to help practices realize clinical and business success.

A Digital Transformation

How EHR, teledentistry, and "next-generation" software are changing the face of dental patient care.

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Best of Class 2020

"Best of Class" TECHNOLOGY AWARD

Get to know the dental products that earned the 2020 Cellerant Best of Class Technology Awards

DENTAL TECHNOLOGY

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■ **Isolite® 3 Illuminated Dental Isolation System**

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■ **Isodry® Dental Isolation System**

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ISODRY
Non-Illuminated

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Adapter
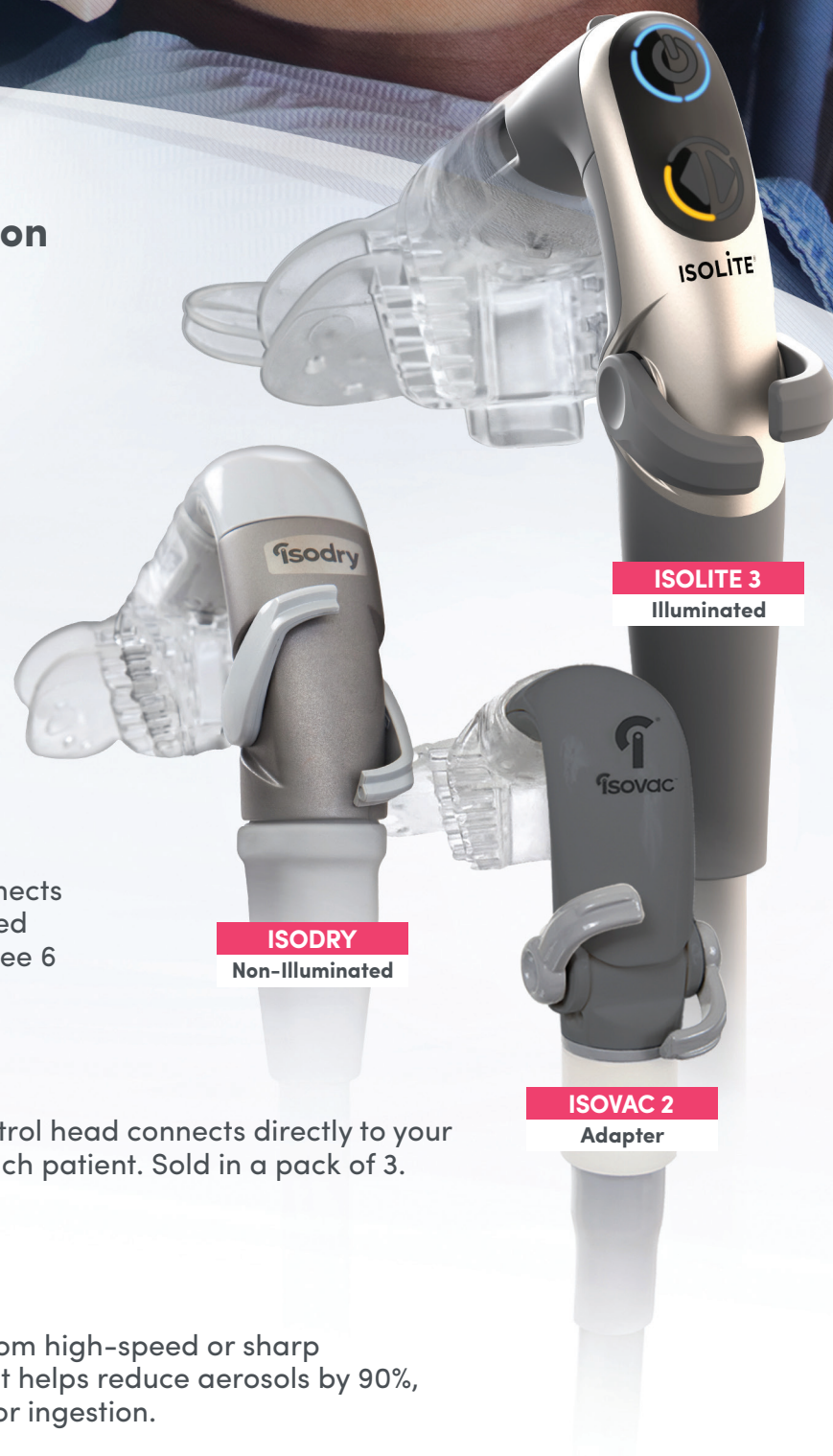
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The Cellerant Best of Class Technology Awards recognize innovative products that set a standard of quality in their respective categories. It has been acknowledged as the most prestigious and coveted award that a dental manufacturer can receive.

CELLERANT
BEST OF CLASS
TECHNOLOGY AWARD
2020

Learn about the Best of Class products starting on **page 30**

Go online to go in depth

The full list of award winning products and profiles of each of them can be found starting on page 30, but even deeper looks at these innovative technologies, materials, platforms, and solutions can be found online. To showcase all these products have to offer, our online coverage includes a look at the key details of every award winning product, interviews with clinicians and dental professionals who use these solutions every day in their practices, and videos from the people behind the products. Find all of this and more at *dentalproductsreport.com*.

AWARD SELECTION COMMITTEE

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Dr Lou Shuman is the founder and creator of the Cellerant Best of Class Technology Awards and the CEO of Cellerant Consulting Group. He is a venturer-in-residence at Harvard's i-Lab and co-founder of LightForce Orthodontics.

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DENTAL PRODUCTS REPORT®

[30] THE 2020 CELLERANT BEST OF CLASS TECHNOLOGY AWARDS

Dental Technology | Presenting the dental products that earned the title of Best of Class.

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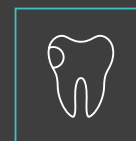
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DENTALPRODUCTSREPORT®

NEXT MONTH: The Vision Issue: Whether improved via magnification and lighting, enhanced digital diagnostic imaging or having a clearer vision for the practice and how to lead it to success, this issue looks at what vision means to dentistry.

BEST PRACTICES

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For more content online...

Visit **dentalproductsreport.com** to go deeper into why the Cellerant Best of Class Technology Award winning products stand out with articles and videos about these innovative technologies and the companies and people who brought them to dental practices and patients.

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FITTING IN AS MUCH AS POSSIBLE IS GOOD ANY TIME OF YEAR

LABOR DAY MARKS the unofficial end of Summer, and thus the start of fall. In most years this means back to school for children and return to the busy times of people's schedules. In the business world, fall is often a major selling season, with companies working to hit end of year numbers before the holiday season, and customers looking to finalize investments to realize tax savings. Dental practices tend to be busy in the fall as well, with summer vacations ending and patients in need of pre-school check-ups.

But before that, the end of the Summer is normally a time of trying to fit as much in as possible before fall arrives. Of course, this isn't a normal year by any stretch of imagination. So, early fall is as good a time as any to try to fit in as much as possible. We certainly took that approach with this issue of *Dental Products Report®*.

It's hard to pick where to start with previewing this issue, but as the cover is dedicated to them instead of displaying exciting new products, the 2020 Cellerant Best of Class Technology Awards are showcased in this issue. These awards highlight the standout technologies pushing dentistry toward an exciting future of even more efficient, high-quality care with enhanced patient and clinician experiences. The award winning products are selected annually by a panel of dental experts, including our own Chief Dental Editor and Technology Editor Dr John Flucke. In this issue we highlight the 20 winning products with commentary from the panel members explaining why each was selected.

> "There's no reason not to continue fitting in as much excitement as possible in each and every month, whether it's an unusual year like 2020, or anytime."

Our Cellerant Awards coverage doesn't stop in these pages, as our online coverage provides even deeper looks at these industry pace-setters. At dentalproductsreport.com you can find deeper breakdowns on what these products do, and how they do it, as well as interviews with clinicians who use the technologies and some of the people behind the products.

But back to this issue of the magazine, because I've only touched on one of the many exciting features this month. Not to be outdone by the standout Best of Class Award winners, this issue also includes our Dreamers & Doers showcase of exciting companies in the dental industry. These profiles are built around interviews with some of the people who helped this quartet of brands grow from concepts and ideas to become the successful companies they are today.

Then we have what in any other issue would be our featured cover story, "A Digital Transformation." Written by dental software expert Mike Uretz, this article looks at the changing landscape of dental software, and the key areas of development in software with the potential to change the industry. Uretz shares his expertise and advice to help everyone from single doctor operations to large scale group practices stay to up to speed.

The rest of the issue is just as jam packed with product features, interviews with clinicians, clinical techniques, and case studies, and a round-up of endodontic files. Summer might be in the rearview mirror, but there's no reason not to continue fitting in as much excitement as possible in each and every month, whether it's an unusual year like 2020, or any time. ●

[**Mike Hennessy Sr**]
Mike Hennessy Sr is chairman and founder of *Dental Product Report®'s* parent company, MJH Life Sciences™.

DPR's Reader Service Card

As the go-to product resource for the dental industry, the team at *Dental Products Report®* wants to make it as easy as possible for you to get the information you need about new products. In each issue you'll find the free reader service card with numbers that correspond to advertisements. Throughout the issue, you'll also find numbers with each of the products that appear as editorial in every issue of *DPR*.

We want to make it easy for you to get what you're looking for — on your terms. You can fill out the product card to receive information on specific dental products, and you can also visit dentalproductsreport.com or the manufacturers' websites for additional information.

[**Our Mission Statement**]

Dental Products Report®—known for its trusted new product information—delivers a complete picture and in-depth coverage of the innovations transforming dentistry for patients and enhancing clinical and dental practice success. *Dental Products Report®* helps dental professionals understand the available dental products and how to select the best options for their practices and patients. We are committed to asking the right questions and delivering unbiased, quality content.

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[UNIVERSAL COMPOSITE]

Its added simplicity comes with superior strength, lifelike esthetics, and long-lasting performance.

EDITOR'S CHOICE

SimpliShade

Described as a simplified universal composite with adaptive response technology, SimpliShade™ Universal Composite is formulated to streamline your restoration workflow and inventory management, without compromising strength or esthetics. Featuring three shades (light, medium, and dark), it makes it quick and easy to match all 16 VITA® Classical Shades—resulting in quicker shade-matching that leads to faster chair time. With less product to stock, re-order, and track, SimpliShade allows doctors to focus on caring for patients instead of managing inventory.

Kerr Dental
800-KERR-123 | kerrdental.com
CIRCLE RS #06

[IN-OFFICE WATER TESTER]

MyCheck

Sterisil and Agenics Labs have launched the MyCheck™ in-office paddle test. Water testing has long been a critical aspect of a complete and effective water treatment program. As more practices have added water tests into their infection control practices, a need arose for economical, fast, and convenient methods for checking bacterial content in dental coolants. MyCheck is designed to provide bacterial colony counts quickly and confidently without the hassles and expense of a mail-in test. The clinic simply collects a sample from a dental handpiece, inoculates the paddle with the sampled water, incubates the paddle at room temperature for 72 hours, and counts the colonies.

Sterisil
719-622-7200 | sterisil.com
CIRCLE RS #07

[PROPHY PASTE]

CleanJoy

CleanJoy is a fluoride-containing, splatter-free, less-abrasive prophy paste in 3 cleaning grits and 3 delicious flavors. Containing fluoride (700 ppm) and xylitol, it's paraben-free and available in SingleDose cups. CleanJoy is a safe, hygienic, and effective paste for the prevention of caries, the removal of soft and hard surface plaque, the removal of extrinsic stains (eg, coffee, tea, tobacco), the polishing of tooth surfaces and restorations as part of professional cleanings, and more. It is available in caramel, mint, and cherry flavors, and in 3 less-abrasive grits—fine, medium, and course—for use in a wide range of clinical situations, including for use with implants.

VOCO America, Inc.
888-658-2584 | vocoamerica.com
CIRCLE RS #08

[ELECTRIC MOTOR SYSTEM]

Integrated Electric Motor System

DCI Edge and NSK introduce a seamlessly integrated electric motor system to be built into all DCI Edge delivery systems. The co-engineered system fully integrates the NLZ E Electric Motor and its licensed differentiators, including WaveOne® technology. The motor has a custom interface to guide clinicians as they work, placing all the control at their fingertips. Its ergonomic design and intuitive operation help minimize unnecessary movement, keeping treatment as streamlined as possible for greater efficiency, and a better treatment experience overall. The system's unique touchpad interface is engineered for complete integration with the NSK NLZ E Electric Motor.

DCI Edge | NSK
dciedge.com | nskdental.com
CIRCLE RS #09

[DATA SECURITY **]**

Cyber Security Employee Training

Speedy Cyber Rescue's Cyber Security Employee Training helps a dental practice to identify and prevent employee vulnerabilities before they cause a data breach. Employee training may be the single most important line of defense against cyber criminals because human error is linked to more than 92% of breaches. The program features the detection of employee data on the dark web, baseline security training, simulated phishing, the development of security policies and procedures, risk measurements, and more.

Speedy Cyber Rescue
269-247-4898 | **BetterDentalSupport.com**
CIRCLE RS #10

[AIR FILTRATION **]**

CASPR Medik™

CASPR Medik™ is now available as an HVAC solution as well as a new portable unit called CASPR Compact Medik. CASPR stands for Continuous Air and Surface Pathogen Reduction. Given the heightened awareness of the risk to clinicians from Aerosol Generating Procedures, this solution is well suited for dental offices. At the heart of the system is its Medik disinfection technology which reacts with the H_2O molecules found in the air to continuously create highly effective oxidizing molecules such as hydrogen peroxide (H_2O_2).

2C MedTech
800-209-7053 | **2CMedTech.com**
CIRCLE RS #11

[ELECTRIC TOOTHBRUSH]

hum

The hum by Colgate smart electric toothbrush guides consumers to brush better and to build healthier habits without sacrificing fun for functionality. Although most people miss 40% of their teeth when they brush, hum by Colgate can help consumers achieve 50% better brushing efficacy, according to the company. The product has smart sensors that make it simple to track the frequency, duration, and coverage of a consumer's unique brushing style, and provide personalized guidance helping people target spots that need extra attention. hum's strong connected technology is user-friendly, built to fit into people's busy lives to help them brush their best.

Colgate-Palmolive
833-hum-0001 | humbycolgate.com
CIRCLE RS #12

[ELECTRIC TOOTHBRUSH]

ION-Sei

Following success in Europe, the electric toothbrush ION-Sei is launching in the US, equipped with its innovative patented ionic technology. It is designed to effectively remove and control the spread of bacteria on the teeth by coating teeth with natural charge ions while brushing, which effectively and persistently suppresses the adhesion of the bacteria that causes plaque. It is now more important than ever to maintain your oral hygiene, particularly in the oral cavity, which is closely linked to the health of the entire body, helping to support the immune system by maintaining an environment in which viruses and bacteria cannot easily enter.

Sanyei Corporation
info@ionseiusa.com | sanyeicorp.com/eng/
CIRCLE RS #13

[ELECTRIC TOOTHBRUSH]

Oral-B® Guide

The truly connected bathroom has become a reality, thanks to Oral-B and Amazon Alexa. The Oral-B Guide is a smart brushing solution featuring the first voice-integrated toothbrush. The system includes an Oral-B Electric Toothbrush, an Alexa Built-in Smart Charger base, one Oral-B Brush Head, and a Quick-Start Guide. Together, they're designed to upgrade and bring a bit of fun to consumers' bathroom routines, hands-free, while guiding good habits tailored to each person's unique brushing style and monitoring progress over time. It uses one power outlet for a clutter-free experience and enables users to enjoy 360-degree, high-quality sound while they brush their teeth.

Oral-B / Procter & Gamble
800-566-7252 | oralb.com
CIRCLE RS #14

[ELECTRIC TOOTHBRUSH]

Smart Brush and Smart Motor

The Smart Brush and Smart Motor from quip help remind you and track your brushing routine through the quip app, guide better technique by monitoring how you brush (with tips on how to improve), and even let you earn rewards (think quip refill credit) when you stick with good brushing habits. The Smart Brush starts at $45 for new customers; and existing quip members can upgrade their current quip brush by swapping out their removable motor for a smart one, starting at just $20. quip's Smart Brush pairs quip's signature design with only the most essential tech at a price point that's accessible.

quip
dental@getquip.com | getquip.com
CIRCLE RS #15
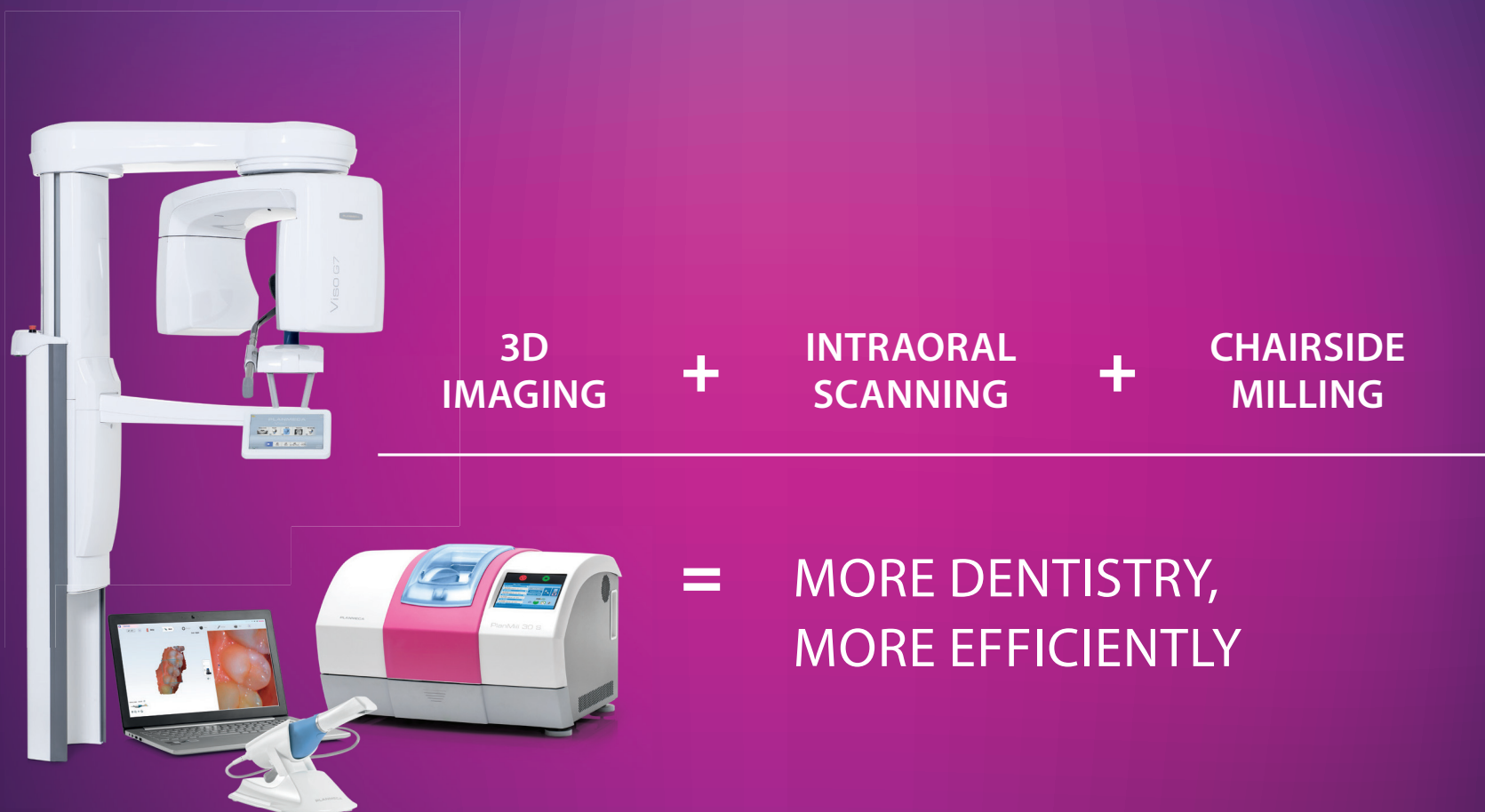
Dreamers
& Doers

The people and stories behind dental companies working hard to provide enhanced products and services to help practices realize clinical and business success.

[**Compiled by Dental Products Report Editorial Team**]

Successful businesses are built on 2 main things: people with big ideas, and people with an innate drive to push through obstacles to make those ideas into something tangible and impactful. Those 2 things add up to a story of how someone noticed a problem or a need, set out to do something about it, and eventually succeeded. Our annual Dreamers & Doers coverage aims to help share some of these stories of the people who took their vision and turned it into something that can help dental practices, as well as the patients they treat. Over the next 7 pages we present the stories behind 4 different companies and the people who have done the hard work to make their dreams into businesses with effective solutions for the challenges dental practices face. Read on to learn about 2020's Dreamers & Doers.

ALLVISION / STOCK.ADOBE.COM

"Creating the standard for orthodontic treatment planning"

KHAMZAT ASABAEV
Co-Founder and CEO

Q: What is SoftSmile and how did the company start?

KA: SoftSmile is a young software company. It was started just a year ago. We are a group of people who devoted years of our lives to health care, orthodontics, and science. We decided to focus on building software because we understand it is crucial for people who want to start making aligners in-house.

You can easily buy 3D printers, they are affordable now, but precise and reliable software is something that only a couple of companies have on the market today. Our idea was to create something more affordable, more efficient, and precise and reliable for doctors and patients.

Q: How is SoftSmile looking to change orthodontics?

KA: SoftSmile was created by doctors, technicians, and manufacturers determined to build aligners and treatment planning solutions without compromising quality or precision. We have built our own laboratory and we're making aligners and lingual braces, which have been highly praised by renowned doctors from all around the world.

Q: What sets your Vision orthodontic software apart?

KA: Vision is fast. Users have the freedom and ability to concentrate on strategic and predictive treatment planning rather than routine tasks.

Q: How does Vision employ machine learning?

KA: Machine learning improves the more you use it. The more patients you run through Vision, the more advanced the machine-learning algorithm becomes. In order to achieve ultra-fast processing speed, we had to develop new algorithms to find new solutions for 3D modeling. We dug deeper into history and mathematical principles to improve our technology. Using machine-learning algorithms, Vision is able to automate the routine tasks of treatment planning while ensuring speed and accuracy. SoftSmile is creating the standard for orthodontic treatment planning. We are creating the strongest solution for doctors, technicians, and patients across the globe.

Q: What challenges did you overcome developing Vision?

KA: You can imagine in the aligner market where you have just a number of the software treatment planners, to create something absolutely unique and not match the clear aligners patents was the main challenge. And we overcame this challenge by introducing mathematicians and scientists into our team. Only companies with breakthrough technology can bring their product to market.

Q: What response is the initial release of Vision receiving?

KA: Vision, SoftSmile's treatment planning software, is the best on the market because it was designed by doctors to suit the needs of their practice and patients. Since we revealed Vision (beta) we have been delighted by the overwhelmingly positive response to our technology.

For an expanded version of this interview visit dentalproductsreport.com.

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"We purposely made our sensor and software open"

DAVID J. ARNETT, MBA
President

Q: What led you to start DentiMax?

DA: I was the ninth employee for a little software company by the name of Lytec Systems. We made medical and dental practice management software. When I left that company, I started dental offices. I'm here in Arizona, the Wild West, maybe the only state where a non-dentist can own a dental office.

One day, I get a call from Lee Varney, who at the time was the head developer for Medisoft, and I knew of his capabilities. Knowing how fun software companies were, we started DentiMax. At the time, most of the dental systems out there were extremely expensive. We felt like there was a big need to have reasonably priced dental software and to offer something that used better technology, too. Using newer technology at a lower price, we came out with our DentiMax Practice Management Software.

Then early on, as we started to sell our software, I noticed this big thing rolling through the industry called digital x-ray sensors. There was a buzz out there about everything going digital. The sensors at that time were so expensive, and the quality wasn't that great. We knew we could do it better and started selling high-end sensors at a reasonable price. That's how we got started.

Q: Could you tell me about the quality of the Dream Sensor?

DA: Today, there are several high-quality sensors on the market. DentiMax is one of them. How you can tell if a sensor is high-end is by the digital image it produces. If you zoom into an x-ray from a lower quality sensor, the image is going to get pixelated really fast—it looks grainy. With a high-end sensor, like ours, you can zoom in pretty far before you see any type of pixelization. There are a couple of reasons why we can do this. One reason is how the sensor is built. We have a scintillator and other parts that are unique to the sensor that helps us render this high-end, clear image. The other reason is the way our software interacts with the x-ray image which helps us produce that ultra-clear image.

Q: Do your sensors work with other software applications?

DA: Yes, we do. And it is done on purpose. It has been a lot of work on our part to make that happen. A lot of systems unintentionally, and in some cases intentionally, have made their software closed. And so, we purposely made our sensor and our software open.

Having an open sensor is pretty cool. For a dental office to have to adopt new software to use a new sensor means the whole staff might have to be retrained, which is a big deal. Think of all the time and effort you perhaps spent to train your hygienist, your dental assistants, maybe your associate dentist, to learn to use your initial system. With our open sensor, it is going to work like your current sensor that you already have; it's really just plug-and-play. We work with virtually all the systems on the market. We're an open sensor. We are going to work with what you have.

Q: How do you make sure your sensors are durable?

DA: The one point where all sensors are vulnerable is the cord. If a sensor is going to break, the sensor cord is going to be the weak link. It's going to get tugged and pulled on day after day, week after week, month after month, year after year. We have spent a lot of time and effort working with dental offices to really strengthen our cord. Where the cord enters into the housing, there is a little bulge where it is Kevlar-reinforced—this reinforces the cord where it enters the sensor housing. It took us a while to figure this out.

We had an office in Texas who saw a lot of Medicaid patients—it was just slammed and super busy. I think they prided themselves in being able to break our sensors; they could break anything. We worked closely with this office and with our factory, going back and forth until they finally couldn't break our cord. Our cord is very durable. Occasionally the sensor cord can break, but our cord is repairable, which a big deal. You don't have to buy a brand-new sensor; you can simply repair the cord.

Then there's just the sensor overall; it's a solid sensor. We don't recommend you drop the sensor, but if you do, chances are it's not going to break. We're going to last longer than other brands.

Q: Do you stand behind this with a strong sensor warranty?

DA: Yes, we have an extremely strong manufacturer warranty. It's for 3 years. What does that mean? For the first 3 years of your sensor life, if it breaks for any manufacturer defect, we will replace your sensor free of charge. If there is a manufacturer defect, there is no money out of your pocket.

However, sometimes people, including myself, will do dumb things, especially with equipment. If you break the sensor and it's not a manufacturer defect; let's say you ran over your sensor with your chair. To cover accidental damage like this, we give all of our sensors a free 5-year protection plan. That means you can replace the sensor at a greatly reduced price. The other thing that we do is send out a loaner sensor to your office. If a sensor goes down, we'll probably have to send your sensor out to our factory to be evaluated. During that period, we don't want your practice to be without a functional sensor. We'll send you a loaner sensor, so you're up and running.

Q: How can practices see if they like the Dream Sensor?

DA: We've been doing this for a lot of years, and we have perfected what we call the "Try Before You Buy" program. How the program works is we will send a sensor, free of charge, to your practice to try out for a couple of weeks.

It's super easy; we don't even send somebody out to your office. Instead, our technicians will remote into your computer and work with your staff to do what we call "dialing in the perfect image." We find that doctors have different preferences and tastes. Some like the images a little darker while some like their images a little lighter, etc. But either way, we'll work with you to create your perfect diagnostic image. Especially during this time of COVID-19, it's been pretty amazing to see how this process works.

We find that after a couple of weeks, most offices want to buy our sensor. It's a fraction of the cost of the other brands and has a high-end image quality. If you don't like the sensor or the timing isn't right for you, box it up and send it back. We'll pay for your shipping.

Q: What else do you want people to know about DentiMax?

DA: The only thing I would say is to try us out in your office. Maybe the silver lining during COVID-19 is you might have a little bit more time than you had in the past. We can ship the sensor out to you as a trial so you can try it out. It's going to work with your existing system. It's going to produce the image that you like. And I think you'll also like our staff; we're very personable. We're going to be there for you and your team.

FEATURED BRANDS

Dream Sensor

Designed to provide high-quality x-ray images while providing optimal patient comfort, the Dream Sensor is an open-architecture solution that is compatible with most dental imaging software platforms. The sensor is the thinnest CMOS sensor, and it features rounded beveled corners to enhance patient comfort. Designed for durability, the sensor is backed by a 3-year warranty, and designed with a Kevlar-reinforced cable to stand up to regular use in a busy dental practice.

"What's often overlooked is that the practice is the engine that builds financial independence"

R. MATTHEW HAMILTON, CFP®
Chairman & CEO

> **Through all of this, our goal is to provide high-quality returns at lower levels of risk so compounding occurs and wealth is created and maintained…no wealth management plan is really effective without high-quality investment returns that compound over time."**

Q: To get started, could you please tell us about Hamilton Capital?

MH: It's a real pleasure to connect with you and your audience! Hamilton Capital is one of the largest independent RIAs, or Registered Investment Advisors, in the country in terms of the investment assets we manage. We're headquartered in Columbus, Ohio, and serve a national clientele of individuals and institutional investors. And as part of our clientele, we're proud to include a large number of dental professionals.

We serve only in a fiduciary capacity and have been providing both Wealth Management and Investment Management services for more than 22 years. Today, we have nearly 70 employees and manage greater than $2.7 billion of client assets. We've also been fortunate to be the recipient of many national recognitions, including membership in the *Financial Times* 300 for the sixth time this year. This annual list of the country's top RIAs is described as America's "elite."

Q: You mentioned Hamilton Capital serves only in a fiduciary capacity. What does this mean?

MH: That's a great question, and a really important one. Serving in a fiduciary capacity means that we always place our clients' best interests ahead of our own. While this is good business, it's also the legal standard under which we operate. What this means specifically is demonstrated in our business model. Our only source of compensation is the fees we receive from our clients. Furthermore, our fees are structured so that when our clients do better, we do better.

At Hamilton Capital, we don't sell products or receive sales commissions. Too often, this can create a conflict of interest and advice gets clouded by compensation. Our goal, instead, is to minimize or eliminate conflicts even if this means we make less. I believe we're in the minority when it comes to practicing at this level of care. The great majority of advisors are held to a more lenient standard, which often leads to self-serving recommendations that are far from optimal for the client.

Q: You aren't the only firm out there that works as fiduciaries, but are there things that distinguish Hamilton Capital from other fiduciary firms?

MH: There are others, of course, but we believe we've earned our position in the industry due to 3 things. First, for the wisdom and experience of our team. Second, for our dynamic investment management process, which we believe has yielded very good long-term results for our clients. And third, a client-focused culture that seeks continuous improvement and encourages innovation. Across the board, our goal is to be outstanding at every level of the organization and to focus our collective expertise on achieving our clients' financial goals. Our clients are always top of mind.

Q: You mentioned your team a little bit earlier. Can you tell me a little bit more about the people at Hamilton Capital?

MH: Our goal has always been to assemble and build a team of outstanding professionals who are experts in their fields. We look for thought leaders in our industry and masters of our craft. Each member has a deep calling to serve with distinction and we have an extensive professional development program that seeks to bring out the very best in each of them.

Our team is organized into practice groups. Our Wealth Management Group serves as a main point of contact for clients. This group builds financial plans, provides business advice, and serves as a liaison to our Investment Management Group. The team consists of 30 CFP® professionals or the equivalent. Some members are also lawyers, CPAs and have MBAs.

Our Investment Management Group is charged with the design and management of our clients' investment portfolios. We carefully built this team to have the necessary expertise to implement our sophisticated dynamic investment process. The team's eight full-time members all have master's degrees from well-respected business schools, or have or are pursuing a CFA®, which is a graduate-level investment management certification.

Q: When you're counseling dental clients, what are some of the insights that you hope to bring to them regarding their practices?

MH: I'd say it would be to be very clear about the purpose of their practice and what they can accomplish by building and maintaining a healthy practice. Ultimately, the practice allows them to serve patients with distinction, which is the source of a great deal of professional satisfaction. Their practice is also the source of income to meet lifestyle needs. Both of these purposes are obvious, but what's often overlooked is that the practice is the engine that builds financial independence. It's the source of funds to maximize retirement savings. Yet few dentists take full advantage of the retirement plan opportunities available to them. Further, it is also their largest investment and it can be quite valuable, if it is managed with an eye towards an eventual liquidity event.

Q: When you talk about financial independence, are you speaking about being able to retire?

MH: Yes, but not exactly. Many dentists retire yet constantly worry about outliving their assets. Real independence, however, is about being in a much more powerful financial position. At Hamilton Capital, we define financial independence as having the financial resources to be able to retire, whether you choose to or not without the worry of running out of financial resources.

To achieve this type of financial independence, you have to have built your financial assets to a level of critical mass. And this means 2 things: you have ever-increasing investment cash flows that keep up with inflation. And your investment principal grows throughout retirement. Said another way, you leave retirement with more financial assets than when you entered retirement. Financial independence is a very secure position that creates financial freedom, but also

> **With our portfolios, we have two clear management objectives: We want to earn a high-quality absolute return on the capital we invest. And we seek to minimize risk so losses are manageable, recovery comes quickly, and future returns resume building on past returns. We focus on being consistent, disciplined, and paying attention to fundamentals in all our investment decisions."**

allows our clients to impact the people and causes they hold most dear.

Q: You speak about maximizing a practice's value. Help me understand what you mean.

MH: What I'm talking about is a practice's value as a financial asset. Too many dentists focus on the top line, on what they produce or bring in. But value comes from the bottom line. We call it EBOC, or Earnings Before Owner's Compensation. EBOC is a measurement of your operating cash flow. It's the bottom line. This is discretionary income you can spend and save. There is a big difference in value between a practice grossing $1 million and taking $500,000 to the bottom line and another one with the same production that only brings $300,000 to the bottom line.

Q: Earlier, you mentioned your management of investments, how does it contribute to financial independence?

MH: With investments, the goal is to build your assets to that level of critical mass I mentioned a few minutes ago. What matters are the cumulative investment returns you make over a lifetime. Consistency is very important because this allows you to build current returns upon past returns, so effective compounding occurs.

It's also critical you earn high-quality absolute returns. An absolute return is the actual return you earn on capital you place at risk. It's not about earning market returns. Financial markets should simply be viewed as opportunities. At times, they can provide very good returns, but they can also yield negative returns for very long periods. Generally, investing comes down to the fundamentals, being very clear on your investment criteria and knowing when you will put your hard-earned capital at risk.

> **Across the board, our goal is to be outstanding at every level of the organization and to focus our collective expertise on achieving our clients' financial goals. Our clients are always top of mind."**

Q: You mentioned effective compounding of returns. How do you do this?

MH: Many people have learned about the power of compound interest. Compound investment returns are similar, but with 2 key differences. One, returns are variable, and two, you can lose money—and if you are not careful, big money—from which it takes years to recover.

With our portfolios, we have two clear management objectives: We want to earn a high-quality absolute return on the capital we invest, taking into account today's opportunities and risks. And we seek to minimize risk so losses are manageable, recovery

comes quickly and future returns resume building on past returns. We focus on being consistent, disciplined, and paying attention to fundamentals in all our investment decisions.

Q: Earlier, you mentioned you were known for your dynamic investment management process. Tell me more.

MH: Industry studies have found that the mix of asset classes you own – such as U.S. large company stocks, U.S. investment grade bonds, foreign stocks, etc. – will have by far the greatest impact on investment returns and volatility. Traditionally, investment managers follow a static process where they fix their portfolio's weightings to certain asset classes and maintain them through all investment environments – you may have heard of how an advisor "rebalances" a portfolio.

The difficulty with this approach is that the return and volatility associated with an asset class change with the economic cycle and as valuations become more or less expensive. Their performance has a great deal to do with how well these preset weightings match up with the actual investment environment they encounter.

Our dynamic process, on the other hand, is different in the sense that it treats asset classes as opportunities and not mandatory holdings with preset weightings. Our goal is to match the assets we own with the investment environment looking out 18-24 months. Therefore, we seek to overweight the most attractive opportunities, underweight the less compelling, and to avoid assets with unwanted risks. Today's weightings could look quite different from tomorrow's.

Through all of this our goal is to provide high-quality returns at lower levels of risk so compounding occurs and wealth is created and maintained.

Q: You mentioned a culture of continuous improvement. Are you working on any exciting new projects now? How do you think they will help people?

MH: Yes, we are and I'm very happy to share the details with you. We just launched a series of Collective Investment Funds (CIF) for Qualified Retirement Plans that we manage using our dynamic investment process. As I mentioned earlier, our approach seeks to consistently compound investment returns, which we believe is key to building meaningful retirement benefits.

Industry studies have found that individual investors dramatically underperform when charged with the management of their accounts. With our new funds, employees are relieved from the responsibility of managing their retirement accounts. Instead, these decisions are placed in the hands of investment professionals. By combining the resources of retirement plans with similar investment objectives, individuals gain increased efficiencies, including significantly lower investment costs. Lower costs can translate into higher investment returns.

Q: So, are there any other innovations on the horizon from Hamilton Capital?

MH: We're putting the finishing touches on an interval fund that will invest in alternatives, such as private equity and hedge funds. This fund will be used to complement our strategies that primarily invest in the

public markets. Over the last decade we have tended to steer away from alternatives because the public markets have generally provided more attractive returns. However, going forward, we believe alternatives will be attractive investments and an important component in most portfolios.

With alternatives, size and scale become really important. Most individuals simply don't have the resources to meet the investment minimums of the more attractive offerings. These minimums can be in the millions of dollars and so these investments are mainly subscribed by institutions and very large family offices. We believe our interval fund will put our clients on a level playing field. Not only will they have access to these offerings, but the fund will allow them to maintain proper diversification among their investment holdings.

> **Serving in a fiduciary capacity means that we always place our clients' best interests ahead of our own. While this is good business, it's also the legal standard under which we operate."**

Q: Can you give any sort of final thoughts on why Hamilton Capital is a real good choice for dental professionals looking for a wealth management partner?

MH: There are 2 main reasons why Hamilton Capital is a good choice for dental professionals. Number 1, we're very familiar and highly experienced with dental professionals. We have many clients who are either general dentists or specialists and we've been working with them for a long, long time.

The second thing is that no wealth management plan is really effective without high-quality investment returns that compound over time. There is quite a difference between projecting returns and realizing them. At Hamilton Capital, our goal is to deliver the quality returns needed to make your plan a reality.

"We're moving out of being in the background and are more front and center"

LINDY BENTON
CEO and President of Vyne

Q: As a company, what really drives Vyne Dental and how does this impact the products and services you provide to dental practices?

LB: The company was started over 20 years ago as an electronic attachment service provider. There was an opportunity for workflow improvements regarding how images were sent to the payers to help practices get paid more quickly. That was the anchor of the business in the beginning.

As we grew and expanded our services, we identified other opportunities for workflow efficiencies. For example, how dental offices, both the staff and the doctors are communicating with other dental offices, with other dental staff, or even with the patient. There was not a secure email solution for these types of exchanges, so we expanded our portfolio with a product called Vyne Connect. Vyne Connect brought encrypted email to many of our customers. We're now one of the leading providers of encrypted email services in dentistry.

We saw another opportunity to continue to expand around revenue cycle optimization and earlier this year we acquired a company called Renaissance Electronic Services, LLC. Their core business is electronic claims processing and a back-end clearinghouse, Tesia Clearinghouse, LLC, for insurance companies. For a dental office, both the insurance claims as well as the attachments are very intertwined. The two solutions fit very well together under the Vyne Dental umbrella.

What drives us is continuing to look for opportunities where we can add value to our customers.

Q: How do you make sure dental practices understand both the need for these types of services as well as why Vyne Dental stands out?

LB: Many dental offices are using our solution anywhere from 200 to 300 times a month. The office staff is familiar with both the claims and the attachment solution, and we're offering more capabilities within the solution to give the practices more visibility on their claims. For this reason we're moving out of being in the background and are more front and center for these practices to be able to monitor their revenue cycle management, how effective it is, what the costs are, and their cash flows, rather than seeing claims go unprocessed.

In addition to that, the encrypted email is becoming more important to these practices, which is something they utilize every day.

Q: Do you think the industry understands the importance of this type of revenue cycle management and of secure channels for transmitting this type of information?

LB: I would say that most offices understand the importance of electronic claims. What they may not be aware of is that many companies have transactional fees per claim, per attachment, or hidden fees bundling it in with other services. I'm not sure everyone fully understands the risks of sending communications with standard email, so that is an area where we hope to bring more visibility.

We also do not require long-term contractual commitments from our customers. We stand behind our product. We know we're delivering great solutions and our customers love them and continue to use them.

Q: How does Vyne Dental keep itself ahead of changes in communications around health care?

LB: To begin with, our *Fast*Attach solution is HITRUST CSF-Certified, which is something we maintain annually. HITRUST CSF has become a widely adopted security and privacy framework across industries globally, so it's important for our customers to know we hold ourselves to these high standards of software security and privacy.

Another approach we have is to help our customers directly. Many times, practices will be using an old PC, and we can't communicate on the latest version of a communication protocol. What we will do as a courtesy is reach out to those offices and let them know that they're running computers that are not capable of using the safest communication protocols. Essentially giving them the opportunity to make those changes and make them aware of it so they can help make sure the office is more secure.

We also provide ongoing education and industry updates, through direct communications from Vyne Dental and via our partners who provide informative webinars to our customers.

Q: How do you manage Vyne Dental as a company that needs to be able to integrate and work with so many different platforms in the industry?

LB: When we began as an attachment solution, we spent those early years really trying to be neutral in terms of our ability and willingness to work with just about all the different systems that are in the market. That gave us a foundation to be able to adapt, evolve, and have the flexibility to serve as many dental offices as possible. This is in our DNA as a company, and it's an investment that we've been willing to make and will continue to provide to our customer base.

Q: Does Vyne Dental see itself as having a role as a potential medical-dental industry convergence happens? And what would that role be?

LB: In the framework of our encrypted communications, we have the immediate capabilities of being able to share things outside of the dental world. We can share patient records, we can share patient images with other medical professionals, and we are already working with the payers. We are evaluating other opportunities across medical and dental that have overlap, in partnership with our colleagues at Vyne Medical. This division of our company works primarily within the hospital and health system market and there are many opportunities for us to collaborate, especially as larger health care IT vendors and EHR vendors move into the dental space.

Q: Are there major challenges Vyne Dental sees coming both to your company and to the dental industry as a whole?

LB: Well everything related to COVID-19 and the way it caught the world off-guard, including the dental market, has been a major challenge. What makes me proud to work in the dental field is how the ADA responded and how quickly we were able to adapt, and then get back on track with dental practices reopening has been very positive to see.

Overall, the dental industry is trying to create products that give dentists more opportunity to practice dentistry in its simplest form. The more confidence a dentist can have in the systems and tools that they're relying on to run their business are giving them the opportunity to use their time for patient care. I don't look at those as challenges, but rather as opportunities that we must develop and create those tools.

Q: How has Vyne Dental supported your customers during the COVID-19 pandemic?

LB: As a clearinghouse and claims processing solution, it gave us unique insights into how dental productivity was rapidly declining, as well as how it was coming back. At the start of the pandemic, we redirected our internal teams for outbound reach to customers to explain how our tools can be used remotely, so customers could easily work from home. We also spent time working with our customers to make sure they could track what they had already earned and to make sure those claims were being processed. They were able to continue to manage those historical dialogues from home. As offices, unfortunately, experienced turnover with layoffs and furloughs, we provided additional training on our solutions for those offices since there were many new staff members using these solutions, and we continue to do this as offices reopen. For us, it's been about how we can help our customers to continue their cash flow because, with productivity down, every dollar counts.

Q: In terms of what's ahead for Vyne Dental, are there new things in the near-term that people should be on the lookout for?

LB: The most recent thing is that as of August 1, we have come together under our new brand as Vyne Dental. The ability to bring together our claims, attachments, and encrypted email solutions provide a healthy revenue cycle addition to most practices to complement their practice management system. We're excited to offer these solutions as a bundle called Practice Core, which is a phenomenal value for this level of functionality. We will continue to strengthen these solutions and explore other ways to offer benefits to the market.

Save time. Save money.

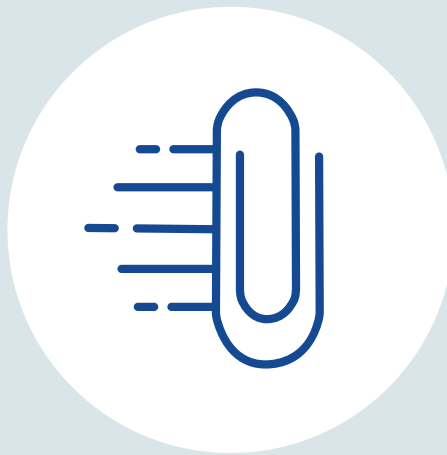**Vyne Dental** provides your practice with a unified electronic platform that makes processing claims easy, promotes growth in your business, and lets you work with confidence.

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⊘ HOW TO

INCREASE EFFICIENCY, PREDICTABILITY, AND DURABILITY IN CLASS I RESTORATIONS

A coordinated system of materials and light-curing technology optimizes chair time without sacrificing restorative integrity and esthetics. [by Robert G. Ritter, DMD]

WITH MORE PATIENTS demanding tooth-colored restorations, dentists face multiple choices and challenges in providing durable, functional, and esthetic solutions, especially when restoring large posterior class I and II lesions.[1,2] The most common esthetic solution for posterior carious lesions involves light-cured, tooth-colored direct composite restorative materials.[1,2] Using tooth-colored filling materials allows dentists to remove the carious lesion while preserving as much natural tooth structure as possible and seal the tooth from recurrent decay.

Although direct composite materials satisfy patient preference for esthetics, they often present dentists with a multitude of technique-sensitive and time-consuming protocols that require proper isolation of an operative site that is hard to access and hindered by poor visibility.[3-5] The use of efficient composite systems can limit this challenge. In addition, the key to restorative durability and functionality in direct posterior cases: proper photopolymerization of incrementally placed composite layers. Proper photopolymerization is critical for preventing material shrinkage, postoperative sensitivity, and marginal leakage.[6-8]

Advances in direct composite monomer technology and LED curing technology provide dentists with more efficient and simplified direct composite restorative systems that optimize treatment time without

sacrificing the final restoration's predictability and long-term durability.

Clinical Case
An 18-year-old female patient presented to the dental practice for a routine hygiene appointment and checkup. During a thorough clinical exam, probing detected "stickiness" on the occlusal surface of tooth No. 18, which was verified as isolated Class I occlusal caries (**Figure 1**). The agreed-upon treatment plan involved removing the caries using a conservative and minimally invasive approach to maintain the integrity of the tooth structure and retain as much enamel as possible for a durable, long-lasting restoration. The tooth would be restored using a tooth-colored composite material.

The patient was anesthetized, and the site was isolated using a rubber dam. A carbide bur was used to remove the carious lesion followed by a diamond bur to smooth and refine the angles of the preparation (**Figure 2**).

With the preparation design complete, the phosphoric acid, Total Etch from Ivoclar Vivadent, was applied to the enamel for 15 seconds (**Figure 3**) and dried using the Warm Air Tooth Dryer from A-dec. The self-etching technique takes advantage of the universal adhesive technology in Adhese Universal from Ivoclar Vivadent: Only the enamel is etched, creating maximum bond strength to enamel. The need to etch dentin is eliminated, which

protects and minimizes the chances of hypersensitivity.

After the preparation was thoroughly rinsed, Adhese Universal was applied (**Figure 4**), using the Adhese Universal VivaPen single-unit dose applicator, and air-dried (**Figure 5**). The adhesive was light cured for 3 seconds (**Figure 6**) using the Bluephase PowerCure, a high-intensity LED curing light from Ivoclar Vivadent.

Next, the first layer of flowable direct composite—Tetric Power-Flow from Ivoclar Vivadent—in shade IVA was placed (**Figures 7-8**) as a dentin replacement and cured for 3 seconds using the Bluephase PowerCure. This flowable composite coats the internal aspects of the cavity and ensures a complete seal against microleakage and recurrent caries. During polymerization, the initial visual high translucency

gradually changes to a more opaque shade that is close to that of natural dentin in value. The material's final opacity conceals the stained underlying tooth structure to optimize the esthetics of the final restoration.

After the flow layer was placed and cured, a layer of Tetric Power-Fill bulk fill composite from Ivoclar Vivadent in shade IVW was placed in a single 4-mm increment (**Figure 9**), sculpted using a contouring instrument and light cured for the manufacturer-recommended 3 seconds. Once curing and occlusal adjustments were made, the restoration was finished and polished using a silicone polisher (**Figure 10**).

Long-Lasting, Good-Looking Results
Using a single coordinated system of durable restorative materials and efficient, streamlined protocols for Class I restorations helps clinicians save chair time without compromising the integrity, predictability, and long-term durability of the final restoration.

Shortened 3-second cure times for 4-mm layers of composite materials minimize the risk of error, and the Bluephase PowerCure curing light's ability to detect movement away from the occlusal surface and alert the user to the potential of an inadequate result ensures restorative predictability and the proper depth of cure.

In this case, the patient was pleased with the treatment outcome and impressed with the short procedure time. ●

References are available online at dentalproductsreport.com.

Bluephase® PowerCure™
▸ Reliable curing performance for all light-curing materials due to polywave LED
▸ Short curing times starting from 3 seconds due to a high intensity up to 3,000 mW/Cm²
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AT A GLANCE

1. Preoperative photo of the occlusal cavity on tooth No. 18.

2. After proper isolation of the operative site, the cavity was removed using a carbide bur.

3. Preferential phosphoric acid etch was applied on enamel only.

4. Universal adhesive was applied to the site.

5. The universal adhesive was dried with a warm air dryer.
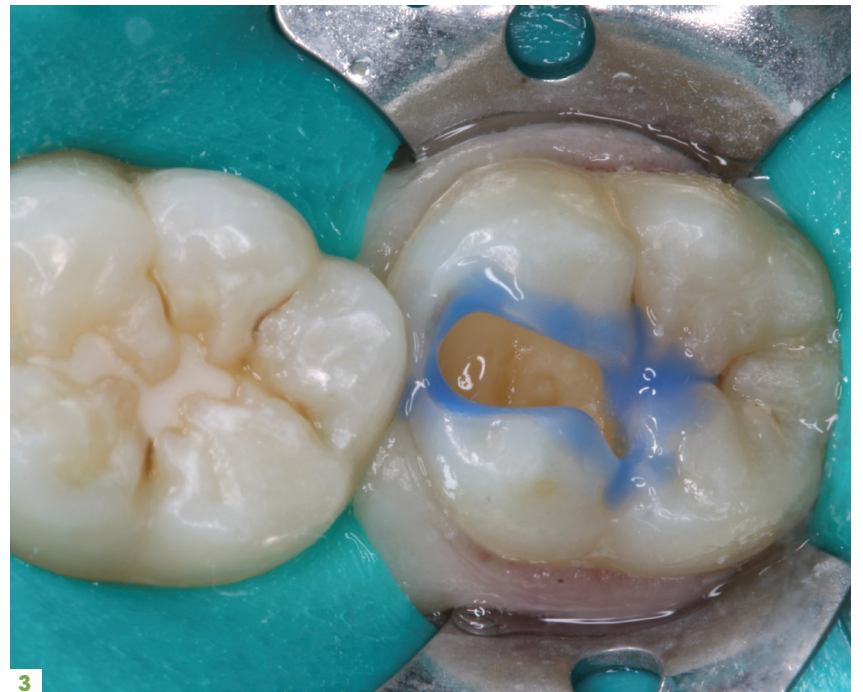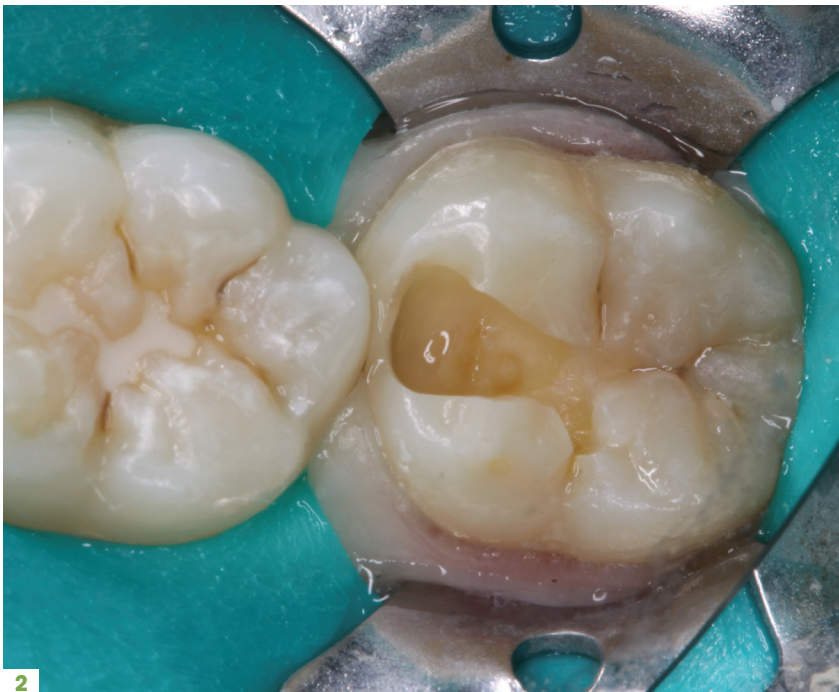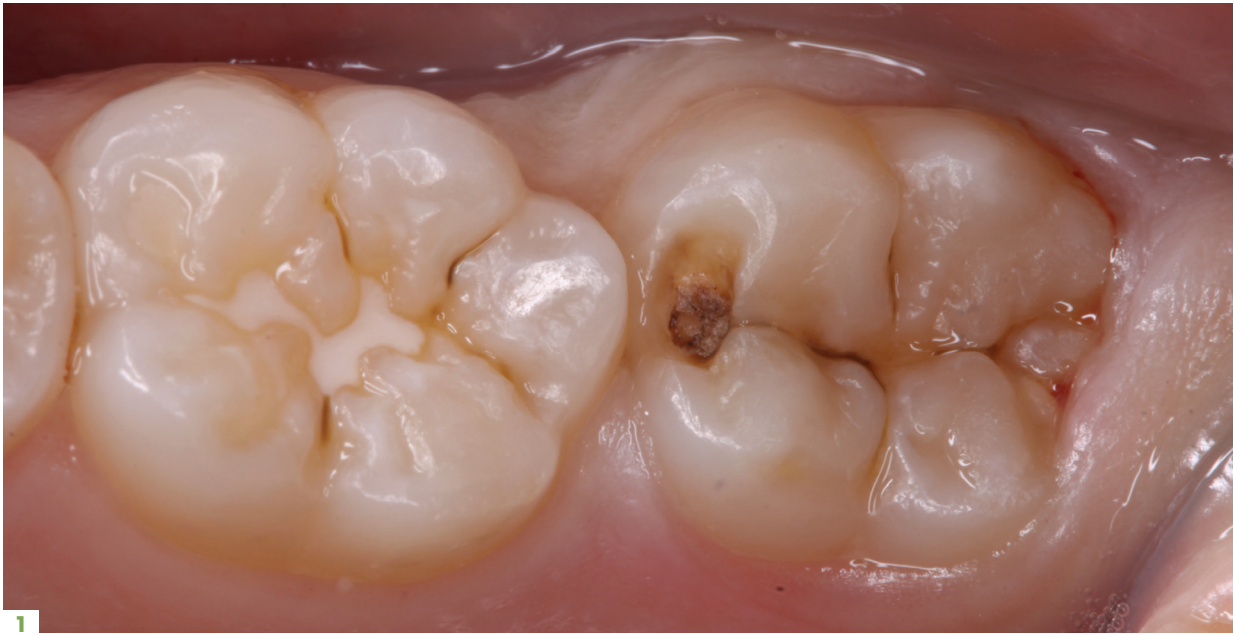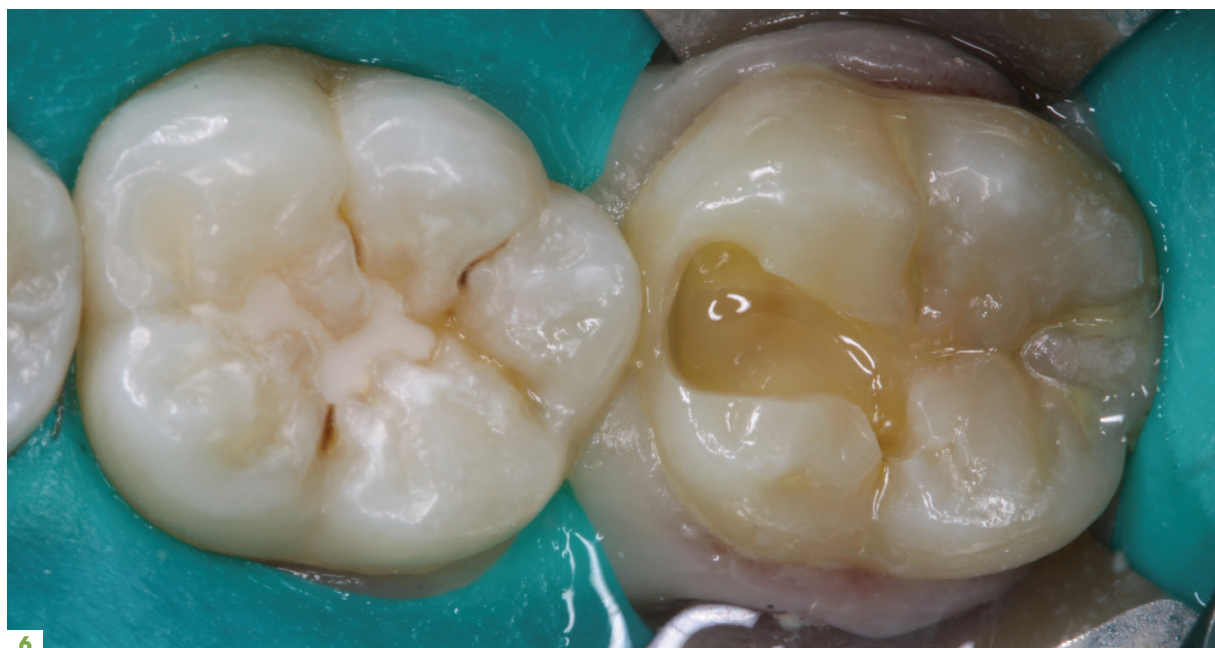
AT A GLANCE CONT.

6. The universal adhesive was cured for 3 seconds.

7. Tetric PowerFlow composite was applied to the cavity and light cured in a single step of 3 seconds.

8. Tetric PowerFill in shade IVW was applied to the cavity.

9. The bulk fill composite was condensed and cured for 3 seconds.

10. The final occlusal restoration.

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CIRCLE RS #23

The Perfect Fit for Ensuring Reliable Indirect Restorations

KATANA™ Zirconia and PANAVIA™ Cements from Kuraray Noritake Dental offer an optimal combination for providing high esthetics and durability. [by Jo Donofrio]

KARYN M. HALPERN, DMD, MS

CLINICIAN   TEAM MEMBER   INDUSTRY

Since 1983, Kuraray Noritake Dental, has provided innovative and exceptional technologies that have improved the quality of adhesive dentistry. As a manufacturer of both dental resin and ceramic materials, Kuraray has incorporated its technological expertise in adhesion into the fabrication of indirect restorations. Leading the way is KATANA Zirconia and PANAVIA Cements, an optimal combination for highly esthetic, durable, and reliable indirect restorations.

KATANA Zirconia is a high-strength ceramic material suitable for a variety of dental procedures.

KATANA discs feature a multi-layered technology with a preshaded color gradient, natural translucency, and the flexibility to make full contour prosthetics. Together, KATANA Zirconia and PANAVIA Cements are designed to make natural-looking restorations easier than ever.

"In my practice, we are heavily focused on CAD/CAM technology," says Karyn M. Halpern, DMD, MS, and the owner of Port Jefferson Smiles, a multispecialty, high-tech private dental practice in Port Jefferson Station, New York. "Using materials such as KATANA Zirconia and CEREC Solutions by Denstply Sirona, we are able to routinely provide same-day, single-visit full ceramic crowns, bridges, and onlays. After taking digital images, we design the restoration using the CEREC computer software, mill the block, and then sinter, polish, and cement it. Within a 2-hour appointment, the patient is able to go home with a finished restoration."

PANAVIA Cements ensure that the cementation of the restoration is both reliable and durable. Known for their durability to zirconia, PANAVIA SA Cement Universal and PANAVIA V5 also provide ease of use, esthetic value, reliability, and high bond strength. PANAVIA V5 is Kuraray's strongest cement and offers optimal margins, predictable restorations, and a strong and durable bond between KATANA Zirconia-based restorations and the tooth structure.

KATANA Zirconia gives practitioners a lot of control to balance out and manipulate the look of the restoration.

"The KATANA STML blocks have different gradients of translucency and come in many different shades. I can manipulate the restoration's position within this multi-layer block using the CEREC software to achieve the overall look and translucency desired," Halpern says.

The process is efficient, predictable, and precise. There are no traditional analog impressions to send to a lab, reducing the possibility of human error and eliminating the need for a second appointment.

Using the CEREC system, this zirconia can be milled without chipping and can be sintered in 18 minutes. The restoration can be completed within the scope of a chairside appointment without compromising the quality of the product.

Zirconia is a category of materials that has been around for several years. But having the KATANA Zirconia compatibility available within the CEREC technology allows the practitioner to create the entire restoration in one office visit, which benefits both dentist and patient.

"I started using these materials approximately 1 year ago, and like having control of the product I am delivering," she says. "I enjoy the artistic aspect of customizing restorations to make them look like real teeth. The tooth looks so natural that my patients often ask me which tooth has the crown."

Although they do not constitute a one-size-fits-all approach, KATANA Zirconia and PANAVIA Cements should be in every dentist's arsenal of products, says Halpern. "I believe these products have achieved the goal of best balance between strength and esthetics," she adds. "In my opinion, it is the best dental care that you can provide. I am very happy with the results and so are my patients." ●

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Outside-the-Box Sterilization Monitoring

In the midst of stricter infection control protocols, autoclave monitoring is often overlooked. The TerraGene MiniBio and the 3M Attest can change that. [by John Flucke, DDS]

JOHN FLUCKE, DDS

We've seen a lot of changes in the past 6 months. In some ways, it seems time truly flies, but with the next breath, you can hear yourself thinking, "Wait, that 'just' happened?"

This is a really strange time to be alive. In the short span of 6 months, we have seen our lives and our practices practically turned inside out. So many things have changed that I sometimes feel it's almost too much to process.

A true story here: Last week, I met an acquaintance whom I had not seen since before the entire coronavirus disease 2019 (COVID-19) catastrophe. He's a gregarious "big" personality who just lights up any room he enters. He walked up to me and stuck out his hand. There was a brief moment where I just locked up, unsure of what to do. Then, I figured, "This is why we have hand sanitizer," and I shook his hand. For those of you who know me, I'm a touchy-feely type, a hugger—but I hadn't shaken a hand in more than 6 months. It felt creepy—the same kind of creepy I'd probably feel if I reached into a mouth without wearing gloves. Until I got back to my hand sanitizer, I was almost painfully aware of my right hand and what might be on it. I sure as heck didn't get it near my face! As soon as I could, I slathered on hand sanitizer and then sat back to ponder

how different this was from just March of this year.

For more than 30 years, dentistry has had an amazing infection control protocol. We have always been on the forefront of keeping our patients and our teams safe. And we ought to be doing these things. I would venture to guess that we probably perform more outpatient services that generate aerosols than any other profession in health care.

I am very proud of what we have done in response to the COVID-19 pandemic. Dentistry has taken huge steps in the last few months to ensure the safety of those we treat and those we employ. Just even walking into most offices now looks totally different than it did 6 months ago and that's *before* you take into consideration the clinical changes we have implemented.

As Technology Evangelist, I'm always on the hunt for better, more efficient, and cost-effective ways to provide better outcomes for our patients and for our practices. One phrase never fails to elevate my blood pressure: "But we've always done it that way." I'm a firm believer that better ways to do things are always waiting just over the horizon. All we have to do is find them.

In the situation we currently face, a great deal of time and treasure has been put toward our protocols for infection control. Our profession has implemented massive changes in our infection control processes and systems, many of which are devoted to decreasing the odds of cross-contamination.

I'd like to discuss, though, a part of the system many of us probably haven't looked at closely in quite some time: monitoring our autoclaves. I think this is because autoclave use often happens where and when the doctor doesn't really see the process, and it has become just another standard task that is usually done by a delegated dental assistant.

Currently, most offices are utilizing some type of "sterilization monitoring service." Such a service works like this:

The monitoring company sells the office a supply of spore test strips. Of each set of 2, one strip is placed into the autoclave and processed in a normal sterilization cycle, while the other strip is not run and is used as the control. Upon completion of the sterilization cycle, the strip is removed from the autoclave and then both strips, properly identified as test and control, are sent to the testing facility.

Once the strips arrive there, both are placed in an environment where the spores they contain can be grown and are monitored. If the control strip shows

growth and the test strip does not, the test is considered successful and all is well. However, if both show negative growth or, even worse, both show positive growth, the test is considered a fail.

With a failed test, the dental office must be notified right away. Once notification is received, the autoclave is immediately taken out of service. A second test is run. If this test shows success, the previous test is considered an aberration and all is well. However, if a second failure occurs, something is seriously wrong with the autoclave and it requires service by qualified personnel.

This testing system works, but the real problem is the amount of time involved. If the test results are sent by mail, several days can pass between a failed test and the office's receipt of the notification. Also, if a second test is required, at least the same amount of time is "downtime" for the autoclave until a "pass" is received back.

Now what if there was a way for the office to know the results of these tests in less than half an hour? Would you be interested? I thought you would.

Two systems—the TerraGene MiniBio and the 3M Attest—have come to market and can do just that. These systems consist of an incubator and test-tube–like devices filled with spores and growing medium that are referred to as biologic indicators (BIs). I've been putting both systems through some clinical trials in my practice for well over a month.

In a manner similar to the spore strip test described above, an office takes one BI and marks it as "test" and another from the same box marked as "control." The test BI is run in a normal cycle. After the cycle, the tube should cool for 10 minutes. Then (in both brands) you break the seals on 2 tubes that mix any spores that are present with a growth medium. Next, you place both tubes,

▲ *The 3M Attest and the TerraGene MiniBio offer practices peace of mind at an affordable price.*

containing the control and test strips, into the incubator. The incubator then warms the BIs and monitors the tubes for fluorescence, which indicates spore growth.

If the incubator detects growth, a fairly loud beeping alarm sounds and the well that contains the failed tube is identified. On the 3M Attest, the failure is shown by a lit-up "+" sign; on the TerraGene, it's denoted by a red LED light.

Because there is always 1 tube (the control) that will test positive, the alarm will always go off. I think this is a good feature because it lets the user know the system is indeed working.

The TerraGene MiniBio has 3 wells, so it can test 2 autoclaves and the control simultaneously. Positive and negative results are indicated by green and red LEDs, and the device also contains a tiny printer. All results are printed on a thin strip of paper that can be saved for record-keeping purposes. The device definitely has a remarkable high-tech look, and even better, it runs the test cycle in an impressive 20 minutes.

The 3M Attest has 4 wells but lacks a printer. The LED indicators are built into the device's side. In addition to "+" and "–" for pass and fail, these LEDs also show the time left in the test. This device runs a test in 24 minutes (versus the MiniBio's 20), so you'll see "24…23…22…" etc, to indicate the time remaining. 3M definitely went for a 'less is more' esthetic with this device.

Each device also has a USB connection that allows results to be downloaded to a computer that runs software created by each company. The office can then digitally monitor and record results for safe, effective long-term record-keeping.

As for costs—which we must consider—I find both of these products to be incredibly affordable for the peace of mind they deliver. My best current information is that each incubator sells for around $600. The BI tubes cost around $4 each for the MiniBio and $5 for the Attest.

The biggest plus is the speed at which you get the results. Gone is the era of waiting days for them. Now, you can run a test quickly and extremely accurately in your office, anytime you would like, and have those results in less than half an hour. Again, I've been using both devices for more than a month and have been very impressed with the performance of both.

In a world where we are trying as hard as possible to ensure the strength of our decontamination, protection, and sterilization processes, in-house monitoring of a critical system such as this is essential. I can't imagine going back to the "old" way. ●

Best of Class 2020

2020 CELLERANT BEST OF CLASS TECHNOLOGY AWARDS

- **3Shape TRIOS 4** intraoral scanner
- **Apex Dental Materials Pinkwave** curing light
- **Apteryx XVWeb** imaging software
- **Bien-Air iOptima**[INT] electric handpiece system
- **Bravrr Inc BruxRelief** bruxism diagnostics
- **Carestream CS 9600** cone beam imaging system
- **Dental Smart Mirror SmartMirror** intraoral mirror/camera
- **Dentsply Sirona Primescan** intraoral scanner
- **Dentulu** teledentistry
- **exocad chairsideCAD** CAD software
- **GreenMark Biomedical Lumicare Rinse** caries detection
- **MMG Fusion MMG ChairFill** scheduling software
- **MouthWatch TeleDent** teledentistry
- **Nobio Ltd Infinix** dental composite
- **Shofu EyeSpecial** digital camera
- **Simplifeye Amplify** live chat
- **SleepArchiTx** turnkey sleep dentistry solution
- **Tokuyama OMNICHROMA** dental composite
- **Weave** communications software
- **YAPI** dental practice software

Get to know the dental products that earned the 2020 Cellerant Best of Class Technology Award [by Noah Levine]

Being the best can mean a lot of things to different people, but in general it means standing apart from peers and competitors by simply doing what you do more efficiently, more effectively, and more completely. When it comes to dental products this means making it easier to diagnose and treat patients and simplifying and automating practice operations. It also means setting a standard for others to follow.

The 2020 Cellerant Best of Class Technology Award winning products definitely meet this standard. Each year these awards are selected by a panel of dental technology experts who think deeply about the impact of innovative features and unique approaches to dental care. They evaluate not just whether a product does something impressive, but whether what it does offers something truly new, and sets a new benchmark for the industry to catch up to.

This year 20 winning products were selected across a wide range of product categories. It's not just scanners and software, but also materials and services that can open new avenues of patient care. Read on to learn about each of these products that truly are Best of Class.

NONGKRAN_CH / STOCK.ADOBE.COM

CS 9600

The CS 9600 CBCT system is a highly intelligent piece of technology. Intuitive features give the 5-in-1 system the capability to deliver exceptional image quality for more precise diagnoses while maintaining ease of use and patient comfort. This advanced system combines 2D panoramic technology, CBCT imaging, 3D model/impression scanning and 3D facial scanning, along with optional cephalometric imaging, to reportedly meet every clinical need.

Carestream Dental
800-944-6365 | **carestreamdental.com**
CIRCLE RS #27

> The CS 9600 has excellent imaging and unique patient positioning. There are several fields of view with high-resolution imaging, making it suitable for a range of dental specialties. It uses video cameras to aid in patient positioning. Digital, interactive guides are projected onto the patient's face on an integrated touchscreen interface that then walks the user through the positioning process.
>
> **— DR PAUL FEUERSTEIN**

Primescan

Designed to enable more precise scanning, the Primescan uses high-resolution sensors and short-wave light to reportedly capture up to 1 million 3D data points per second. The scanner can capture depths up to 20 mm, making it ideal for use with subgingival or deep preparations.

Dentsply Sirona
844-848-0137 | **dentsplysirona.com**
CIRCLE RS #28

> The CAD/CAM space is constantly changing but the new features and software of Primescan put it in the Best Of Class. Our focus is on the scanner itself which has added accuracy, greater depth of field, ability to scan well into sulci and speed. Even at shallow angles, Primescan is able to take highly accurate digital impressions of virtually the whole tooth surface, usually capturing in the first pass.
>
> **— DR PAUL FEUERSTEIN**

TRIOS® 4

The 3Shape TRIOS 4 combines scanning technology with caries diagnostic aid technology for both surface and interproximal caries. It has built-in fluorescent technology that's designed to aid in the identification of possible caries. Integrated shade matching saves time and simplifies lab communication, and AI technology automatically removes unneeded soft tissue from the scans.

3Shape
908-867-0144 | **3shape.com/en**
CIRCLE RS #29

> The best intraoral scanner 3Shape offers. It sets the standard for intraoral scanning. The only wireless intraoral scanner making it easy to take between ops. Caries detection and wear detection giving you enhanced diagnostics to better treat your patients. One scanner with multiple use cases is why TRIOS 4 is best of class.
>
> **— DR MARTY JABLOW**

EyeSpecial

Designed exclusively for dentistry, the EyeSpecial captures 12 MP images with simple, one-touch operations. It's lightweight and features a large LCD touchscreen for viewing images. It can be used with a wireless memory card to seamlessly send images from the camera to a tablet or operatory computer for simple and efficient treatment documentation and case presentation.

Shofu
800-827-4638 | **shofu.com**
CIRCLE RS #30

> The EyeSpecial is designed to grab the specific types of photos that we need in dentistry while still having the simple usability of a "point and shoot" camera. Shofu has done an amazing job of combining a tremendous high quality photo platform with the simplicity of a camera that anyone can learn to use in under 10 minutes.
>
> **— DR JOHN FLUCKE**

ChairsideCAD

exocad's ChairsideCAD provides clinicians with the freedom to choose the best hardware and software for single-visit dentistry. Derived from the renowned DentalCAD platform, which has been a signature solution for the dental labs for more than a decade, ChairsideCAD includes dentalshare, a robust, open collaboration tool for doctors and labs. Third party manufacturers' products, data, libraries, and services are easily integrated. Now, dental practices can easily add an IOS with CAD/CAM and develop expertise at their own pace.

exocad
855-EXO-4CAD | exocad.com
CIRCLE RS #31

> "exocad ChairsideCAD is the first complete open-architecture CAD software platform for single-visit dentistry. Easy integration with most intraoral scanners along with step-by-step instruction for CAD design makes fabricating restorations in-house or sending to your favorite lab simple. The default standard for many mills, printers, and scanners.
>
> — **DR MARTY JABLOW**

iOptima^{INT}

The iOptima^{INT} electric handpiece system is versatile and enables you to perform all your dental operations—restoration, endodontics, oral surgery, implantology and scaling. Fully integrated into your dental unit, the iOptima^{INT} system guarantees optimal space savings. It can be controlled either using an iPod touch or an iPad mini. The refined ergonomics and user-friendliness enable you to focus on the patient, while preprogrammed, customizable sequences of the iOptima^{INT} application make treatments easier.

Bien-Air
800-433-2436 | dental.bienair.com
CIRCLE RS #32

> "Bien-Air iOptima systems set the standard for electric handpieces. Whether for restorative, endodontics or implants, the precision handpieces, motors, and controllers make doing dentistry easier. With the introduction of iOptima INT, any dental unit can be upgraded to a fully integrated electric system for increased efficiency and infection control.
>
> — **DR MARTY JABLOW**

SmartMirror

EMERGING

Designed to revolutionize the dental mirror, SmartMirror combines a bright, sapphire mirror lens with LED lights and a video camera to not only provide clinicians with unprecedented intraoral visibility, but to document everything the mirror captures. The SmartMirror connects to a practice computer via Wi-Fi. An integrated microphone allows dictation to be captured along with the video feed, and the videos can be displayed live on-screen to allow patients and other clinicians to view ongoing treatment.

Smart Mirror Dental
info@smartmirror.dental | smartmirror.dental
CIRCLE RS #33

> "The SmartMirror is Best of Class because there isn't anything out there like it! It's a mirror that contains 36 LEDs: the oral cavity is illuminated very well and the mirror can record real-time videos. This provides a modern, innovative approach to patient education. In addition, the mirror can record dictations that can automatically integrate with a patient's electronic health record. This is truly the mirror of the future!
>
> — **DR PAMELA MARAGLIANO-MUNIZ**

XVWeb®

XVWeb utilizes cloud technology to deliver clinical image storage, optimization, and analysis as a cost-effective subscription service. The new XVWeb 3D module adds support for accessing, viewing, and securely sharing CBCT datasets via any compatible web browser in real time.

Apteryx Imaging
877-278-3799 | apteryx.com
CIRCLE RS #34

> "Apteryx XVWeb is your cloud based solution to imaging. This open architecture software allows for easy integration with your current imaging hardware from 2D to 3D to intraoral scans. It offers flexibility along with the security you demand for your imaging. Easy integration with practice management software and access to images from anywhere with an internet connection makes XVWeb best of class.
>
> — **DR MARTY JABLOW**

EMERGING

Infinix™ Flowable Composite and Bulk Fill Flow Composite

Infinix advanced dental restoratives—Flowable Composite and Bulk Fill Flow Composite—contain Nobio's proprietary QASi particle technology, which combines a high concentration of antimicrobial molecules that are covalently bound to a solid core. The materials are formulated to maintain the integrity of the restoration and protect the restoration from degradation by bacteria over time. The Infinix Flowable and Bulk Fill Flow Composites are ideal for posterior restorations.

Nobio
info@nobio.com | infinix.com
CIRCLE RS #35

"The idea is simple, while the science is pure genius. Nobio has developed a chemical with antibacterial properties and incorporated it into Infinix composite. Most composite restorations last just 5 to 7 years due to recurrent caries at the restoration/tooth interface. Infinix solves that problem by basically killing any bacteria that comes in contact with the restoration.

— DR JOHN FLUCKE

LumiCare™ Caries Detection Rinse

An aqueous oral rinse featuring proprietary nanoparticles that reportedly illuminate early carious lesions in teeth using a curing light. The rinse is designed to enable early detection and treatment of dental caries and can be used via a simple protocol. Images of detected carious lesions are reportedly easy for patients to understand The product is still waiting FDA 510(k) clearance for sales in the US.

GreenMark Biomedical
517-896-3665 | greenmark.bio
CIRCLE RS #36

"The ability to detect an active caries process before the tooth shows clinical signs is truly groundbreaking. LumiCare is a simple solution to help dental professionals identify dental breakdown at its earliest stages and encourage patients to manage their disease process with preventive measures. LumiCare will give dental professionals a leg up in our constant battle with dental caries.

— DR PAMELA MARAGLIANO-MUNIZ

EMERGING

PinkWave™

The PinkWave features patent-pending QuadWave Curing Technology that is said to enhance polymerization when compared to other curing lights. The new curing technology reportedly increases composite hardness by more than 20% while also decreasing shrinkage by 15% or more. The light features a large curing area and offers standard, ramp, and boost curing modes. The buttons are ergonomically placed and it's fabricated with a single-piece aluminum body. The light charges cordlessly and features a replaceable battery pack.

Apex Dental Materials
877-418-4782 | apexdentalmaterials.com
CIRCLE RS #37

"The PinkWave curing light from Apex is turning heads because of its characteristic pink light emission and elegant design. But its place as a Best of Class technology [winner] is also because of its patented QuadWave technology. PinkWave emits 4 different wavelengths, which allows for better polymerization, less shrinkage, and decreased postoperative sensitivity, among other benefits.

— DR CHRIS SALIERNO

OMNICHROMA

OMNICHROMA is said to be the first universal composite that matches every patient's tooth shade, from A1 to D4, with a single shade of composite. Its innovative technology utilizes structural color to match every tooth shade. Its 260 nm fillers are the precise shape and size necessary to generate red-to-yellow structural color as ambient light passes through the composite. The red-to-yellow color combines with the reflected color of the patient's surrounding dentition, reportedly resulting in a perfect match with no added dyes or pigments.

Tokuyama Dental
877-378-3548 | OMNICHROMA.com
CIRCLE RS #38

"OMNICHROMA is a Best of Class winner because it offers an esthetic solution for many restorative indications. It allows a dentist to get a perfect shade match most of the time without having to maintain an extensive inventory of composite. It's not only esthetic, it handles and polishes well. It's a home run for direct restoratives!

— DR PAMELA MARAGLIANO-MUNIZ

> "The concept of remote communication has been available for several years, but little used. Once the coronavirus disease 2019 hit our lives, it became an everyday method of connecting and the word Zoom became a mainstream term. Unfortunately, it is not a secure or HIPAA compliant method of exchanging medical information. MouthWatch/TeleDent has been working in this space for several years and has now become a leader in the quest, with Brant Herman at the helm. He was one of the most sought-after online speakers during the March/April lockdowns. In the past few years the Dentulu app was being developed, and Dr Arash Hakhamian and his team have been working on enhancing their app. Both of these have been selected as Best of Class and dentists should take a hard look at what they are doing. — **DR PAUL FEUERSTEIN**

Dentulu

Designed to connect patients to practices as well as clinicians to clinicians, Dentulu is a mobile dental app that fosters online communication via an encrypted, HIPAA-compliant network. The app allows patients to schedule appointments, as well connect with a clinician for teledentistry appointments conducted via the platform. It features an intuitive user interface and can be used to view and send photos and other clinical information.

Dentulu
888-905-0226 | **dentulu.com**
CIRCLE RS #39

> "Dentulu is a teledentistry and mobile dentistry platform. It allows dentists to connect with dentists, patients to connect with dentists, and patients or dentists to connect with other industry professionals in an affordable, secure application. Dentulu is on a HIPAA compliant platform which enables you to safely exchange patient x-rays, images, and chats. This includes live video calls and appointment scheduling.

— **DR PAUL FEUERSTEIN**

EMERGING

TeleDent

TeleDent is designed to optimize workflow to make collaboration and communication more efficient. It is designed to support large referral networks and multiple locations. The platform includes an enhanced user interface, teledentistry appointment management, task assignment, optimized synchronization, audio recording, and an API for connectivity and integration with digital imaging, EHR systems, and more.

MouthWatch
877-544-4342 | **mymouthwatch.com**
CIRCLE RS #40

> "TeleDent is the communication arm of MouthWatch. First in the industry, it is a HIPAA-compliant secure portal to allow secure patient messaging, live video conferencing, cloud collaboration, and more. TeleDent enables remote treatment planning, supervision, and collaboration in real-time and asynchronously. There is also a portal to securely store and share case information and images.

— **DR PAUL FEUERSTEIN**

EMERGING

BruxRelief

Designed to help document the clinical situation for patients exhibiting signs and symptoms of bruxism, BruxRelief is a cloud connected wearable device allowing patients to assess masticatory muscle activity from their own home. Both clinicians and patients can see the assessments right away in the associated app. Data collected by the system makes it easier to prescribe treatment and monitor progress.

Bravrr
720-432-6156 | **bruxrelief.com**
CIRCLE RS #41

> "BruxRelief helps dentists diagnose and treat bruxism without having to wait for signs of tooth wear. Patients wear a comfortable headband for a few nights while a smartphone app captures data on their clenching and grinding habits. Dentists can prescribe more nightguards and other therapies with greater patient buy-in and diagnostic confidence.

— **DR CHRIS SALIERNO**

SleepArchiTx™

Designed as a turnkey solution to provide clinicians with the confidence needed to treat sleep breathing disorders, SleepArchiTx offers unique 1:1 doctor-to-doctor clinical consults and medical doctor collaboration to increase clinical knowledge and provide confidence and expertise. 24/7 support for staff drives implementation, while turnkey medical billing and many sleep appliance choices provide a 1-stop shop.

SleepArchiTx
888-777-3198 | **reachus@sleeparchitx.com**
CIRCLE RS #42

> "Many dentists have dabbled in treating sleep disordered breathing, only to get in over their heads clinically or to get frustrated getting medical benefit coverage. SleepArchiTx streamlines the diagnostic, treatment, and payment processes by training your entire team and providing a turnkey workflow playbook.

— **DR CHRIS SALIERNO**

ChairFill

Thinking and running all the time in the background, ChairFill will automatically grow your patient base and achieve your practice production and revenue goals. The software monitors available chair time and mines patient records to identify the right kind of patients at the right time. It can selectively search patient records for the most profitable patients and proactively fill the schedule. ChairFill detects last minute cancellations and fills those openings. It also can manage marketing campaigns and help create a positive brand image for your practice.

MMG Fusion
844-938-7466 | **mmgfusion.com**
CIRCLE RS #43

"An empty operatory chair means lost revenue and lost opportunities to serve your patients. Contacting patients and filling that chair time is laborious and inefficient. ChairFill by MMG Fusion automates this process and allows for customizable campaigns to incentivize patients to fill your schedule.

— DR CHRIS SALIERNO

Weave

Weave gives businesses instant access to what they need to know and do for each customer the moment he or she calls, facilitating more meaningful and productive interactions. The VoIP phone system combined with a desktop and mobile app improves scheduling, customer response, online reputation, team workflow, revenue generation, and more.

Weave
888-579-5668 | **getweave.com**
CIRCLE RS #44

"Weave uses the internet to perform office communications, allowing practices to securely use the HIPAA compliant Weave app to text patients. You can also call or text patients from a personal device using the app to appear as if you are communicating from your office. Weave also connects to practice management software to provide the front desk with patient information as soon as the phone rings.

— DR JOHN FLUCKE

YAPI™

Designed to help practices operate in a paperless environment, YAPI is an automated practice efficiency software that incorporates everything from electronic dental forms to automated appointment reminders. The system automates functions to help dental professionals focus on clinical care rather than paperwork and integrates seamlessly with leading practice management platforms. A practice dashboard, online remote access, and intra-office messaging make sure everyone has access to the information they need when and where it's needed.

YAPI
949-535-1059 | **yapiapp.com**
CIRCLE RS #45

"YAPI is a standout because it is a software solution that cleans up many inefficiencies in a dental practice. It allows offices to be truly paperless; no more scanning or having to take extra steps to integrate paperwork. In addition, communication within the office and with patients has never been more effective. When offices are efficient and communicating, clinicians can provide more personalized care.

— DR PAMELA MARAGLIANO-MUNIZ
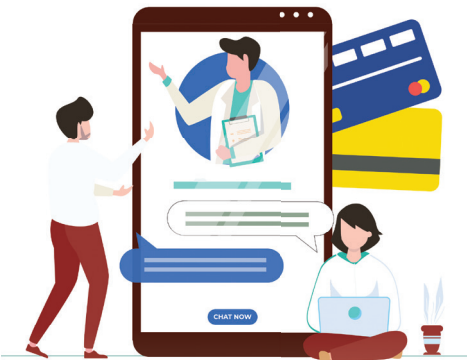
Amplify

Designed to help practices connect with prospective patients who visit the practice website, Amplify provides 24/7 live chat services. Amplify's team of Smile Specialists are trained to help find patients who fit your practice and then schedule them directly into your practice management solution. All information is managed via an encrypted, HIPAA compliant portal. The service can be connected to other Simplifeye solutions to create a comprehensive virtual platform for interacting with patients.

Simplifeye
646-846-7467 | **simplifeye.com**
CIRCLE RS #46

"Amplify is a digital concierge service provided by a live human who communicates to website visitors through a dedicated chat window. The Amplify service runs 24/7 365 and can be delivered in multiple languages. The concierge collects the information to schedule the patient, and the chat transcript is available. Amplify sets the office apart and increases the number of quality appointments made.

— DR JOHN FLUCKE

A DIGITAL TRANSFORMATION

How EHR, teledentistry, and "next-generation" software are changing the face of dental patient care. [**by Mike Uretz**]

We are in the midst of a dramatic dental software revolution accelerated by exponential innovation in technology. When we look back on the next couple of years, we will find that they represented the beginning of a sea change not just in technology, but in the ways that dental groups, practices, and dental service organizations (DSOs) do business and address patient care.

Having been involved with both medical and dental software technology and innovation for more than 20 years, as a software and IT consultant, educator, and thought leader, and previous software development manager, I can tell you that these are exciting times in dentistry. They remind me of when "next-generation" software technology changed patient care models in medicine.

Through that earlier technology revolution, I learned that organizations whose leaders embraced the technology advancements continued to be successful, and those whose leaders kept their heads in the sand fell behind and failed to keep up with their counterparts.

This was, and remains, true not just for groups and practices, but for vendors as well. In medicine, I saw innovative, aggressive software vendors move to the top of the heap, and vendors who did not innovate or embrace new technology models fell behind, and in some cases, went out of business.

As a consultant helping groups, DSOs, and practices evaluate and purchase software technology, I've been looking forward to software innovations that address and improve not only practice management operations but also clinical operations in patient care.

I believe these innovations will help my clients continue to provide exceptional patient care and outcomes, and thus differentiate themselves from competitors who don't embrace these important software technologies.

> " **An EHR can instantly give you real-time, research-based information on how you might handle a given problem.** No provider can keep up with all current research, so having a tool that can offer clinical decision support helps…"

I am continually fascinated by innovations brought to market by forward-thinking vendors. Unfortunately, for the most part, dentistry has lagged behind, with the main software focus on traditional areas of practice management. But just as medical software transitioned a few years ago to put major emphasis on clinical and patient

▲ *Carestream is developing software to provide automated customized workflows to reduce the need for in-depth training for clinicians.*

> "With custom-developed clinical workflows based on machine learning, the goal is to provide excellent clinical outcomes with all levels of provider skill sets. Intelligent software will also be able to track the progress within workflows…"

care innovations, dentistry is beginning to follow that same path.

So, what is "next-generation" software? By definition, it is "any method or technology that is expected or intended to supersede present-day techniques." What does this mean in the context of current dental software technology and functionality? Well, I could write a book about all the innovative clinical and patient care–oriented features and functionality that are being embraced by innovative software vendors on a daily basis, but our space here is limited.

In this article, I've distilled and organized some of the state-of-the-art software technologies, categorized in a few major areas, that are helping to change the industry. You'll get a glimpse into what areas you should be thinking about as you contemplate how your future as a dental practice, group, or DSO will be dramatically changed by this clinical software revolution.

Dental EHRs
Electronic health records (EHRs) have been dramatically changing health care over the past decade and are finally being integrated into some dental software platforms. But be clear: When we use the term EHR, we are not just talking about electronic dental charting capability. I have talked to several groups, DSOs, and practices who believe they have an EHR system, when in

fact, they just have paperless charting. A true EHR system should capture individual data fields via customizable clinical templates in a structured database so they can be used for all kinds of patient care–related features.

With the growing sophistication of EHR functionality and features that are being developed by some vendors, tools are emerging to support oral–systemic health growth. In the past, the general dental community's overall impression was that oral–systemic health was mostly about gum disease and heart disease. But more and more research results are showing links among temporomandibular joint disorder, metabolic pathway interferences, oral cancers, and other diseases and conditions.

An EHR can instantly give you real-time, research-based information on how you might handle a given problem. No provider can keep up with all current research, so having a tool that can offer clinical decision support helps providers make intelligent decisions about their patients based on information in clinical databases.

Note that there is never any requirement to follow the guidelines that are presented, but it's helpful to have evidence-based information while you're making decisions. With an EHR, you can automatically retrieve possible courses of treatment related to a

patient's problems and issues.

Although the use of analytics and business intelligence is becoming more common within the financial and operational aspects of a DSO or group, we're just starting to see the rise of EHR and analytics use when it comes to clinical patient care.

With the utilization of structured data within EHRs, an intelligent organization can use clinical data from past visits to improve outcomes for their patients. With patient clinical data residing in a relational database coupled with the use of analytics tools, a DSO or group can improve patient care based on how it has performed successfully or poorly in the past.

Importantly, dentistry and oral health shouldn't be considered as an individual silo, but as a major component in a patient's overall health care. Over the years, and at an expanding rate, oral–systemic health research results have shown this to be true. However, in medicine, patient data can be shared among hospitals, primary care physicians, and specialists through the use of EHRs, but we typically don't find dentistry and oral health included in this network of information.

This is changing: Research and case studies point toward the positive impact of coordinating dental and medical patient information, as well as of providers collaborating across these disciplines.

I've given numerous presentations on the growing use and application of dental EHRs, in which I note the growing standards for interoperability between medical and dental systems. When a patient is sitting in the operatory, it's very possible that a dental provider could best serve that patient by electronically accessing their medical information including all medications, diagnoses, procedures, medical history, and other clinical factors that weren't provided by the patient.

With an EHR, the necessary medical information should be at their fingertips. With the burgeoning growth of interoperability and health information exchange, the medical provider, in turn, should be able to receive similar information electronically into their system from the dental provider. Thus, EHR technology helps facilitate this collaboration and team approach; without it, such collaboration would be much more difficult, if not impossible.

For the most part, dental organizations are just starting to embrace EHRs as critical to their operations. Contrary to what some in the dental industry believe, standards actually are in place for the sharing of patient information among systems in health care supported by structured data-based EHRs. And this EHR interoperability isn't just for sharing clinical data between medical and dental groups. Isn't it just as impor-

tant to share patient data within the dental industry between general dentists and specialists?

David Danielson, MBA, product manager at Henry Schein One, has been on the front lines of the interoperability revolution. He notes that in addition to evolving software technology and networks for interoperability, the success of interoperability in improving patient care rests on 2 additional factors: getting more relevant information into the integrated patient record; and being able to pull information from not just the patient's providers but also from devices and applications that the patient uses in their daily life.

We are changing from a reactive health care world to more of a proactive one, as intelligent systems and databases will be able to spot information trends that highlight potential health problems.

Intelligent Rules-Based Workflow and Worklist Management

For years, I've been talking to dental software vendors on behalf of my clients, looking for the same customizable, intelligent rules-based workflow and worklist management functionality that I have seen in medical software.

Ed Shellard, DMD, Carestream Dental's chief dental officer, and Jeff Telford, Carestream's director of software product management, shared with me how intelligent rules-based workflows can help provide optimal patient care. Carestream Dental's software as a service, Sensei Cloud, is designed to provide optimal clinical results irrespective of the experience level of providers.

This is especially relevant when you get to the areas of DSOs or corporate dentistry where turnover is more common. Sensei Cloud offers automated workflows that reduce the need for in-depth training for

practitioners and staff. Carestream Dental feels clinicians shouldn't have to adapt to the software, rather the software should adapt to the way clinicians work.

Currently Carestream is working to add customized clinical workflows to Sensei Cloud that will offer rules-based logic to take a clinician through a given process, prompting them at various steps and providing functionality that allows them to take relevant actions. Because Carestream offers both imaging hardware and dental software, the ultimate goal is to merge the imaging platform with the practice management software in a single solution to produce a unified clinical workflow that automatically presents the steps needed in a patient clinical visit, thereby reducing the level of training needed.

Sensei will include additional levels of decision support capability that will provide both a determination of what type of resources and/

or skill sets are needed on a certain case, and procedure recommendations based on the underlying imaging. With customized clinical workflows based on machine learning, the goal is to provide excellent clinical outcomes no matter the level of experience of the provider. Also, new Intelligent features will be able to track the progress within workflows and at various steps so patients can be notified if things aren't moving according to plan.

Jana Macon, EVP of customer success at Curve Dental, is excited about Curve's introduction of automated worklists ("Smart Action Lists") and automated workflows as part of Curve's new, integrated patient engagement engine. Curve is incorporating rules-based, customizable, intelligent worklists that are automatically generated by the patient engagement engine.

For example, a group or practice can create a campaign with a series of "if-then" rules to kick off reminders

▲ *MouthWatch enables the clinician to explain the recommended course of treatment and make a strong case for acceptance with such visual aids as radiographs and intraoral photos.*

> **"As image management systems become more sophisticated, you'll be able to search and filter for specific images in several different ways. Analytics can be performed on different devices."**

to specific patient groups. Depending on the patients' response to those reminders, the system will create specific tasks on the Smart Action List for the front office to complete.

Rules-based workflow management is revolutionary for dentistry as it creates automation, enforces best practices, and delivers an auditable trail of all activity that occurs.

Also, the Smart Action List is customizable, filterable, and dynamic, allowing for group collaboration so staff can triage the list until everything is completed.

Soon this technology will be used to mine treatment plan data to produce campaigns that automatically target specific patients for needed procedures. The tool is designed to make patient communication easier and far more efficient for the staff in order to facilitate improved oral health for patients.

3D Image Management, Machine Learning, and Practice Management System Integration

Patrick Williams, technical director of Apteryx Imaging, is in the thick of developing "next-generation" imaging software platforms. Williams points out that there has been an explosion of 3D imaging devices, and they need to be efficiently managed on one platform. Real-time cloud imaging is more of a reality now than previously, because of much successful work in 3D optimization. Apteryx is developing a cloud ecosystem for 3D image manage-

ment from a capture, data organization, and distribution perspective.

Because 3D imaging is growing more popular in the cloud, Apteryx developed a 3D viewer to support that. Instead of burning CDs or sending unsecured 3D images through email for distribution and/or radiographic review, which can be problematic because of the large sizes of 3D files, you log into a secure portal and receive the images quickly in a secure environment.

The ease of moving 3D images means enhanced overall patient care: Specialists as well as the provider can review images. Radiologists can collaborate on sophisticated cases just as they do in the medical world. One great example: A provider might not have either the time or the skill set to efficiently plan an implant case based on imaging, but now, he or she can efficiently send images with cloud-based distribution to a radiology firm with expertise in designing and planning the type of implant case in question. After review, the radiology firm develops 3D models to assist the provider in the procedure and sends

them, also via the cloud.

The exciting application of machine learning to imaging diagnostics is advancing quickly, says Williams. Based on quick, real-time analysis of large data sets, an intelligent imaging system can pinpoint areas of concern on which the provider should focus. This is a game-changer in clinical diagnostics, Williams notes.

What is also remarkable from a quality assurance standpoint is that you'll be able to do analytics on the quality of captured images and report back on potential issues. For instance, in a multilocation group or DSO, the clinical manager can review images from various locations, easily discern if problems exist, and implement steps to rectify them.

Brent Garvin, senior product manager of Planmeca, discussed the imaging management technology contained within the Planmeca Romexis® software platform with me. An integrated platform with one central database, he says, is key to managing all 2D images, photographs, intraoral camera images, 3D images, and CAD/CAM. This

way, the clinician doesn't need to go to different software modules to get the information.

Image collaboration and sharing among providers is made easier with the HIPAA compliant Planmeca Romexis Cloud service. Images transported via the cloud are immediately made available within the dental software itself and it alerts the user when images are available for viewing. Conversely, the clinician sending the image also gets notification that the file has been received.

Collaboration between dental and medical professionals is becoming more important, especially in targeted growth areas such as sleep medicine. From a patient education standpoint, presenting 2D and 3D images is helpful for case acceptance.

Garvin outlined how Planmeca's Dental PACS solution can support CAD/CAM as well as standard 3D formats. The growing sophistication of image file management systems allows clinicians to search and filter for specific images in a number of different ways. Analytical data on networked devices give the dental organization the ability to monitor and track equipment usage and helps with scheduled maintenance.

Danielson of Henry Schein One explains that the future will bring a closer level of integration between imaging software and EHRs with no need for "bridging" software, and once images are directly placed into EHRs you'll be able to do much

more with the image data. Shellard and Telford at Carestream agree, noting that this higher level of integration is built into their practice management system because they control both the hardware and software development.

Teledentistry, Virtual Care, and Online Collaboration

These days, I recommend that all my group, DSO, and independent practice clients consider integrating various aspects of teledentistry into their overall software plans. As I discuss in my eBook "The Teledentistry Survival Guide," this technology is much more than a tool to cope with the coronavirus disease 2019 (COVID-19) pandemic. Most experts agree that it is essential in a post–COVID-19 world where, for many reasons, dentistry will morph into a combination of virtual and onsite workflows.

Online web portal–based forms management allows the patient to have all relevant information regarding their case submitted to their provider before they step foot in the practice. In addition, much of the follow-up care can be done virtually, which will encourage better compliance

I spoke to Bill Jackson, DDS, chief operating officer of Virtual Dental Care, about where teledentistry-based case collaboration among providers is headed. In creating their cloud-based product, Virtual Dental Care sought to facilitate secure synchronous and asynchro-

▲ *Planmeca's Dental PACS solution can support CAD/CAM as well as standard 3D formats.*

nous communications for one-to-one, one-to-many, and unlimited subgroupings of patients, with exchanges among dental professionals, medical professionals, subject matter experts, patients, and any other appropriate parties.

With Virtual Dental Care's product, any subscriber can invite others to join their network. Once a professional is in the subscriber's network, referral is easy. Simply identify the patient, then choose the professional and the records to be shared. Once the records have been

made available for sharing, both the professional and the patient are informed via text/email.

The product also includes the ability for the subscriber to create an unlimited number of groups—public or by invitation only—for any users in their network. Group members are informed when any group-related activity takes place. This concept need not be limited to case collaboration. The potential is endless: teaching and learning new techniques, mentoring, introducing patients to a specialist,

▲ Apteryx Imaging's XVWeb cloud-based imaging software.

using a translator, and so on. What started out as a design to easily refer patients to specialists or to peers has now turned into a tremendous tool to maximize treatment outcome through very powerful peer-to-peer collaboration.

Brant Herman, CEO of Mouth-Watch, has some interesting takes on why teledentistry software will continue to help groups, DSOs, and practices be successful post COVID-19. Teledentistry does not necessarily add additional steps to the traditional office workflow, he explains. In most cases, it replaces existing steps with safer, time-saving, virtual equivalents. For example, many patient encounters—including new patient registration, hygiene home care instruction, postoperative evaluations, provider consultation, case presentation, and specialist referral—can be conducted virtually as live discussions or with convenient messages and recorded videos.

Live video conferencing brings a "face-to-face" component to communication that makes the patient/ clinician dialogue more personal and instills trust. An important added benefit is that teledentistry encourages patients to ask questions as they arise and to actively participate in maintaining their oral health and ultimately their overall health. The result: better total health outcomes.

People neglect their dental care for various reasons, including lack of time, travel obstacles, anxiety, and difficulty finding a dentist with whom they feel comfortable. Teledentistry addresses all of these concerns, with convenient virtual consultations that can provide the patient with additional convenience and peace of mind prior to being scheduled for an appointment.

MouthWatch uses teledentistry to enable the clinician to explain the recommended course of treatment and make a strong case for acceptance with such visual aids as radiographs and intraoral photos. Because the patient is in the comfort of their own home, they are more relaxed, and thus more likely to understand and accept the treatment plan; this in turn enhances their patient care. What's more, presentations of more complex treatment plans can include key specialists and the care team for a more effective, coordinated talk.

Asynchronous functionality allows robust communication and collaboration to take place in the background, not necessarily in real time, says Bryan Laskin, DDS, founder of Opera DDS. According to Laskin, there are 3 major use cases of asynchronous teledentistry: triaging emergencies, virtual consultations, and ongoing monitoring. He also points out that electronic referrals are a great opportunity for teledentistry; he characterizes current referral procedures as archaic.

Laskin discussed a teledentistry-related area of communication that's not examined as much as it should be: the use of cloud-based teledentistry in interoffice and intraoffice communication with care teams. Too often, teledentistry focuses on provider-to-patient interactions, but provider-to-provider and team member-to-team member communication is key

to improved patient care as well. Opera DDS developed cloud-based electronic interoffice communication to support the referral loop as well as robust intraoffice electronic communication processes that allow you to make little decisions throughout the day and to coordinate care in ways that were previously not possible. The care team can use different devices, such as phones, tablets and laptops, to communicate throughout the day.

Another area worth exploring is the importance of the user interface. This is becoming much more flexible and intuitive thanks to new front-end web development technology. I spent many years managing software development teams, and I wish I'd had today's innovative, powerful development tools available at the time.

The idea of combining synchronous and asynchronous teledentistry functionality in a common user interface, which also will include documentation, will make it easier to manage workflows. Simplified, intuitive user interfaces will rule the day.

Finally, Laskin adds that asynchronous teledentistry coupled with EHRs for documentation represents enormous potential, and I agree. Although in a perfect world, there is hope for integration between teledentistry solutions and EHR solutions, and numerous vendors are

▲ Curve Dental is incorporating customizable, intelligent rules based work and task lists into their work list builder.

working on this, we have no guarantee as to what level of integration will ultimately result. So, the more that an EHR is incorporated into the teledentistry workflow, the better.

Where Do We Go From Here?
Even more examples of enhanced patient software technology are in progress or on the horizon. For now, I've introduced you to some of the current major efforts to give you guidance and direction as you consider "next-generation" functionality whether you're a group, DSO, or practice. These tools will help you successfully adapt to the transformations in our industry that will affect patient care for years to come.

To be most successful, do your due diligence when evaluating future investments in software, and strive to be as educated as possible regarding other available innovative software features that weren't covered here. And again, as mentioned earlier, you can either be a person

who chooses to keep your head in the sand regarding dental software technology advancements, and fall behind the curve, or embrace the future of improved patient care with enhanced technology. ●
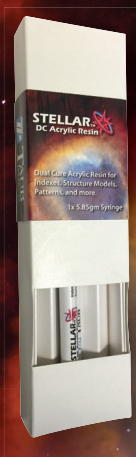
ABOUT THE AUTHOR
Mike Uretz is a nationally recognized expert in dental software, electronic health records (EHRs), and teledentistry. He is the founder of DentalSoftwareAdvisor.com and is the dental software editor for Dental Products Report. As a leading industry consultant and educator, Uretz has helped dental service organizations, dental groups, and practices evaluate and select software vendors and solutions, structure and negotiate vendor contracts, and provide vendor management. He also has assisted dental clients with obtaining millions of dollars in technology subsidy payments through the EHR Incentive Program. Uretz can be reached at mikeu@dentalgrouppartners.com or 425-434-7102.
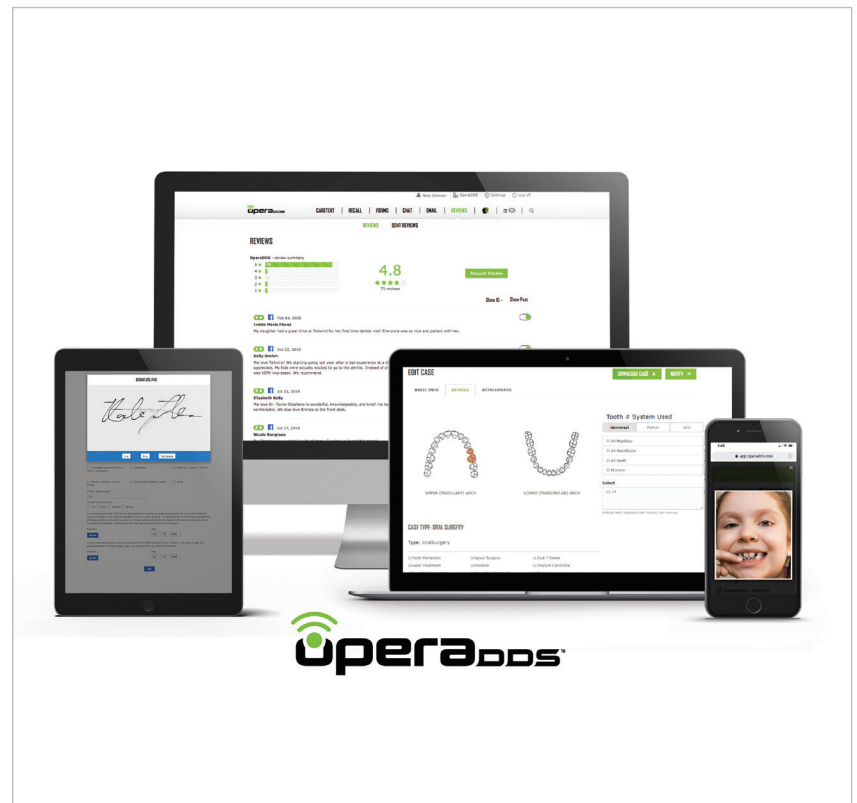
◤ With Opera DDS, the care team can use different devices, such as phones, tablets and laptops, to communicate throughout the day.

This practice management software solution handles it all, safely

Many practices do not have the software to facilitate low-touch safety precautions. That's where Curve comes in. [compiled by Kristin Hohman]

Information provided by Curve.

Curve Dental
866-351-0749 | curvedental.com
CIRCLE RS #53
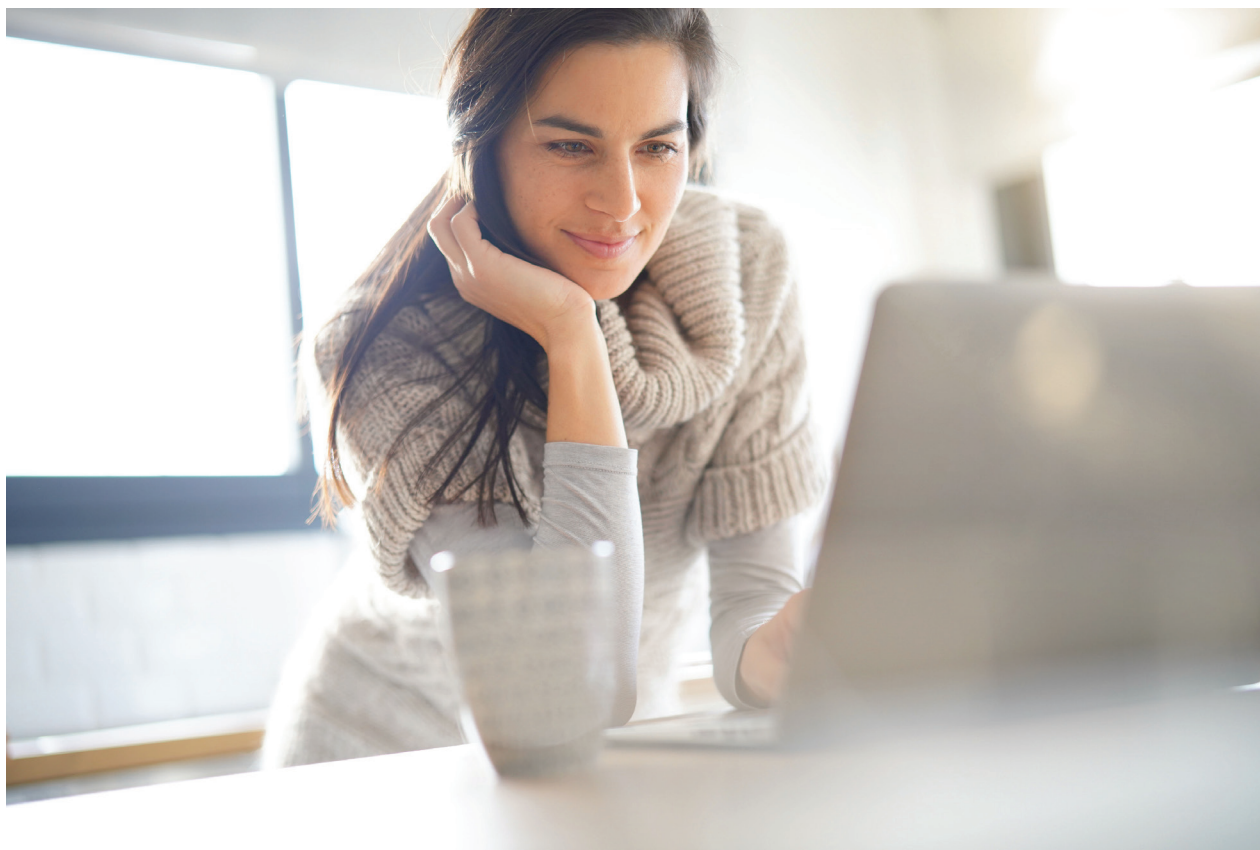
⇘ THE PROBLEM

Safety in today's dental environment demands protocols that minimize patient time in the practice's office

However, many dentists do not have the right practice management software to implement low-touch or no-touch workflows that enable both patients and staff to complete administrative tasks remotely.

⇘ THE SOLUTION

Curve Solution

- Low-touch/no-touch tools, such as Smart Forms and Patient Portal, enable patients to complete forms and facilitate electronic payments safely from their homes, minimizing patient time in the practice to improve the safety of staff and patients

- Easy remote access to Curve Hero allows staff to schedule and reschedule patients, and handle billing from anywhere

- Business Intelligence that produces robust reports and dashboards for actionable insights into process improvement, which dentists and their consultants can access anytime, from anywhere

- 24/7/365 world-class customer care, with support calls answered in 1 minute and cases resolved in 8 minutes, on average

- Best-in-class cybersecurity protection, including regular third-party intrusion testing

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◀ **Medit i500**

The Medit i500 intraoral scanner features unparalleled performance at a competitive price to deliver a fast return on investment. An open system for integrated CAD/CAM workflow allows the export of STL files for easy file transfer and optimized collaboration with the lab. An intelligent scan-detecting algorithm with 2 high-speed cameras makes for quick and efficient intraoral scanning, with no need for powder.

Medit Corporation
medit.com
CIRCLE RS #55

Easy, economical entry into intraoral scanning and digital impressions

The Medit i500 intraoral scanner supports full chairside workflows for one clinician and his team—here's how. [**by Joe Maida**]

MATTHEW ST. GEORGE, DDS

CLINICIAN   TEAM MEMBER   INDUSTRY

Matthew St. George, DDS, a general practitioner who opened the doors of his own practice, St. George Family Dental, in 2010, prides himself on staying up-to-date on new dental technologies, procedures, and techniques.

With an affinity for continuing education, he completes as many courses as time allows with a focus on learning new specialties that broaden his clinical abilities—such as orthodontics, implant dentistry, and cosmetic dentistry—and enable him to offer more treatment options for his patients.

When it comes to choosing technologies for his practice, St. George has a checklist: Is the technology proven, practical, and affordable? Does the technology streamline workflow, increase productivity, and improve return on investment? Will the dental team enjoy working with it, and does it increase patient satisfaction? If the technology supports all those criteria, it's likely a good fit.

One of the more recent technologies that checked all the boxes for St. George is the Medit i500 intraoral scanner. "I've used all the major scanners on the market, and the i500 really stood out as the best choice for me and my practice," he says. "The fact that it is an open system, was well priced, and comes from a company with great customer service and training were the major factors in my decision."

Simplifying the Scanning Process

St. George is no stranger to chairside digital scanning/digital impressioning. He inherited a CEREC chairside single-visit restoration system about 10 years ago and has steadily added new digital technologies, with a current inventory of multiple scanners, milling units, and 3D printing systems. When asked how the i500 intraoral scanner fits into the equation, St. George calls it "quite complementary," particularly for quadrant dentistry and implant workflows.

"I will say that on average for quadrant dentistry, it takes me or my assistants about a minute or 2 to scan the upper arch, lower arch, and bite. It is not an astronomical time savings, but it's there," he says. "To me, the i500 really helps in implant

scans. The ability to use scan bodies saves chair time, especially on multiple-unit cases, and the lack of need for a verification jig, thus reducing the time involved in multiples, is huge."

Bottom-line Benefits

An intraoral scanner's initial cost may seem a bit steep at first, but the financial rewards of owning and using it daily justify the investment. The savings realized by not having to purchase traditional impression material adds up, as each tray-based physical impression is essentially dollars out the door.

"To me, there are a lot of positives in digital dentistry, and the Medit i500 scanner is one of the best-priced scanners on the market, with the most robust features and functions," St. George says. "Using the scanner not only saves chair time but also allows my practice to benefit from decreased lab costs, as a majority of labs charge much less for model-less or digital scans compared with the cost of conventional impressions. The i500 also gives us the ability to do orthodontic aligners, wax-ups, surgical guides, and digital dentures when paired with a 3D printer, all of which have financial benefit."

Another benefit of intraoral scanners—now even more important due to the coronavirus disease 2019 pandemic—is the reduced number of infection-control steps required to produce a digital impression.

"Digital scans eliminate many of the potential biohazards associated with traditional tray-based polyvinyl siloxane impressions," St. George says. "The elimination of physical trays and physical impressions means no need for costly and time-consuming disinfection steps prior to packing and shipping to the lab. Although we produce most restorations in-house, we would still need to perform those same disinfection steps if we were doing physical impressions. Either way, digital impressions are a win-win for the dental office."

The Patient Perspective
In St. George's experience, the i500 has contributed positively to how patients respond to treatment. "Let's be real—patients hate conventional impressions. Although the tray may be in the mouth for a couple of minutes, it's not very comfortable, and those minutes seem a lot longer to an uncomfortable patient," he says. "When we use the i500, patients are impressed and intrigued by the technology. They get to see their teeth appear in full color right there on the screen, and they like that."

A Team Player
Introducing new technologies into the dental office can be a challenge. As with any new technology, there's a learning curve and an adjustment period as the team gains comfort with it. At St. George Family Dental, incorporating the i500 scanner went smoothly, according to St. George.

"We've been a digital practice for about 10 years, and I don't think any of us would go back. The i500 fits right in with the other digital scanners and equipment we own and works seamlessly with CAD software from other systems, and the entire team embraced it right from the start.

▲ A clinician scans a patient's teeth using the Medit i500 intraoral scanner.

"Overall, the i500 is a great scanner that provides extremely precise intraoral scans and digital impressions. I appreciate the fact that Medit is continually improving the scanner via software updates rather than coming out with a new machine that you must spend another chunk of money on. The customer service and training that are available through my reseller to the nondigital dentist to get started with it—as well as furthering your 'digital dive' into other avenues— have been amazing." ●

Sodium Dental Sensor Repair

Sodium Dental offers X-ray sensor repair performed by experienced, reputable sensor repair technicians. Sodium also manufactures their own custom components for high-quality repairs. They offer a 30-day warranty and an optional 1-year warranty on services. Turnaround can be completed in as few as 3 days, and Sodium can handle repairs from all sensor manufacturers.

Sodium Dental
800-821-8962 | **sodiumdental.com**
CIRCLE RS #57

Digital X-ray Sensor Repair: A Smart and Affordable Option

Many dentists automatically toss a malfunctioning digital sensor, but Sodium Dental can prevent that costly move. **[by Jo Donofrio]**

MARANDA LAKE
RDH, BASDH

CLINICIAN   TEAM MEMBER   INDUSTRY

Digital intraoral sensors provide high-quality resolution images that result in faster, more efficient diagnosis and treatment. Although these are valuable tools in digital dental technology, digital X-ray sensors can malfunction and are expensive to replace. Many dental clinicians throw away their device as soon as an issue occurs. They incur the cost of replacing it because they are not aware of a more affordable option: digital X-ray sensor repair.

Sodium Dental, a full-service dental technology integrator, is the first company in the industry to offer X-ray sensor repair. With more than 20 years of experience in the dental space, Sodium Dental helps practices increase productivity and efficiency and maximize the patient experience.

The Benefits of Sensor Repair
Sensor repair can get a device up and running in a couple of days for a fraction of the cost of replacement. "We have been using Sodium Dental for digital X-ray sensor repair since 2015," says Maranda Lake, RDH, BASDH, a dental hygienist at Millhopper Family Dentistry, a full-service practice in Gainesville, Florida, and an adjunct professor at Santa Fe College in Gainesville. "Instead of buying a new sensor every 2 years, we can get it repaired and help keep our costs down."

Dental practices can save thousands of dollars by opting for repair. A new digital X-ray sensor can cost $8000 to $10,000, depending on the brand. Sensor repairs range from $700 to $1750, based on the complexity of the problem, and can extend the tool's life for many years.

Common X-ray Sensor Problems
Dental sensors are vulnerable to a wide range of issues, most of which are repairable. Common problems include full loss of functionality, a crushed cable, bite marks, inability to detect radiation, and pretriggering white images during X-ray capture.

"The most common problem we see with our digital sensors is fraying of the wire inside the cable from the constant bending, pulling, and twisting that occur throughout the day," Lake says. "Typically, this repair extends the life of the sensor for approximately 2 years."

Stress-Free Repair Process
Sodium Dental has been repairing X-ray sensors since 2011, with a success rate of more than 80%. Their in-house repair technicians are trained in the repair of several brands, including DEXIS, Kodak, Gendex, Schick, XDR, and ACTEON. Free estimates are given within 24 to 48 hours. All repairs are done in-house and backed by a 30-day warranty; an optional 1-year warranty includes remote support.

Repairs generally take 5 to 10 business days, but most fixed sensors are shipped back to the customer in fewer than 3 business days after repair authorization. Sodium Dental can also provide a compatible, high-quality loaner for up to 60 days, including free remote installation, troubleshooting, and a 1-day shipping option.

"We have typically received our repaired sensors within 1 to 2 weeks," says Lake says. "Sodium Dental doesn't just fix equipment and send it back. They also offer suggestions to improve your practice and extend the life of your products."

Once a year, Millhopper Dentistry hosts a free day of dentistry for their community, with Sodium Dental partnering. "[That's when] we treat 100 patients at no cost, providing services such as cleanings, fillings, and extractions," Lake says. "Sodium Dental is kind enough to loan us sensors to expedite the process, so it minimizes the wait time for these patients." ●

The Clinical Benefits of
Calcium-releasing Dental Products

Calcium-releasing materials have taken the dental world by storm — and the latest generation of calcium silicates are easier to use, producing better results. This eBook explores how the THERA line of products from BISCO can improve restorations, from the science behind the material to technique tips and lessons learned from two case studies!

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The Rules of the Game

Why the Best of Class Award Winners should be on your short list.

[by Lou Shuman, DMD, CAGS, CEO and Founder of Cellerant Consulting]

It's hard to believe that a 12-year-old vision to make a difference has come so far.

From an idea fleshed out over a breakfast meeting at Chicago Midwinter, today, the Cellerant Best of Class Technology Awards are covered by every dental journal in North America. The American Dental Association has partnered with Cellerant to provide the largest exhibit space at its annual meeting, with the Best of Class Alley providing ADA attendees a singular location to visit all the winners. Every company in dentistry waits in anticipation to see if they will receive the 7-pound piece of art glass that represents the most prestigious and coveted award in the industry.

The question is, "Why?"

The answer is really two fold: the process and the panel.

The Process

The selection process is rigorous, unbiased, nonprofit, and transparent. Throughout the course of the year, the Best of Class Panel exhaustively searches for technologies that truly differentiate themselves from their competitors or, in some cases, literally define a new category. Companies also have the opportunity to nominate themselves at cellerantconsulting.com.

The final selection process occurs at the Chicago Midwinter Meeting at the Fairmont Hotel, as it has for the past 11 years. The Cellerant team and Best of Class Panel take over the top floor of the hotel, where last-minute presentations are provided on the request of the panel, and private conversations occur between panelists leading up to Friday night. At about 9 p.m. everyone convenes, the hotel door shuts, and the meeting goes into the wee hours of the night.

Each panelist divulges any companies they are consulting for, as that disqualifies them from voting in that category. Though the panel reviews every category, the winners are not chosen by category. That allows a category to be skipped if there is no true leader. There is no marketing-driven Top 10 or Top 20. The number of winners is the number, be it 14 or 22.

"Emerging" is the only category that exists outside of a "standard win," and to be honest, that a category like this can exist and be celebrated is one of the reasons why I started Best of Class years ago. It's exciting to find new technologies that can stand side by side with the billion-dollar company winners as equals. I remember years ago receiving an email from a dentist in Alaska who thanked me for having such a positive impact on his ability to practice. He went from village to village and "The Nomad" was a game changer. He never would have known the handheld X-ray system existed if he hadn't followed the awards. An Emerging winner can either define a new product category altogether or stand to challenge established category leadership.

The voting can get very contentious. The panel recognizes the importance and seriousness of its decision. Winners have garnered funding as well as exclusive distribution deals and acquisition opportunities.

Finally, well into Saturday morning the white smoke comes out of the chimney and the winners are selected.

The Panel

The panel consists of the most prominent technology leaders in dentistry:

▸ **Dr. John Flucke –** technology editor and chief dental editor for *Dental Products Report®* (DPR)

▸ **Dr. Paul Feuerstein –** technology editor for *Dentistry Today*

▸ **Dr. Marty Jablow –** Americas's Dental Technology Coach

▸ **Dr. Chris Salierno –** chief editor of *Dental Economics*

▸ **Dr. Pam Maragliano-Muniz –** chief editor of Dentistry IQ and editorial director of DACE

▸ **Dr. Lou Shuman –** founder and creator of the Best of Class Technology Awards. He is the author of national columns on technology in *DPR*, *Dental Economics* and Canada's *Oral Health Journal*.

As founder and creator of the award, I want to assure you that the integrity of the process has remained true since its inception. The vision of providing the dental community the few products that stand out over thousands and to inform the dental manufacturing community what its technology experts consider the leading products in their space has been the goal from the beginning.

I hope you will spend time with this month's issue of *Dental Products Report®* and dentalproductsreport.com to familiarize yourself with the winners. I want to congratulate the companies honored as Best of Class in your commitment to move our whole industry forward. ●

⊘ HOW TO

IMPLEMENT A GAME-CHANGING ALIGNER FOR YOUR PRACTICE

One clinician explains why OrthoFX is unique in their materials technology and delivery of orthodontics to patients who want to improve their oral health and esthetics. [**by Renee Kurtz, DMD**]

Information provided by OrthoFX.

RENEE KURTZ, DMD

AS A DENTIST SINCE 2001 and practice owner since 2010, I consider dental technology my passion. By easing anxiety and thus improving the chair experience for patients, dental technology makes practicing as a dentist so much more enjoyable. Efficiency is an added (and a big) bonus.

The key technologies I promote as the pillars of my practice include the Solea dental laser from Convergent Dental; CEREC Omnicam 3D scanning and printing from Dentsply Sirona for same-day crowns; and now, as an added service and benefit to my patients, OrthoFX orthodontic clear aligner orthodontic treatment from OrthoFX.

I have seen that orthodontic treatment is often essential to a patient's long-term oral health. Boosting the ability to floss and brush easily, as well as relieving contact wear points preserving enamel, in my opinion, can benefit a large majority of my adult patients.

Why OrthoFX?

I was introduced to OrthoFX by my salesperson. He was passionate about the founder's mission to provide both the best in polymer science for doctors and a patient-friendly model, offering value, convenience, and quality.

OrthoFX launched officially in June 2019 by former Invisalign executives Ren Menon, Nichole Garcia, and Henry Chan. Their combined 30 years of aligner experience allowed them to create a hybrid model that was doctor-focused and consumer-friendly. I am able to oversee the case and monitor the patient in my office, safely ensuring a better outcome. For the patient, OrthoFX is affordable, starting at $2,950, based on the complexity of the case, and an easy process to start—a win/win for all involved.

I have spent a lot of time with the executive team at OrthoFX and am inspired by their dedication to do what is right by patients and by the doctors treating them. Their unique polymer science will be discussed in detail.

Case Selection and Treatment Planning

Generally, I recommend OrthoFX to adults with mild to moderate crowding and spacing. Relapse cases also are easy to treat, and patients appreciate getting back to their perfect smile affordably. A unique aspect of OrthoFX is I can communicate directly with their clinical team (also doctors) regarding my treatment plan.

The level of service has been outstanding. I almost always

> "**OrthoFX has taken a deep dive into** materials research to study the effect of different materials **and the impact on predictable movements as close to optimum force as possible.**"

receive the case setup within 24 hours of submitting the treatment plan. Once I approve the plan, the patient's aligners are in my office within 2 weeks because they are manufactured in the United States.

Patients are eager to get started, and the quick turnaround adds to the positive patient experience.

Patient Experience and Materials Technology

Because of the materials technology, the aligners are extremely comfortable for the patients, and each stage can move predictably with 1-week wear. A scallop cut means there is no gingival impingement or irritation. OrthoFX polymer is strong on the outside, guiding teeth to proper occlusion, and compliant in the middle to avoid damaging biological tissue.

The aligners are easy to insert and remove, and thus far, I have heard no complaints regarding speech impediments or discomfort. Patient feedback is extremely positive, especially as treatment progresses predictably on track. Refinement aligners are included in the price, as are the final retainer and replacement of lost aligners. Patients appreciate knowing there won't be additional charges or fee surprises.

Advanced Materials Research

At a recent study club meeting, I had the pleasure of meeting OrthoFX's head of research and development (R&D), Loc Phan. His background in materials engineering built the aligner business; he was one of the first employees at Invisalign in 1997. His broad product development experience includes more than 150 patents, more than 40 of which are in the clear aligner and orthodontic space.

Phan believes that to move teeth effectively and efficiently, it

ORTHOFX™

OrthoFX
▸ A clear aligner service designed to make the process simple for both clinicians and patients
▸ Connects patients with its network of dentists
▸ Single, set price for the patient covers office visits, initial digital impression, customized treatment design, aligners, and more

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CIRCLE RS #59

▲ **Table 1.** Optimum Forces for Orthodontic Tooth Movement[3]

Type of movement	Force (g)
Tipping	33-60
Translation	70-120
Torque	50-100
Rotation	35-60
Extrusion	35-60
Intrusion	10-20

Source: Ren Y, Maltha JC, Kuijpers-Jagtman AM. Optimum force magnitude for orthodontic tooth movement: a systematic literature review. Angle Orthod. 2003;73(1):86-92.
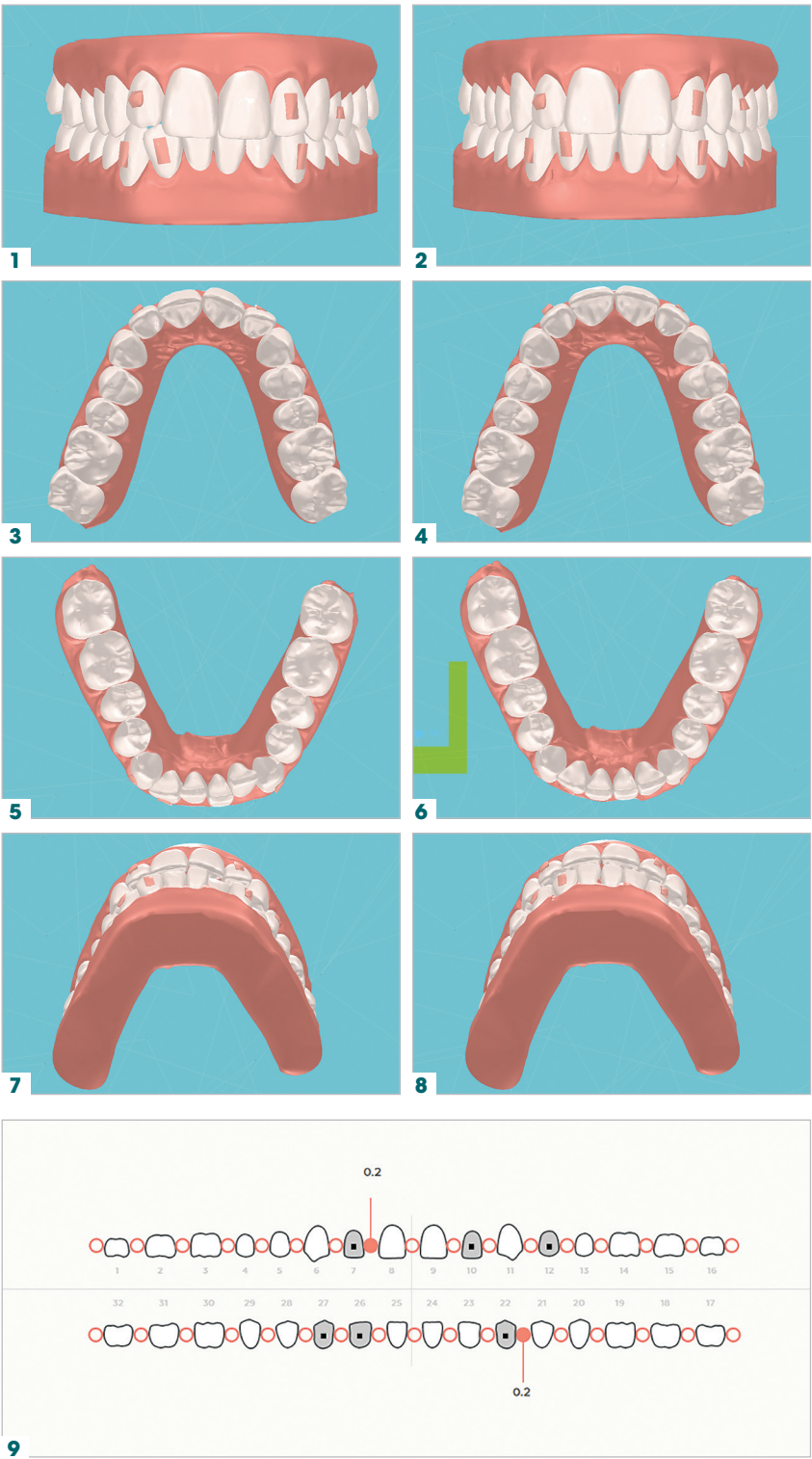
[**Figures 1-9**] Initial treatment plan setup with attachments **(Figure 1).** Final treatment stage **(Figure 2).** Maxillary occlusal view of initial setup **(Figure 3).** Maxillary final stage **(Figure 4).** Mandibular occlusal view of initial setup **(Figure 5).** Mandibular final stage **(Figure 6).** Incisal view of initial setup **(Figure 7).** Incisal view of final stage **(Figure 8).** Diagram of attachment placement and IPR **(Figure 9).**

is important to understand and observe the optimal force concept: an ideal range of force stimulus that would naturally move a tooth without unwanted adverse effects. Optimal force is defined as a force high enough to stimulate cellular activity without causing hyalinization in the periodontal ligament (PDL). It is the lightest force that will move a tooth to a desired position in the shortest possible time without PDL injury.[1]

The most challenging part is to maintain that force over the range of desired movement; in other words, a desired mechanical physical property similar to that of a superelastic nickel titanium wire.

The body would view attempts to move teeth outside the optimal force range as a foreign invasion, possibly setting off a negative immune response. Depending on its severity, that response could lead to root resorption or tooth loss.[1,2] **Table 1** shows the optimal forces for various orthodontic tooth movements.[3]

"Activation" refers to the strain placed on the aligner to generate enough force to move a tooth. An industry standard since the late 1990s, aligner activation per stage was programmed at 0.25 mm for movement, 2° for rotation, and 2° for torque. Those activation values were based on the theory that the total orthodontic movement should not exceed 1.0 mm per calendar month so that the kinetics of the alveolar osteogenesis process will not lag. It was assumed that the "virtual" tooth movement to the ideal position in the arch would mirror the real physiological outcome.

Depending on the malocclusion and predictable/nonpredictable movements programmed, interproximal reduction (IPR), and adherence, some cases treated out better than others. OrthoFX has taken a deep dive into materials research to study the effect of different materials and the impact on predictable movements as close to optimum force as possible. Their materials technology has had among the most exciting impacts on treatment outcomes and comfort.

Figure 10a, shared by OrthoFX R&D, shows the forces generated from activating a specific material for

the movement of the first molar in the buccal/lingual directions. It compares 3 materials: Zendura A or similar to EX30 and 2 OrthoFX materials, FXTetra (branded) and FXTetra+.

Zendura A material is a single-layer monophasic thermoplastic polymer. Its flexural modulus is higher than that of the FXTetra and the FXTetra+ aligner materials. Zendura A is very strong, has a short range, and generates more force than what is needed.

The OrthoFX materials (FXTetra and FXTetra+) are still inside their respective elastic ranges. The impact of higher elasticity over the same force span or range are effective and efficiently move teeth, offer greater comfort with the same tight fit, and are easy to remove and insert without yielding.

The OrthoFX materials performed with such superiority because they are multilayer, specially formulated laminates. It should be emphasized that FXTetra and FXTetra+ materials were designed to deliver consistent and sustained optimal force.

Figure 10b further demonstrates the application of optimal force needed to control the root, crown, and torque in tipping of upper incisors to help develop efficiency in staging aligner movements with FXTetra and FXTetra+. Multiple layer aligner materials with varying mechanical physical properties will be ideal for treatment because every orthodontic movement requires an aligner with a different mechanical physical property profile. Furthermore, multiple aligners, each specializing a set of discrete orthodontic movement, will quickly bring the patient dentition to its final position and alignment with almost zero discomfort. "No pain, no gain" is an obsolete concept.

Effect of Materials on Treatment Success

Our study club asked Phan and the management team about the impact the aligner material has on treatment success. The answer: The material by itself would be ineffective without the treatment planning and stereo lithography 3D models of the progressing treatment stages; one cannot succeed without the oth-
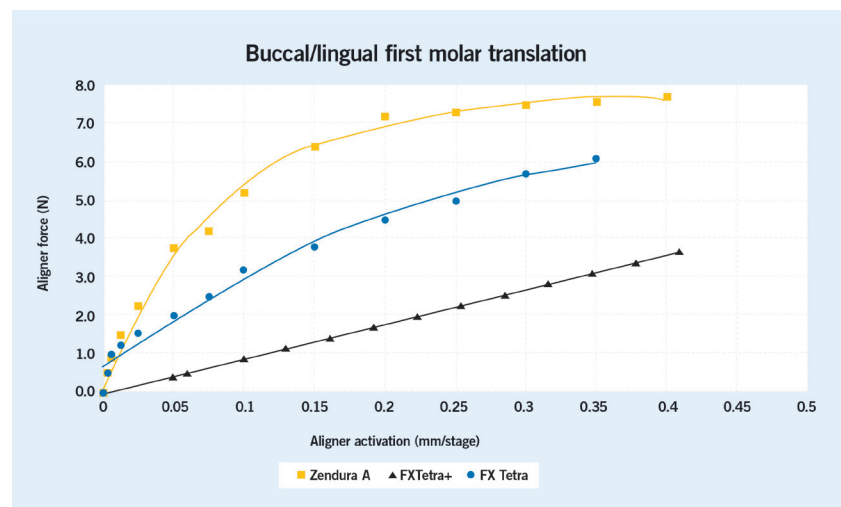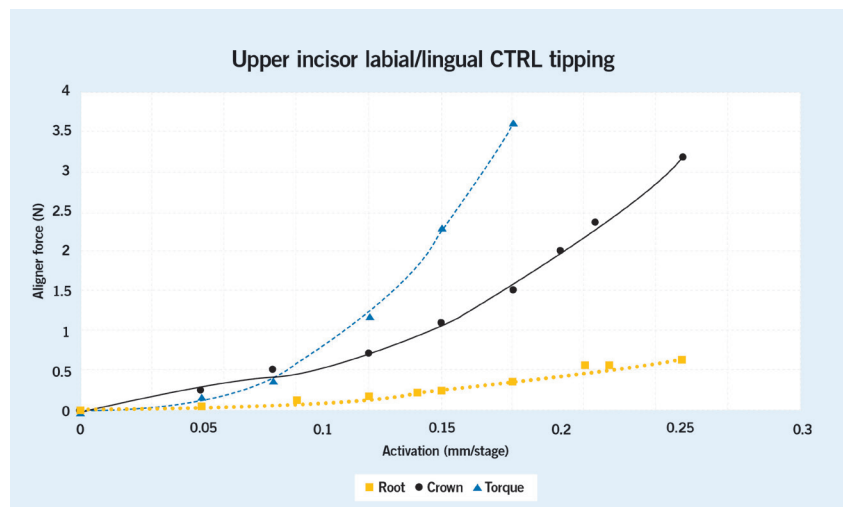
[**Figures 10a-b**] Forces generated from activating a specific material **(Figure 10a)**. Applying optimal force to control the root, crown, and torque in tipping of upper incisors **(Figure 10b)**.

ers. A capable material must have as many of these 3 components as possible: strength, elasticity, and range. The material carries the force, and the activated treatment planning releases the force from the material. OrthoFX has developed a family of aligner materials that allow the doctor to progressively take the patient on an uneventful journey to the desired dental occlusion.

Adding FXTetra and customized weekly movements provides optimal and consistent force, which leads to faster treatments, fewer refinements, and less chair time. The company shared that 8 out of 10 patients with OrthoFX do not need refinement aligners.

At the time this article was written, OrthoFX included the FXOnTrack app to current treating doctors and their patients. The technology allows the doctor to track a patient's aligner fit virtually. The company's clinical team evaluates the patient's photos initially, sends the doctor their findings, and notifies the patient if a visit is needed. I'm looking forward to using the technology as another tool to manage the case using the aligner staging and excellent service to our patients.

In addition to tracking the treatment progress via FXOnTrack, I can discuss updates with my patients using OrthoFX Video Visits. New patients can also request a video initial consultation. A patient requesting a free smile preview through the

"Am I a Candidate" button has the option of asking for a video consultation with a nearby OrthoFX doctor. The platform's continuous innovation evolves to meet the needs of dentists and our patients.

Business Impact for My Practice
From the business practice side, OrthoFX was easy to integrate on day 1. As with any new system, there are processes to learn and training to do with the team, but for us it was worth it. OrthoFX is different in that they collect payment directly from the patient, as well as research and process insurance benefits and financing options. This allows me to do what I enjoy the most—be a dentist. I'm reimbursed

directly by OrthoFX within 5 days when the patient pays up front. There's no lab bill, sales tax, or credit card fees, which makes my accountant very happy.

Marketing Technologies for Patient Education
My one piece of advice: Be very proactive in your approach. There is tremendous value in marketing these advanced technologies and patient offerings. For me, being the first to offer OrthoFX and other patient centric technologies has been very well received.

My practice is in Cheshire, Connecticut, where we have opportunities with social media, newspapers and magazines, and television

BEFORE

AFTER

[**Before and After**] After 13 weeks, both Gina and I were happy with the final results and ordered retainers (without rescanning her teeth) that she'll now wear only at night. The total treatment length was 13 upper aligners and 11 lower aligners. The programmed velocities per aligner according to my OrthoFX clinical doctor team were: mesial/distal, 0.18 mm; sagittal movements, 0.18 mm; extrusion/intrusion, 0.15 mm; tip: 1°; torque: 0.5°; rotation, 2°.

morning shows ("CT Style") featuring new advancements. We analyzed our patient starts from these efforts and found a 300% increase. Sharing advances in dental technology and how it benefits patients will build a practice, with an excellent return on investment.

We also converted OrthoFX graphics to canvas art that communicates to patients our light nature and the positive choice of orthodontic treatment to improve their smile. Marketing has many formats, so be active on all fronts.

Clinical Case

Our practice's first OrthoFX case was our hygienist, Gina. She presented with moderate crowding (approximately 6 mm) of her upper and lower anterior teeth with slight rotation of teeth 7 to 10, as well as narrow arches in the premolar area. She wore traditional braces as a child and had relapsed over time. She wanted straighter teeth for cosmetic reasons and better spacing of her lower anterior for improved hygiene.

My goals were to improve the esthetics of her smile, level anterior teeth to ideal, and improve canine guidance, as well as achieve ideal overbite/overjet, ideal occlusion settlement, even stepwise, and even midlines (See Before and After images).

Her first appointment involved scanning with CEREC Omnicam. Her scans were submitted, and a treatment plan arrived the next day. Two weeks later her trays came in, and we placed attachments on 6 teeth (Tooth Numbers: 7, 10, 12, 22, 26, 27) and performed 0.3 mm interproximal reduction (IPR) on the distal of tooth numbers 8 and 9.

Her treatment was 13 weeks, changing each tray after 1 week. I appointed Gina to check her progress at the 7-week mark and make sure her movements were mimicking that of the treatment plan.

Final Thoughts

OrthoFX is unique in their materials technology and delivery of orthodontics to patients who want to improve their oral health and esthetics. Many companies focus on their software advances in communication with doctors, but the aligners' physical material is just as important, if not more so. We have fully integrated OrthoFX into my practice. My entire team is on board, and we talk to patients regularly about our enthusiasm for this treatment choice.

Our patients who have said yes range in age from 30 to 70 years. Most patients can benefit from straighter teeth, and OrthoFX makes it an easy and very positive patient experience. Performance and predictability of our aligner choice affects patient outcomes.

Looking past the challenging times during a national pandemic, as we open our practices again, it's important to continue building our OrthoFX patient base not only for revenue growth, but also for long-term dental health and satisfaction of our patients. ●
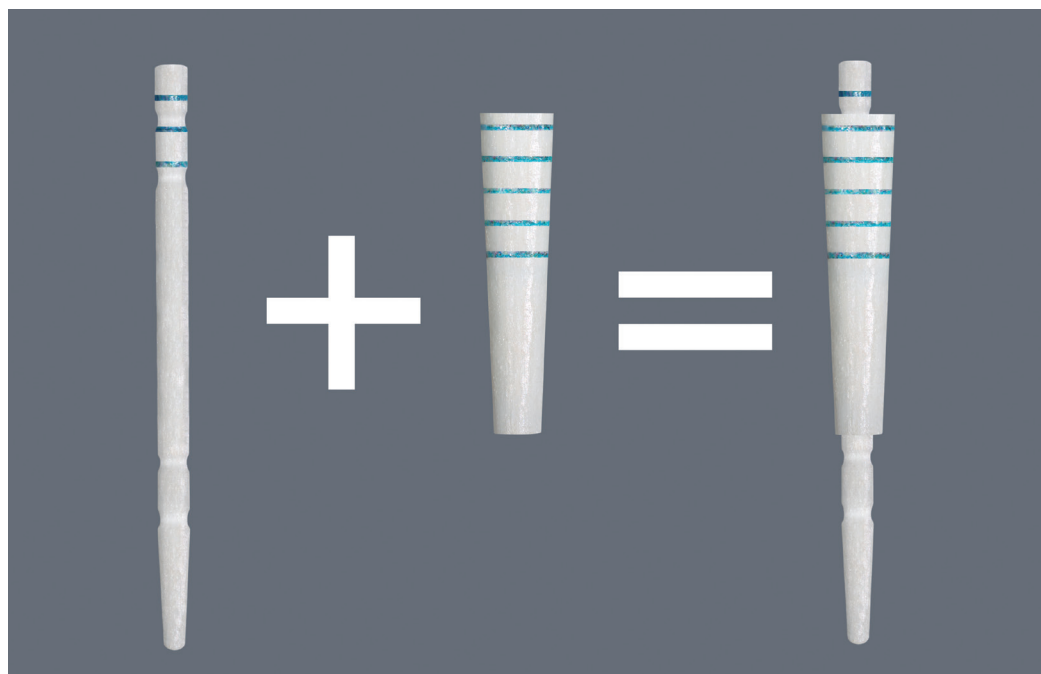
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ABOUT THE AUTHOR

Dr. Renee Kurtz received her undergraduate degree in biology from Villanova University and her doctorate in dentistry from Tufts University School of Dental Medicine. She was accepted to an internship program with Gordon Christensen, DDS, PhD, MSD, in Provo, Utah, where she attended Practical Clinical Courses and participated with Clinical Research Associates in various research studies. She is a recent member of the Academy of Healthy Dentistry.

She has served as course director and clinical instructor at the University of Southern California (USC) School of Dentistry, coauthored the dental manual for Operative Dentistry, participated in the USC Esthetic Dentistry Continuum, and developed a "Women in Dentistry" seminar.

She is also a faculty member at the Los Angeles Institute of Clinical Dentistry and a key opinion leader for Convergent Dental.

Splendor – SAP

Splendor – SAP lets the clinician adapt the fiber post to the canal flare with a vertically sliding (adjustable) conical sleeve. The sleeve is made of the same fiber-reinforced composite as the post, and when needed, slides on when the post is inserted, converting a pointed, parallel post into a custom-fitted post. Replacing cement with material of high mechanical properties increases the overall strength of the post/core.

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855-346-3682 | bit.ly/SplendorSAP
CIRCLE RS #61

Fiber Post System Delivers Confidence, Versatility

The Splendor – SAP single fiberglass post system from Angelus aids this dentist in minimally invasive procedures, boosting efficiency and providing optimal mechanical interlock. [by Stan Goff]

GARY RADZ, DDS

CLINICIAN   TEAM MEMBER   INDUSTRY

For the longest time, dentists have needed to keep a variety of parallel posts handy and expect, in many cases, to remove plenty of internal dentin during post procedures.

That's why Gary Radz, DDS, a general dentist in Denver, Colorado, was glad to learn about and then try out the Splendor – SAP (Single Adjustable Post) single fiberglass post system from Angelus Dental. Designed for minimally invasive procedures and providing optimal mechanical interlock, the solution consists of 1 narrow (0.65 mm at apical tip, 1.0 mm at coronal end) Universal end-tapered post size to fit the modern, conservative root canal therapies at the apical area.

Even better, this is usually achieved without drilling.

Radz learned of the new Splendor – SAP at the beginning of this year. Like most practices, his Denver Place Dentistry office was forced to shut down for several weeks in the spring due to the coronavirus disease 2019 pandemic. Despite this, he has used the post system enough since reopening to be confident that it delivers a long-term solution for his patients.

"The product itself is unique in that it meets a clinical need that has not been well-addressed. It's the adjustability that makes it special," Radz says.

The diameter of a post prep can vary greatly from the cervical aspect to the apical aspect. The Splendor – SAP, with its adjustable end-tapered post and corresponding conical/tapered (0.08) sleeve, allows for the preservation of more internal dentin during procedures and simplifies the post

selection process in the operatory.

"Most posts are 1 diameter top to bottom, or they have a varying degree of taper but not expansive—the taper is fixed," Radz explains. "It's not adjustable. The challenge when you're putting in a post in the tooth instead of a root canal is, you want to remove the root canal filling material without removing more tooth structure.

"Many systems force you to remove a little more tooth structure to be able to fit the predesigned, sized diameter taper of the system's given post. That can be challenging, and it can limit, sometimes, the depths that you can place the posts," he says.

With other post systems, a fixed structure requires fitting into the tooth and adapting accordingly. This product provides a solution that benefits the patient by increasing the tooth's life.

"The more tooth that you remove, the weaker the tooth is and the greater

chance of vertical fracture down the line," he says. "The less tooth removed, the better the prognosis and the chance of the tooth lasting longer."

Plenty of Pluses

The versatility of the Splendor – SAP system means practices don't need to keep 3 to 6 sizes of posts (and corresponding drills) on hand to meet each clinical challenge that arises with the many configurations of root canals.

"It does eliminate the need to have either multiple systems or multiple diameters within 1 system," Radz says. "There are multiple diameters within the SAP system, and within the diameters in it, you can do pretty much everything. It helps with efficiency and inventory control."

Another plus: Switching to this adjustable post system does not require much change.

"It's pretty much plug and play. The learning curve is [that] you put in maybe 2 posts, and then you never have to stop and think about it. If you read the directions, you can easily grasp the concept," he says.

Radz has plenty of confidence in using the system and recommending it to colleagues.

"The reduction of inventory is helpful clinically so the dental assistant is not putting out 4 different kits, not knowing what we're going to use," Radz adds. "This one is going to work 95% of the time, so just put that one out. It's a simple product that resolves an issue in a rather unique manner. I don't believe there's anything else out there like this." ●

SMALL BUT MIGHTY

[compiled by Kristin Hohman & Stan Goff]

ENDODONTIC FILES AND REAMERS, whether handheld or rotary-powered, are tiny instruments that have big impacts on performing root canal treatments.

When you choose the best surgical instruments to clean and shape the root canal, successfully completing debridement of the canal and providing a shape that allows for optimal obturation, the clinician has confidence that the patient is getting the best root canal treatment and, therefore, the best chance to extend the life of the tooth.

More general practitioners today are involved in endodontics thanks in large part to improved techniques and enhanced files. This month, we provide a look at some of the many products available to assist GPs and specialists in delivering root canal treatment. These files are designed to help clinicians combat pain, and they are changing the way people feel about the once-dreaded procedure.

TF Adaptive™

- Features Adaptive Motion Technology, which uses a feedback algorithm to change the motion of the file based on the applied load
- As stress increases or decreases, the motor responds accordingly, giving you the benefits of both rotary and reciprocation at exactly the right moment
- TF Adaptive files are twisted, rather than ground, into their shape
- Due to their design, these files are said to be up to 58% more resistant to fracture than other leading files

Kavo Kerr
800-537-7123 | kerrdental.com
CIRCLE RS #62

SafeSiders® HF

- Its helical flat revolves in the opposite direction of the cutting flute, increasing flexibility, highly resistant to breakage, and provides a coronal pathway for debris
- Provides flexibility that follows the anatomy of the canal, reducing the risk of ledging, transportation perforation
- Reduces the number of instruments needed for cleaning and shaping while preserving the anatomy
- Tough and reusable, these instruments can be reused up to 3 times

Essential Dental Systems
201-487-9090 | edsdental.com/safesidershf
CIRCLE RS #63

EdgeOne Fire™

- Manufactured using unique heat-treated Fire-Wire NiTi to create files that demonstrate unmatched flexibility and resistance to cyclic fatigue and increase flexibility for canal contouring capabilities
- Tests at twice the cyclic fatigue of competitive files and is designed to shape canals in a reciprocating motion
- Available in 21, 25, and 31 mm lengths
- Can be used with existing endodontic motors, obturator ovens, and handpiece settings

EdgeEndo
855-985-3636 | edgeendo.com
CIRCLE RS #64

ExactTaper-H™ Rotary System

- This family of files, including the Exact-Taper, ExactFlow, and ExactGuide, offers great flexibility and is resistant to cyclic fatigue
- Cuts through dentin throughout each canal zone with greater efficiency, while reducing the potential for overpreparation
- The shaping files are designed with multiple tapers to ensure flexibility and cut dentin in specific canal zones
- The finishing files ensure the proper apical fit for matching gutta-percha points
- Offer quick and efficient cutting and shaping with less chance of fracture

SS White Dental
844-587-7529 | sswhitedental.com/endo-sample
CIRCLE RS #65
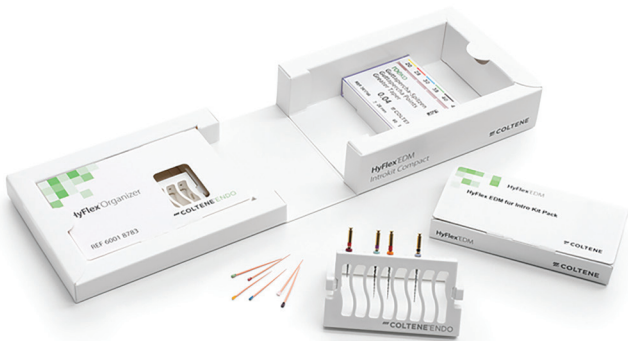
HyFlex™ EDM

- Produced using an innovative manufacturing process called Electrical Discharge Machining, the result of which is a file that is extremely flexible and fracture-resistant
- Designed to be up to 700% more resistant to cyclic fatigue compared to traditional files
- Controlled memory properties ensure these files follow the anatomy of the canal, reducing the risk of ledging, transportation, and perforation
- Reduces the number of files needed for cleaning and preserving the anatomy
- Provided as a modular system of sterile instruments, including Shaping, Glidepath, OneFile, OrificeOpener, and Finishing files that can be used in combination with HyFlex CM files

Coltene
330-916-8800 | coltene.com
CIRCLE RS #66

ESX™ Expeditor File

- Included in a minimally invasive 2 file shaping system that provides the initial shaping of the canal
- The ESX helps determine what the appropriate finishing file should be based on the engagement to obtain working length
- The ESX file features an alternating contact point (ACP™) design, which allows the file to efficiently clean 3 dimensionally as the sharp cutting edges engage with the canal walls at opposing intervals
- Operates on a low torque setting and higher speed, reducing stress on the root and file
- Features Booter Tip™ with 6 cutting edges, allowing for fewer instruments and larger diameter increases

Brasseler USA
800-254-6456 | brasselerusa.com
CIRCLE RS #67

WaveOne® Gold Reciprocating Files

- This file is said to be 50% more resistant to cyclic fatigue than other files on the market
- Reduces the "screwing effect" compared to standard rotary systems
- Enhanced file flexibility due to its Gold technology
- A single file treatment that shortens shaping time
- Extended size range includes small, primary, medium, and large files

Dentsply Sirona
844-848-0137 | dentsplysirona.com
CIRCLE RS #68

Hedstrom Files

- The Hedstrom's cutting edges are inclined backwards, making insertion easy
- Peanut-shaped handles provide the utmost in tactile feel with a positive grip, enabling clinicians to negotiate curved canals easily
- A safety eye can be easily threaded for additional protection
- Adaptable to curved root canals while practically eliminating breakage from binding

Premier Dental Products Co.
888-773-6872 | premierdentalco.com
CIRCLE RS #69

Bassi Logic™

- These files have been shown to have significantly greater resistance to cyclic fatigue and high torsional resistance
- A heat treated NiTi file that cuts like stainless steel and is said to complete instrumentation in a third less time
- Features a continuous rotary, unique cross-sections per taper, and variable helical angles

Bassi
800-234-0045 | bassiendo.com

Ergonomic hand scalers that stay sharp and effective

LM Instruments from Planmeca are designed to provide improved ergonomics, when hand scaling to reduce aerosols over other methods. [compiled by Stan Goff]

Information provided by Planmeca.

PLANMECA

Planmeca
630-529-2300 | Shop.planmecausa.com
CIRCLE RS #73

THE PROBLEM

Many restorative or hygiene care procedures generate aerosols, which can lead to the spread of the coronavirus disease 2019 (COVID-19)

Hand scaling can lead to problems if the instruments are not sharp, ergonomically designed or provide consistent tactile sensitivity.

THE SOLUTION

LM Instruments

- LM Sharp Diamond™ instruments with LM-ErgoSense® handles are especially suitable for clinicians who frequently use hand instruments allowing them to minimize the time spent on maintenance. These instruments combine the optimal characteristics of superior sharpness with tactile sensitivity and comfort

- The LM ErgoSense® hand instruments feature large diameter ergonomic handles. The comfortable, nonslip silicone handle allows for a natural grip with great tactile sensitivity. The handle is clinically proven to significantly reduce the fatigue and pain as well as prevent carpel tunnel syndrome. The medical-grade silicone surface is comfortable and allows for a nonslip grip

- LM Sharp Diamond instruments are well-suited for all forms of scaling. These instruments retain their original functionality, size, and shape throughout their lifetime

- LM Sharp Diamond instruments are equipped with functional safety—once the instrument becomes dull; it is time to replace

- The use of hand scaling is suggested over ultrasonic scaling in an effort to reduce aerosols

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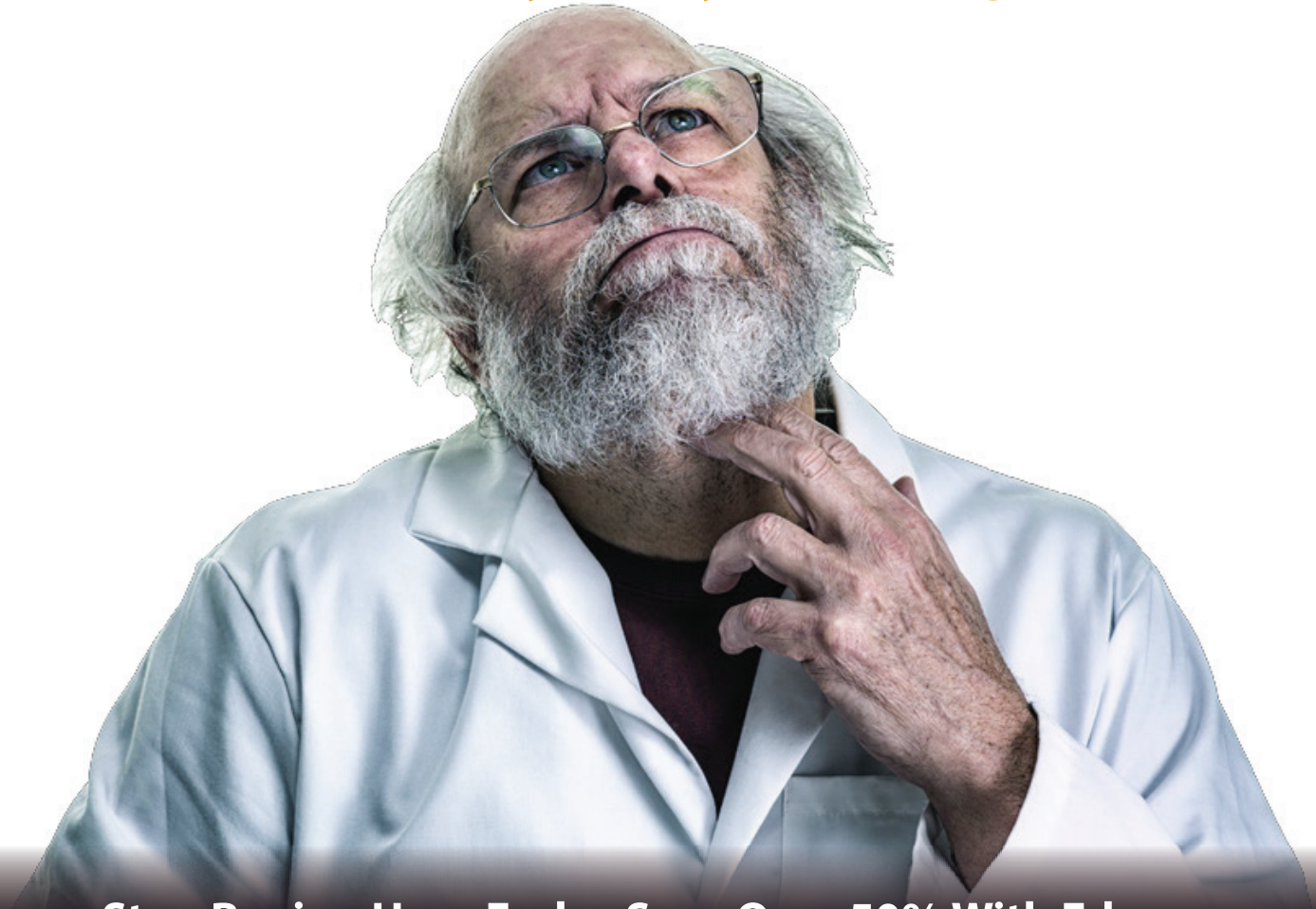
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The Jade air purifier is a medical grade air system that features a negative ion generator and 6-stage filtration and sterilization that captures dust particles, bio-aerosols, viruses, allergens, odors, and more. The unit is said to be remarkably quiet as it delivers 6 changes per hour. At just 33 inches tall, the JADE system is compact and is compatible with a standard outlet.

Surgically Clean Air
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CIRCLE RS #75

An air filtration system that removes viruses, bacteria, and heavy metals

One dentist uses this system to clean the air both at work and at home. [**by Renee Knight**]

T. JOHN MEGAS JR, DMD

CLINICIAN   TEAM MEMBER   INDUSTRY

John Megas Jr, DMD, a periodontist with 2 practices in Massachusetts, first invested in the Cascade and JADE air purification systems from Surgically Clean Air about 2 years ago, equipping both offices with multiple units. As a member of the International Academy of Oral Medicine and Toxicology, he was interested in dental operatory air quality and wanted to find systems that effectively remove harmful molds, viruses, and bacteria.

After the coronavirus disease 2019 (COVID-19) shutdowns, Megas decided to invest in additional units. He felt he needed even more air purification to keep everyone safe, he says, and communicated his commitment to air quality to his patients through e-newsletters and chairside talks.

"Before we reopened, we let patients know we were following CDC [Centers for Disease Control and Prevention] recommendations, but in addition to that, we also have Surgically Clean Air systems, and we consider that a step above normal air filtration," he says. "Patients were very responsive to that. The first thing patients comment on when they walk into the practice is how fresh and clean the air smells and how it feels energized. I've been thrilled by that."

Units in 2 Sizes

The Cascade, the larger of the systems, uses the company's 6-stage filtration process to capture dust particles, pollen, volatile organic chemicals, mold, allergens, viruses, odors such as formaldehyde and smoke, bio-aerosols, nitrous oxide, and other pollutants. It can quietly clean the air throughout indoor spaces up to 1,700 square feet and features a sleek design.

The more compact JADE unit is designed for smaller spaces and features the same filtration technology, modern design, and quiet operation, turning over operatory air every 5 minutes. Both units produce negative ions that bind to positive ions in the air to improve and energize it.

"I even have a few of these units in my home. I'm addicted," Megas says. "I'm in the process of buying another office, and when I walked in, I said, 'The air quality is terrible.' So, I'm going to have to do something about that."

Easy Upkeep

Maintenance is simple, according to Megas. When a filter needs to be changed, he gets an alert. One of his assistants removes the filter and puts it in the shower for cleaning. He puts a backup filter in so the system can continue running.

The UV-C light system, which has been shown to kill bacteria, viruses, and mold, is also easy to maintain, Megas says. It must be changed every year, but again, the system indicates when the light is becoming weak and needs to be switched out.

Keeping Everyone Healthy

Although Megas can't say for certain whether anyone in his practice has gotten sick since he invested in the Surgically Clean Air systems, illnesses in team members are now short-lived and no longer spread through the office. His team members love the fresh air that greets them when they enter the building, and one employee who has allergies noticed an improvement and looks forward to her time in the office.

Patients appreciate the practices' commitment to keeping the air clean, especially with concerns surrounding COVID-19. "The dental environment is pretty toxic, and that deserves attention," Megas says. "If you're serious about taking care of your patients, your staff, and yourself, you really need to clean the air. Standard HVAC (heating, ventilation, and air conditioning) systems recirculate and clean the air somewhat, but, at this point, I don't think that's enough for a dental office. Patients are very receptive to coming back into the office knowing we have this air-sterilization system operating. It's reassuring for everyone." ●

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The only in-office water test designed specifically for dentistry

The QuickPass water test saves 1 practice time and money. [**by Renee Knight**]

KATHY DELUCCO

CLINICIAN   TEAM MEMBER   INDUSTRY

At the beginning of the coronavirus disease 2019 (COVID-19) shutdowns in March, Kathy DeLucco, an expanded function dental assistant and Occupational Safety and Health Administration safety coordinator at Vermont Dental Care, watched a webinar on the QuickPass In-Office Dental Water Test from ProEdge. Impressed with what she saw, she signed up for a free sample.

QuickPass delivered everything promised in the webinar, and DeLucco was floored by the amount of time it saved. The office officially made the switch in early April.

What DeLucco liked most was how easy the test was to read. The system

she had been using was not: Dark dots formed on a dark background to indicate the colony-forming unit (CFU) count but were often difficult to decipher, creating a time-consuming and frustrating task.

QuickPass is completely operator-friendly, she says, calling that statement indisputable. "QuickPass has the 3 C's—it's concise, convenient, and cost-effective," she adds. "It's very clear what the results are. If you see a little red dot on the white background, you have CFUs forming. If you don't, then you're good to go."

The testing process
The test has a short incubation period of 48 to 72 hours. Samples collected on a Friday evening before the team departs for the weekend are ready for reading when they return Monday.

To test operatory water, DeLucco collects a separately pooled sample

in each operatory from all hoses connected to the water supply, places the paddle, shakes for 2 minutes, empties the water, and puts the paddle back into the receptacle, leaving it undisturbed for 48 to 72 hours—a quick, easy process.

Vermont Dental Care has 9 operatories plus a reverse osmosis source tank. DeLucco can collect the samples needed for testing within 20 minutes.

Identifying water quality issues
Typically, the practice would shock and test the water in-office quarterly and send a sample to the lab for testing annually. Upon reopening from the COVID-19 shutdown, all lines were shocked and tested in-office. The ProEdge QuickPass was advantageous for confirming less than 500 CFUs prior to reopening. Two operatories and the source failed the initial tests. With the ProEdge QuickPass, the team

effortlessly reshocked and retested the water. Once the water passed the in-office test, they sent samples to the lab for verification.

The team at ProEdge is well versed in water quality, DeLucco says. They are quick to respond when questions come up and available to offer support—another benefit of switching to QuickPass.

A time-saving solution
The uncomplicated product wowed DeLucco the first time she used it. She was impressed with the time efficiency QuickPass offered compared with the product she was using before she watched the webinar. Such time savings are a tremendous benefit for any dental practice, especially now.

"With COVID-19, donning/doffing our PPE [personal protective equipment] is acutely more time-consuming [compared with] prepandemic. The furthermost project in your daily routine, in my opinion, would be a complicated, time-consuming water quality test," DeLucco says. "As we all strive for personal excellence in dental care for our patients, it's crucial in the dental operatories to use only water with less than 500 CFUs. It would take 45 minutes to view all the samples once they had incubated [with the previous product]. I would have to really scrutinize and enlist the use of my dental loupes because of the black background. With QuickPass it is obvious: If there are red dots, you need to shock; if there are no red dots, fabulous—it's negative; let's send it to the lab for verification." ●

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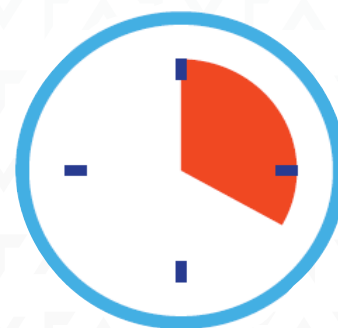
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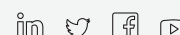
⊘ HOW TO

USE A FULL-SERVICE SOFTWARE TO DRIVE REVENUE, QUALITY OF CARE

MMG Fusion's suite of services helped one group practice attract new patients while raising satisfaction among existing patients.

[by Sona A. Saeidi, DMD, Cofounder of Soothing Dental and Melissa Horn, Director of Patient Success]

WE IMPLEMENTED MMG FUSION'S full service marketing, management, and growth software products in our 4 Soothing Dental practice locations in California's San Francisco Bay Area beginning in 2016. Through a focus on patient experience and quality of care, Soothing Dental has significantly grown its revenue, number of active patients, case acceptance rates, and patient satisfaction while becoming more automated, and increasing profits.

This case study details how MMG Fusion's software drove these results and helped our staff meet meaningful practice goals month after month and year after year. We separate our analysis into the MMG Market and MMG Manage suites of services.

Enlisting MMG Market: New Patient Acquisition, Patient Satisfaction, and Growth

All dental practices strive to bring in new patients to increase revenues and mitigate the unavoidable patient churn, which averages 12% nationally. We implemented MMG Fusion's Websites SEO {search engine optimization]) and PPC (pay-per-click) and local directories to ensure that Soothing Dental was being found online and leaving a favorable impression with new patients visiting.

Once we were found online, MMG's Reputation Management tool ensured we were chosen based on the large number and high quality of our reviews. Appointments were made easily using MMG's ChairFill and Patient Portal, which offered patient-friendly features to increase patient satisfaction. Closing the loop, we used MMG's Marketing Tracker Call Analysis to understand the return on investment (ROI) from our marketing efforts to help make better marketing decisions and reduce our cost per acquisition (CPA) for new patients. The following measurable results looking at key performance indicators (KPIs) demonstrate the significant impact MMG Market had on growing our 4 Soothing Dental offices.

▸ **CPA:** A "well-run" practice should try to spend 10% to 20% of the expected first-30-day-production to acquire a new patient; that is, if they expect to produce $800 in the first 30 days (e.g., an ad campaign for crowns), they should want to spend $80 to $160 for a new patient. At Soothing Dental, we have reduced our CPA and achieved the 10% to 20% gold standard using the full market suite. This result is about 40% better than our competitors.

▸ **Reviews:** Because Yelp is the most important review site in the San Francisco market, we focused on those reviews for 3 years. Using MMG's Reputation Management and Task Manager tools, Yelp reviews increased from 40 to 417 over 3 years, which was at times the highest number of reviews on Yelp among all dental offices in the country. We then focused on Google reviews, which rose from 0 to 63 over 1 year.

▸ **Scheduling:** MMG's Online Scheduling eased this process, allowing our practices to reduce the time to complete online scheduling to under 60 seconds, with an average of 70% of patients now regularly scheduling this way.

▸ **Number of new patients:** With better SEO/PPC and more effective marketing campaigns (an increased ROI per campaign), strong reviews, and easy scheduling, new patients increased from an average of 7 per month to 60 to 70.

▸ **Revenue per chair.** A rule of thumb is to produce $250,000 per year per dental chair; our San Francisco office generates about $380,000 (significantly better than even a well-run practice). This was an increase from $157,000 per chair prior to using MMG Market Suite.

Automating with MMG Manage

Using the Patient Portal, Unified Communications, and Ava's artificial intelligence (AI), we were able to implement a "patient first" culture by automating many processes and creating seamless communication with patients and between staff members in 4 geographic locations. The communication tool closed the distance between staff and made them more productive.

It can be tempting to focus attention on the razzle-dazzle of new patients and revenue, but creating effective, consistent, monitored, replicable processes and patient management strategies is just as important to a practice's success. The following measurable improvements demonstrate the significant impact MMG Manage/Ava had on our operations.

▸ **Patient satisfactions and patient churn:** MMG's Patient Portal creates a so-called paperless office where the patient can complete tasks without having to call or email the office. Everything is patient-friendly and easier with automated new patient enrollment, visible treatment plans, online payments, Uber rides if needed, and Starbucks gift cards for rewarding compliance. Now, 85% of our patients have used the web app, and we have reduced patient churn from 23% to 8% compared with the national average of 12%. The revenue per patient using Patient Portal has also increased by 30% (**Figure 1**).

▸ **Automated processes with Virtual Office Manager, Ava:** The main responsibility of the office manager is to ensure that tasks are defined, prioritized, assigned to the right person, and completed efficiently and effectively. We
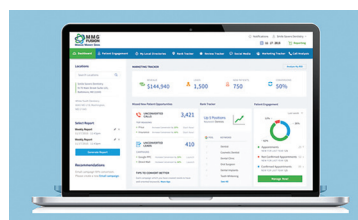
use Ava's artificial intelligence to assume many of these responsibilities. Ava detects the tasks that need to be done and tries to perform the task automatically; if she can't, she creates a task for the right staff member, along with best practices guidelines, and then tracks the task to completion. The task is added to the performance reports for each staff member so ongoing training can be provided effectively. It is noteworthy that prior to Ava, we couldn't effectively measure how well our staff was performing discrete tasks. With Ava, we are assured our staff is working at optimal performance and can see for ourselves all that is accomplished on a daily and weekly basis.

▶ **MMG's HR Suite:** Soothing Dental implemented an effective bonus system through the HR suite, using individual, team, and practice KPIs, which generated a 15% increase in production. The time to run bonus payments and payroll was decreased from 8 hours to an hour per payroll due to both processes being fully automated.

MMG Fusion facilitates "best practices" using MMG Market and MMG Manage together for optimal scheduling and increasing case acceptance.

Scheduling Faster

We executed a few successful strategies through the use and implementation of the full MMG Fusion product suite. These best practices can be effectively reproduced only with the unique power of MMG Fusion's AI, best practices data collection, and single sign-on laterally integrated suite of products.

▶ **Offering immediate availabilities to maximize new patients:** An office without immediate availability for new patients is less likely to get new patients (**Figure 2**).

Most patients book their first visit within the next 2 days. If an office does not have availability within the next 2 days from the time a new patient wants to make an appointment, the patient will most likely not make the booking. It is critical to manage the office schedule to always allow for this availability.

We achieved this by using MMG's Ava AI along with Patient Engagement and ChairFill, which show each offices' availability for new patients.

Should availability drop below a certain threshold, Ava tasks a staff member to make changes to the schedule. This strategic approach dramatically increases new patient scheduling rates.

Increasing Case Acceptance

When presenting a treatment plan, it is critical to effectively communicate the value of the treatment to the patient. This helps not only the patient's oral health but also the business by ensuring necessary treatments are scheduled and practice production is increased. We use MMG's Patient Portal and 3-D oral modeling and health score to easily show the patient how important each treatment is.

▶ **3-D oral modeling:** This interactive function is patient facing and color coded to show pending and completed treatments (fillings, crowns, extractions, cleanings), making it easy for patients to see and understand their care. Patients can select and click a color-coded tooth issue to schedule an online appointment (**Figure 3**).

▶ **Oral health score:** The scoring system is like a credit score for one's teeth and mouth. A number between 1 and 100 is calculated using completed treatments, unscheduled treatments, and other factors, such as hygiene appointments kept. When a treatment is added to the list of recommended treatments, we use the newly updated score to show the patient its importance.

MMG's Patient Engagement is then used to follow up with patients to complete their unscheduled treatments through email, SMS, or the mobile Patient Portal web app to ensure that all patients maintain their oral health.

Figure 4 shows how patients' oral health score improves over time in Soothing Dental offices. The longer they stay with Soothing Dental, the higher their score gets. This shows the effectiveness of Soothing Dental's processes and MMG Fusion's tools.

Getting Results

By effectively using MMG to optimize old processes, Soothing Dental has created a healthier and thriving dental practice that substantially grew profits across 4 different locations. ●
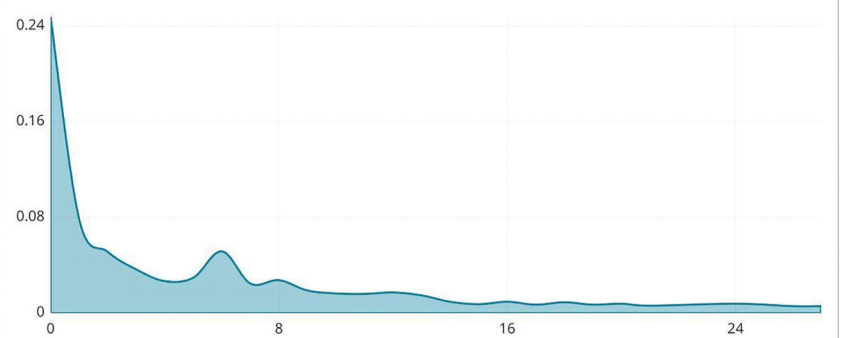
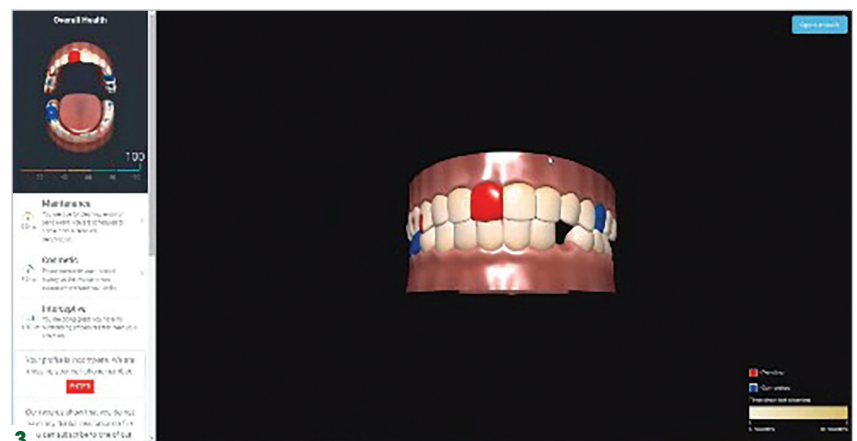*Visit Soothing Dental online at www.soothing.dental.*
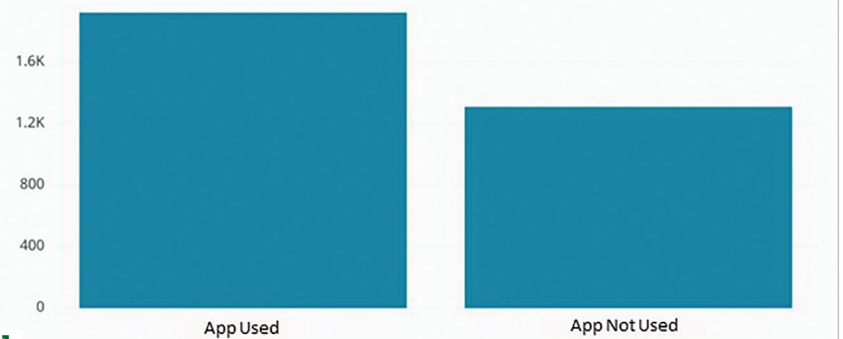
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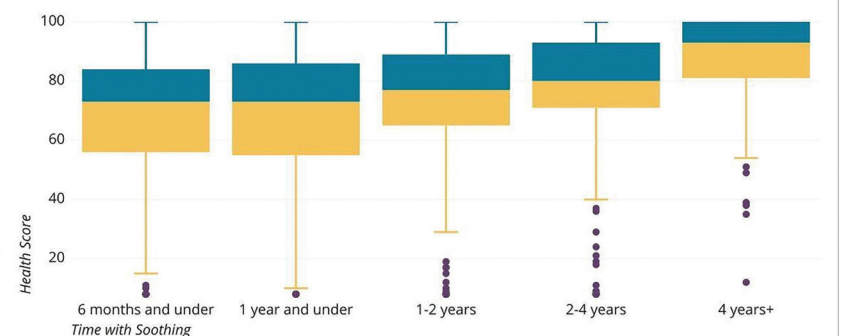
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[**Figures. 1-4**] Soothing Dental's revenue per patient has increased by 30% with Patient Portal (**Figure 1**). An office without immediate availability is less likely to get new patients (**Figure 2**). MMG's 3D modeling makes it easy for patients to understand their care (**Figure 3**). Soothing Dental's patients' oral health scores improved over time (**Figure 4**).
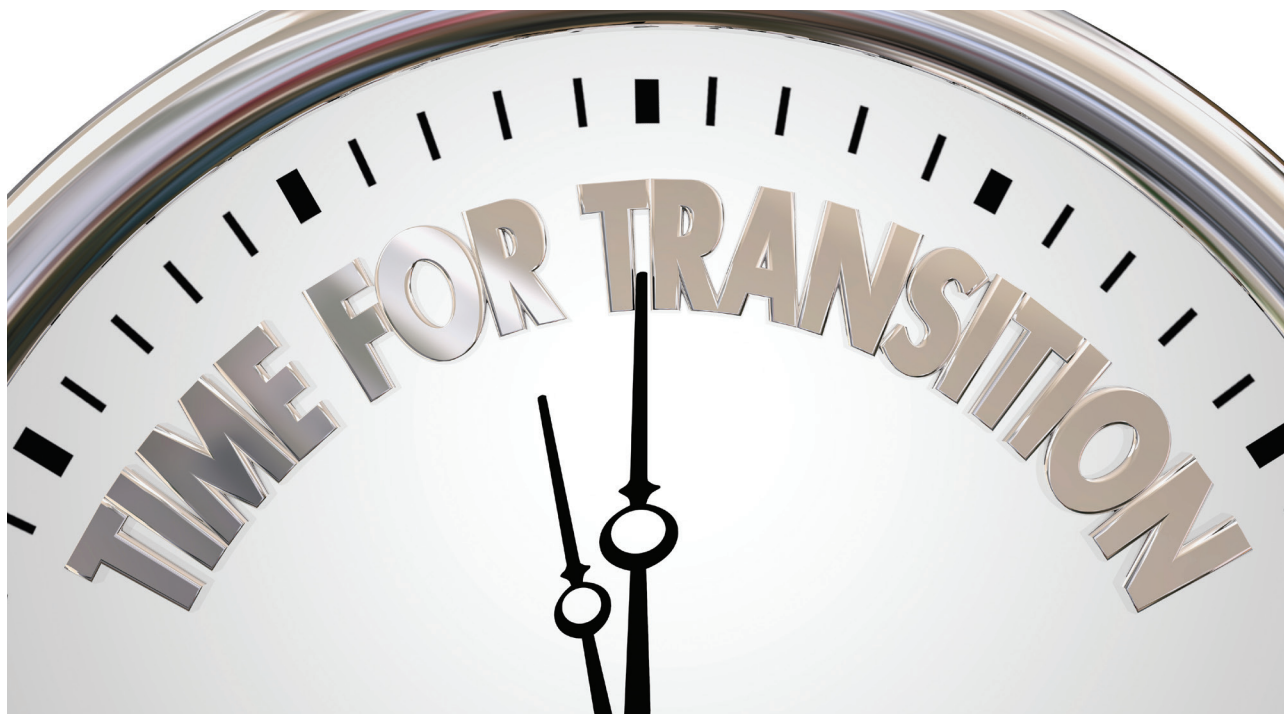
Transitioning During COVID-19

A CPA and certified valuation analyst outlines key factors for practice transitions in the midst of a pandemic. **[by Bruce Bryen, CPA, CVA]**

Dental practices and their owners have gone through a financial and emotional nightmare during this coronavirus-induced pandemic. Revenue has dropped substantially, and there seems to be no end in sight.

Layoffs have occurred, along with salary reductions for employees and use of subcontractors still working. Fixed overhead costs remain, as do obligations for equipment loans, rent, and practice acquisition loans. That debt applies to dentists who had been expanding and experiencing income growth prior to the tragedy of the coronavirus disease 2019 (COVID-19).

Now, wholesale regressions in living standards are being taken on by the practices and owners' lives and families. When the pandemic hit, dentists who were preparing their practice for transitions just before the virus struck were in a quandary about their practice's current value. The practice evaluator was retained and the preparation of the valuation report typically was effective as of December 31, 2019. As

the months progressed, more practices lost large amounts of gross revenue.

The dentists themselves also experienced drops in profits, to the point of negative earnings at many of the practices. This caused personal financial difficulty because the amount of the dentist's pay was, in many cases, decreasing in ratios similar to the practice's losses. Many of the brokerage firms that represented dentists were still making offers to transition the dental practice. Those interested in acquiring practices were doing so but not under traditional terms. Prior to the pandemic, almost all transitions consisted of all cash at closing or varying creative approaches to the purchase, almost always involving a substantial cash payment.

A belief that this is a time of panic for those wishing to sell

Some dentists, including many older ones, panicked, thinking that this was the end of their practice value's upward climb. Those with sound practice

advisers such as dental certified public accountants, consultants, and other advisory service professionals suggested a slower pace to accept or reject offers. Taking whatever time was needed to secure the best transition approach possible was their goal.

These advisers let their clients know that there was no reward for an emotional sale at a rock-bottom price. Listening to the type of offer and understanding the need for creativity to transition the practice during the pandemic helped more practices advance the process. An update in the valuation was required. Indicators in the transition value model being offered were lower than the seller originally anticipated receiving. These offers were based on the buyers believing that because the sellers were panicking, they could negotiate at fire-sale prices.

The reputation of the dental practice evaluator became extremely important to all parties involved with the transaction. The advisers had to pres-

ent the new valuation with the concept that there was no need to panic and the seller did not have to accept the offer, because others would appear.

The valuation presentation and the terms of the acquisition

Dental practice valuations with an effective date after December 31, 2019, take into account the effects of COVID-19, but also use the practice's history as a guideline for new value. Practice brokers may offer "earn-outs," with the seller holding part of the sale price in a promissory note from the buyer in a secondary position or other creative approaches to attain the transition. The valuation may reveal a discounting method to provide what the report projects in terms of the practice's present value if the full payment is not by cash.

If it is critical to the seller that the transition occur during the virus period, then that dentist must understand that the settlement can occur only with different valuation and terms from the past. If the value stays high, it is because of the dental practice's past performance and the potential for its repeat, as well as because the seller is under no compulsion to sell as quickly as possible because they think the market will return, at least somewhat.

Of course, if a buyer is willing to negotiate based on the probability of a semi-return to normalcy, then the settled-upon price will be higher. The asset allocation at the transition table and the ability to assign as much as possible to the personal goodwill of the selling dentist or a similar protected deferred payment is another area where the pricing and valuation will remain on the high side. This is based on the evaluator's allocation to the goodwill or a secured type of deferral in the current practice valuation gleaned by the practice broker.

A limited number of owners will almost always raise the value of personal goodwill. The point is that a smaller practice with fewer dentists will probably suffer less and recover faster as the pandemic subsides.

Having sound and creative dental practice advisers also should help reduce the panic and ensure a more thoughtful decision about when to sell and how to structure the transaction for maximum value. ●

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What you should have done to prevent ransomware

A few short steps can help your practice thwart a major security attack. [**by Lorne Lavine, DMD**]

In last month's article, we took a slightly different slant when it came to ransomware. As a few of our clients who didn't have our complete suite of services were hit with ransomware over the past few months, I decided to do a postmortem after we recovered their files. So, the focus this month will be a continuation of what these offices should have done to prevent a ransomware attack.

Disable Macros

Macros were considered magic in the 1990s. We lived in a world of automatic documents and spreadsheets. Unfortunately, it wasn't long before attackers realized they could automate the same processes to attack our computers. As we quickly approach 2021, macros are seldom used; if you don't need them, disable them. You can disable macros using Group Policy, in Microsoft Office, or manually on the computer.

Use Secure Passwords

I am amazed at the number of dental offices who sign up for services with IT providers and complain about the password complexity requirements being too long. Our requirements are not long at all. Confirm that your users are using secure passwords and be sure to use secure and unique admin account passwords.

Monitor Your Domain Admin Group

As the years go by, you will find more and more users have been added to the domain admin group on your domain controllers. Users should never be running as domain administrators! Check your domain admin groups, and remove everyone apart from a limited number of users. While you are at it, rename your default administrator accounts.

Turn on Windows Firewall

For ransomware attacks to be successful, they need to propagate across your network. One of the easiest ways for ransomware to propagate is by using push installers. Turn on your Windows Firewall or another personal firewall.

Perimeter firewalls are not enough, so always assume your perimeter has been breached. Even if you are running servers that require dangerous ports to be opened, develop the habit of turning on the firewall and opening those ports. Most servers do not need the Remote Procedure Call (RPC) ports to be opened, and if they do, only open them when it is required.

Don't Make Users Local Administrators

This week we had a client who hired a new front desk associate, and she needed to install a printer. The installer required her to be a local administrator, and it would have been the easiest thing in the world to make her one.

However, this simplicity comes at a severe cost. Users who are local administrators can knowingly and unknowingly make changes to their system that allow malware to get deep within the operating system.

Create Discrete Administrator Accounts

Even worse than making a user a local administrator is adding the domain users group to the administrators group on the local computer. Not only does the user now have system-level access to their machine, but they also have system-level access to all computers on your network. Make sure you remove regular user accounts from the local administrators group. That includes your own account. If you need administrator access, use a second login.

Although many of these things may seem difficult and time consuming, they should be second nature to your IT company, which can easily implement them for you.

At the end of the day, the ultimate responsibility lies with you to be as secure as you can and limit your practice's risk to attacks and people who want to separate you from your data (and your money). ●

ABOUT THE AUTHOR

Dr Lorne Lavine, founder and president of The Digital Dentist, has more than 30 years invested in the dental and dental technology fields. A graduate of USC, he earned his DMD from Boston University and completed his residency at the Eastman Dental Center in Rochester, New York He received his specialty training at the University of Washington and went into private practice in Vermont until moving to California in 2002 to establish TDD, a company that focuses on the specialized technological and HIPAA needs of the dental community. He can be reached at drlavine@thedigitaldentists.com or 866-204-3398.

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DIY Dental Marketing Plan for Today's Times

For the best results, know where to focus your efforts and when to tap the experts. [**by Naomi Cooper, CEO – Doctor Distillery**]

NAOMI COOPER

Dentists who don't have the time or expertise to handle marketing for their practice often outsource the work. However, with patient flow numbers still recovering from the coronavirus disease 2019 (COVID-19) crisis, hiring expensive professionals may not be in the budget in 2020.

Fortunately, there are many ways dentists can promote their practice inexpensively yet effectively on their own. The following blueprint for building an in-house, DIY (Do It Yourself) marketing plan highlights the ideal opportunities for delegation, the tasks dentists should focus on, and 3 areas where it's best to rely on outside experts.

What to Delegate

Marketing is a great way to get the team involved. Harness their enthusiasm and put it to work for the practice. Start by asking for patient referrals and online reviews, which are especially powerful in today's post-pandemic world. Encourage the staff to get in the habit of checking the daily schedule every morning and finding 1 patient they are comfortable asking to refer a friend or post an online review.

Social media presents another opportunity to solicit the team's help. One of the toughest challenges with social media marketing is simply coming up with ideas of what to post. For example, ask each team member to submit 1 idea a month to post on the practice's Facebook page.

If a particular team member is eager and able to take charge of creating and executing the marketing, this is a great task for the dentist to delegate. Get a social media savvy staff member trained on how to effectively manage and monitor the practice's social media profiles to stay on top of online chatter about the dentist and the practice. This person should be given guidelines on what kind of content to post and how often and needs to be aware of HIPAA guidelines in case they must respond to a patient's online inquiry.

The front desk team also plays a critically important role in marketing. They are most often the first contact people have with a practice, and that conversation can make or break a new patient opportunity.

This "welcome committee" should keep track of the referral source for every new patient caller, even if that person doesn't make an appointment. This enables the dentist to monitor marketing results by understanding which sources generate the bulk of new patient opportunities and the team's success at turning those callers into patients.

The ideal front desk employee is friendly and charismatic, possessing the necessary communication skills to easily answer both common questions and the unusual request.

And anyone working in new patient opportunities should be directed to prioritize these individuals by offering them an appointment at the earliest opportunity.

Where to Focus

Delegating day-to-day marketing tasks is incredibly helpful but doesn't mean taking a hands-off approach. With the practice's reputation at stake, it's important for the dentist to participate in crafting the marketing strategy, reviewing the tactics, and closely managing the person responsible for implementation and daily marketing duties.

Dentists should also keep tabs on outcomes from all the practice's marketing initiatives. Make it a monthly habit to review marketing sources from all new patient inquiries and opportunities to inform future decisions on which efforts should continue—and which should be stopped.

Always keep patients in mind, and move forward only the initiatives that are timely, trackable, and targeted.

When to Hire an Expert

Dentists can manage many marketing tactics on their own, but it is best to hire an expert to handle 3 integral areas. Practice branding, website design, and search engine optimization and marketing (SEO/SEM) are the foundation of any dental marketing plan. These factors work together to form the base on which all other marketing initiatives are built, so unless a practice's team includes a graphic designer, search marketing expert, and web developer, it pays to enlist the experts for this work.

Countless vendors specialize in these areas, so seek out industry-leading companies with a proven track record of working primarily with dental practices that fully understand the nuances of dental marketing. If this year's budget doesn't allow for that expert advice, table these marketing components until the cash flow returns to historic levels.

Taking a DIY approach to dental marketing will help a practice survive this tough year and set it up to thrive in the good years to come. ●

An expanded version of this column is available at dentalproductsreport.com.

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Resources to keep your practice up-to-date

There's a wealth of information out there for infection control and COVID-19, just make sure it's coming from trusted, reliable sources. **[by Robert Elsenpeter]**

Dentists and hygienists learn about infection control in school, but the learning doesn't stop there. There is so much to keep up on that staying current can become its own chore. Happily, however, the internet contains ample resources to provide the information that they need. Not only can they keep up on current trends, but there are also refreshers on the basics, should those be necessary.

The internet is a big place, and there is no lack of information at one's fingertips—for better or worse. With so much information out there, it's necessary to remember that it's not always accurate, evidence-based information. Finding reliable, trustworthy information is crucial. Consider the barrage of coronavirus disease 2019 (COVID-19) details.

"Sometimes we've forgotten that when this disease first came to our attention, back in January and February, that it was referred to as the 'Novel Coronavirus,' because it was new and all the virus information was so new," Jackie Dorst, RDH, BS, observes. Dorst is a "Safe Practices" infection prevention consultant and speaker. "Guidance and prevention is changing as there's more data collected, more contact investigations, and more research coming out of the dental schools and the research laboratories. We've been overwhelmed with the volume of changing information to the point that we question almost everything that we hear, and we don't know where to put our confidence. So, it is important to go to those trustworthy resources and the living documents, the ones that are updated as there is new information."

Centers for Disease Control and Prevention

"Naturally, the number one source for infection control is the Centers for Disease Control and Prevention (CDC)," Mary Borg-Bartlett, President, SafeLink Consulting, observes. "The CDC publishes recommendations that protect patients and workers. The CDC recently updated the guidelines on COVID-19 for dentistry, so all dental practices need to review this information."

Borg-Bartlett recommends the following CDC links for dental practices to use as a resource when setting up their infection control practices:

▶ **Infection Prevention and Control in Dental Settings** – *bit.ly/CDCDentalIC*
This page of CDC Oral Health Department refers to other guidance that can be very helpful for the dentist and the staff member who has been appointed as the Infection Prevention Coordinator and/

or OSHA Coordinator. It also includes information on the CDC's DentalCheck Mobile Application, a checklist that assesses facility practices and ensure they meet the minimum requirement for safe care.

▶ **Frequently Asked Questions** – *bit.ly/OralHealthFAQs*
The CDC's Frequently Asked Questions for Infection Control outlines such topics as oral surgical procedure; respiratory hygiene/cough etiquette; saliva injector and backflow; dental water unit quality; hand hygiene; and much more.

▶ **Guidelines for Infection Control in Dental Health-Care Settings 2003** – *bit.ly/IC2003*
The CDC published its Bible for infection control in dental practices in 2003. This should be a key resource at every dental practice. This guideline includes topics on the application of standard precautions; work restrictions for health care personnel infected with or exposed to an infectious disease; sterilization of unwrapped instruments; and more.

▶ **2016 Summary of Infection Prevention in Dental Settings** – *bit.ly/CDC2016Supplement*
The CDC augmented its 2003 guidelines with this supplement in 2016. This summary is a guide of basic infection prevention for all dental care settings, including private practices, dental clinics, dental schools, and education programs.

▶ **Cleaning and Disinfecting Environmental Surfaces** – *bit.ly/EnvironmentalSurfaces*

▶ **CDC Statement on Reprocessing Dental Handpieces** – *bit.ly/HandpieceReprocess*

▶ **Screening and Evaluating Safer Dental Devices (includes a screening form and an evaluation form)** – *bit.ly/CDCDentalDevices*

COVID-19

Of course, in this day and age, no compilation of resources would be complete without mention of COVID-19 and how dental practices can deal with it. Dorst recommends these:

▶ **ADA Return to Work Toolkit** –

bit.ly/ADAReturnKit

The ADA's Advisory Task Force on Dental Practice Recovery offers a free toolkit to help practices manage returning to providing non-emergent care. Items covered in the toolkit include:

- A welcome back reassurance sample letter
- What to Do if Someone on Your Staff Tests Positive for COVID-19
- Steps to Take if a Patient Reports COVID-19 Exposure After Treatment
- Summary of Reporting Work-Related COVID-19 Illness for OSHA
- Paying Staff Who Are on Leave Due to COVID-19
- Understanding mask types

The CDC offers its own resources for dental practices when managing the pandemic. Dorst recommends the following resources:

▶ **CDC Appendix 1: Risk Assessment for Healthcare Workers Exposed to Persons with COVID-19** – *bit.ly/ CDCExposureAssessment*
In the event a team member is exposed to a patient (or other individual) with COVID-19, this worksheet can help assess the level of risk for exposure.

▶ **CDC guidance for asymptomatic HCP who were exposed to individuals with confirmed COVID-19** – *bit.ly/CDCConfirmedCase*
The CDC offers the guidance to help with the assessment of risk and application of work restrictions for asymptomatic team members with potential exposure to patients, visitors, or other confirmed COVID-19 individuals.

▶ **CDC COVID-19 Guidance for Dental Settings** – *bit.ly/CDCDentalSettings*
Based on current information, the CDC offers interim guidance for dental practices during the COVID-19 pandemic.

▶ **CDC State and Local Health Department Links** – *bit.ly/StateHealthDepts*
The CDC has compiled links to state-by-state guidelines and regulations, as well as their individual rules and recommendations for daily operation.

▶ **CDC Strategies for Return to Work Guidance** – *bit.ly/CDCReturntoWork*
In the event team members do test positive for the SARS-CoV-2 virus, CDC offers the following guidance for returning to work.

▶ **CDC COVID-19 Interim Infection Control guidance for Healthcare Personnel** – *bit.ly/CDCIC*
Based on currently available information about COVID-19 and the current situation in the United States, the CDC offers the following guidance for health care facilities to restart operations.

▶ **OSHA COVID-19 Dental Workers and Employers** – *bit.ly/OSHADental*
OSHA offers its own recommendations for dentistry workers and employers during the pandemic. They note that this information is not "a standard or regulation and it creates no new legal obligations," but rather, the recommendations are advisory in nature and intended to assist employers in providing a safe and healthful workplace.

▶ **OSAP/DQP Best Practices for Infection Control in Dental Clinics during COVID-19 Pandemic** – *bit.ly/OSAPICPractices*
A collaboration between OSAP and the DentaQuest Partnership for Oral Health Advancement, with information from the ADA, ADHA, OSHA, and the CDC, this document provides a practical checklist for implementing best practices and a very thorough resource/tools section.

PPE Resources

"National Institute for Occupational Safety and Health (NIOSH) is under the CDC and is responsible for providing guidance on the effectiveness of PPE that will protect workers," Borg-Bartlett adds. "It is especially helpful now, in regard to protection from COVID-19, since respirators are in use in dental practices where, prior to COVID-19, they were not typically used."

▶ **NIOSH COVID-19 Information for the Workplace** - *bit.ly/NISOHPPE*
The Food and Drug Administration (FDA) offers its own resources

that can help practices navigate the current PPE climate, as well.

▶ **Masks and respirators** – *bit.ly/FDAPPE*
FDA information on N95 respirators, surgical masks, and face masks is helpful in determining the appropriate type of face covering to be used for protection.

▶ **FDA information on Emergency Use Authorization for PPE** – *bit.ly/FDAEUAs*
The purpose of this information is to help employers determine alternate PPE that has been approved for use in the US as a replacement to US-approved PPE such as the N95 respirator.

OSHA

"OSHA is another source for infection control as far as safety of workers," Borg-Bartlett says. "The primary document that pertains to preventing exposure to blood and other body fluids is the Bloodborne Pathogens Standard 29 CFR 1910.1030" (*bit.ly/OSHAPathogens*).

"This standard requires development of an Exposure Control Plan that must include Methods of Compliance such as engineering controls, work practice controls, use of PPE, containment of sharps, regulated waste containment, laundry of PPE, off of Hepatitis B vaccine, post exposure evaluation, biohazard labeling, worker training, etc," Borg-Bartlett says. Other useful OSHA resources include:

▶ **Most Frequently Asked questions on Bloodborne Pathogens Standard** – *bit.ly/OSHARegulations*

▶ **Standard interpretation letters** – *bit.ly/InterpretationLetters*
These are letters that business owners have written to OSHA asking specific interpretation of the standards. OSHA responds and then publishes the response. OSHA explains these as, "Standard Interpretations are letters or memos written in response to public inquiries or field office inquiries regarding how some aspect of or terminology in an OSHA standard or regulation is to be interpreted and enforced

by the Agency. These letters provide guidance to clarify the application of an established OSHA standard, policy, or procedure, but they may not, in themselves, establish or revise OSHA policy or procedure or interpret the OSH Act."

▶ **Record keeping** – *bit.ly/ OSHARecordkeepingForms*
"This standard establishes which employers must record work-related injuries and illnesses such as fatalities, amputations, loss of an eye, and hospitalization," Borg-Bartlett says. "There are exemptions that apply to dental offices, however, a state OSHA plan may remove this exemption so a dental practice in a state plan must follow the state plan requirements. There are 28 states with state plans."

▶ **Enforcement policy** – *bit.ly/OSHAEnforcement*
OSHA has issued an enforcement policy for recording of work-related COVID-19 illnesses.

▶ **Standards and directives** – *bit.ly/OSHAStandards*
List of OSHA standards and directives (instructions to compliance officers) and other related information that may apply to worker exposure to the novel coronavirus, SARS-CoV-2, that causes Coronavirus Disease 2019 (COVID-19).

The internet is a great place for information, but always make sure to get information from trusted, reliable sources.

"I heard a quote in a vaccine webinar, and one of the doctors said, 'Unfortunately, we have science by social media now,' and it's not always really science," Dorst says. "It's not established trustworthy information. Years ago, they used to be referred to as 'urban myths'. Now, it's referred to as 'social media myths'. There's so much unknown, and the apprehension motivates people to look for the silver bullet. Unfortunately, we don't have a silver bullet at this time. So, out of desperation and fear of the unknown, people have gravitated to what is on social media. And it's not always trustworthy." ●

Marketplace

PRODUCTS AND SERVICES

THE **LIST**

QUICK BITES
for team development
and practice success

NEXT MONTH: Top Tips for Organizing and Sterilizing Instruments

Claims

TOP 3 TIPS FOR SUCCESSFUL COVID-19 INSURANCE CLAIMS: DON'T TAKE NO FOR AN ANSWER

[by David Goodman]

In my work representing owners of medical and dental practices who have suffered losses due to the coronavirus disease 2019 (COVID-2019), my clients come to me with the same story: the insurance carriers say that they are "sorry," but there just is no insurance coverage for the claims that have closed or restricted their businesses.

"No, viruses are excluded from your coverage."

"No, an executive order from the governor ordering your practice to close does not fall under the civil authority clause because there is no physical loss or damage to your property."

"No, because if insurers covered these claims, they would all go out of business."

Business insurance carriers have developed a strategy for shirking their responsibility to policyholders: issue blanket denials for all pandemic-related claims, regardless of circumstances, and hope that policyholders take that no as a final word and give up. It is no wonder many owners receive the initial denial letter in the mail citing the dense policy language seemingly designed to make the meaning inaccessible and conclude their claim is a lost cause.

The truth is, however, with the right strategy and representation, owners can get beyond the "no" to win the coverage they purchased. Here are 3 approaches to consider:

01 Find the right kind of support.

Many business owners tend to turn to their insurance brokers, or their dental practice management lawyer to navigate claims. However, legal counsel that specializes in these kinds of cases have more tools at their disposal to present a claim that successfully navigates the insurance company's exclusions.

02 Think broadly as you calculate your loss and damage

The specific language of your policy should shape the way you make your claim. Be sure to include not just the obvious loss of revenue resulting from the shutdown, but also the expenses you incurred such as your office and equipment leases. You also need to account for the extra expenses you incurred in your efforts to adhere to safety guidelines as you reopen such as additional personal protective equipment and additional time spent sanitizing the practice.

03 Look ahead to calculate losses that will continue.

Business interruption does not end when the governor or health department says you may reopen your practice. Even when you begin to see patients again, it is unlikely your revenue will soon return to anything close to normal, and it's highly likely increased expenses will continue, even if you live in a state that appears to be "back to normal." Make sure your claim is presented in a way that accounts for the full scope of the continuing disruption.

Many practice owners are feeling understandably worn down and even demoralized by the challenges of the past few months. But a denial of coverage by your insurance company does not have to be the final word on your claim. Don't take no for an answer. Get the help you need to file a successful claim and move your practice toward better days ahead. ●

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Case image courtesy of Dr. Kevin Brown, Bellevue, WA

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