Continuing Care for Dental Practice Success

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Introduction

Dental hygienists have the knowledge, skills and professional responsibility to provide oral health promotion and health protection strategies for individuals as well as groups.

The Dental Hygiene Standards of care describe a competent level of dental hygiene care as demonstrated by the critical thinking model known as the process of care. This is noted in various dental hygiene textbooks, the five components of the dental hygiene process of care include assessment, dental hygiene diagnosis, planning, implementation, and evaluation.

The Dental Recare System and the dental hygiene department are the mitochondria of all successful dental practices.

Without patients coming in regularly, the dental business would be erratic and it will essentially become an urgent care dental practice.
MODULE 1: What is Continuing Care?

Definition:

A regular and continuing program of monitoring, evaluation, and therapy that strives to maintain a patient’s optimal dental health by combining diligent self-care with periodic professional treatment.

The American Dental Association (ADA) Code Revision Committee has now reversed a change made to the prophylaxis definition in Current Dental Terminology (CDT)-4, which made it possible to define the procedure as polishing alone.\(^1\)

In CDT-4, which went into effect January 1, 2003, the procedure code for a prophylaxis, 01110, was redefined as “scaling and/or polishing procedures to remove coronal plaque, calculus, and stains.” However, during its first meeting held to consider revision requests on February 14, CRC voted unanimously (10-0) to remove the “/or” change from the definition, thereby restoring the CDT-4 wording to that used in CDT-3, which reads “scaling and polishing.”\(^2\)

Everyone loves that “just from the dentist clean feeling” after having their teeth professionally preformed by a dental hygienist. However, not everyone loves the process to achieve that feeling!

The vision of a Continuing Care appointment should be to inspire your patients to take a personal interest and responsibility in their oral health. Dental hygienists need to take pride and be responsible for providing preventive care recommendations for successful overall optimal health outcome.

Footnotes:
MODULE 2: The Dental Hygienist Duties

Dental Hygienists will:

• Perform oral healthcare and risk assessments that include the review of patients’ health history
• Take and record blood pressure,
• Dental and periodontal charting,
• Oral cancer screening and
• Evaluation of oral disease/health;
• Complete a dental and periodontal health charting that includes a detailed description and evaluation of the gingival and periodontium
• Develop a dental hygiene diagnosis based on the oral health findings
• Expose, process and interpret dental radiographs (X-rays)
• Remove biofilm and calculus from the teeth both coronal and apical and gingival margin using dental instruments
• Apply caries-preventive agents such as fluorides and sealants
• Discuss the association between oral health and systemic health; disease
• Provide patient education on biofilm control and home care protocol by incorporating techniques and products that will become part of an individualized self-care, oral hygiene program
• Counsel and coordinate tobacco cessation programs
• Educate patients on the importance of good nutrition for maintaining optimal oral health

During a monthly team meeting, schedule a time for the dental hygiene department to discuss at what intervals the following assessments are to be completed. Determine how much time is needed to complete each one and write down who can accomplish this within their scope of practice.

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Interval</th>
<th>Auxiliary to Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review Med Hx</td>
<td>Every visit</td>
<td>All</td>
</tr>
<tr>
<td>Blood Pressure</td>
<td>Annually</td>
<td>All</td>
</tr>
<tr>
<td>Oral Cancer Exam</td>
<td>Every visit</td>
<td>RDH, Doctor</td>
</tr>
<tr>
<td>Periodontal Charting</td>
<td>Full chart Annually</td>
<td>RDH, Doctor</td>
</tr>
<tr>
<td>Polish Teeth</td>
<td>As necessary (prophy)</td>
<td>Expanded function DA, RDH</td>
</tr>
<tr>
<td>ETC.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
MODULE 3: The Assessments

The assessment is the first step during the preventive care process. The dental hygienist conducts a thorough, individualized assessment of the person with or at risk for oral disease or complications. This process requires ongoing collection and an interpretation of all relevant data.³

1. Patient History:
   a. Collect the history data which includes the patient’s:
      i. Current and past health status
      ii. Age, gender, race, ethnicity
      iii. Pharmacologic considerations (prescription, recreational, over the counter (OTC), herbs)
      iv. Additional considerations (mental health, learning disabilities, phobias, economic status)
      v. Record vital signs and compare with previous readings (blood pressure)
      vi. Consultations with appropriate healthcare providers as indicated.

2. Comprehensive Clinical Evaluation
   a. Complete a thorough examination of the head and neck and oral cavity including an oral cancer screening, evaluation of trauma and a tempromandibular joint (TMJ) assessment.
   b. Evaluate for further diagnostics including radiographs.
   c. A comprehensive periodontal evaluation that will include the following:
      i. Full mouth periodontal charting:
         ■ Probing depths
         ■ Bleeding points
         ■ Suppuration
         ■ Mucogingival relationships/defects
         ■ Recession
         ■ Attachment level/attachment loss
   d. Presence, degree and distribution of plaque and calculus
   e. Gingival health/disease
   f. Bone height/bone loss
   g. Mobility and fremitus
   h. Presence, location and extent of furcation involvement

3. Comprehensive hard tissue evaluation that includes charting of existing conditions and oral habits
   a. Demineralization
   b. Caries
d. Sealants
e. Existing restorations and potential needs
f. Anomalies
g. Occlusion
h. Fixed and removable prosthesis
   i. Missing teeth

4. Risk Assessment

Risk Assessment is a qualitative and quantitative evaluation gathered from the assessment process to identify any risks to general and oral health. This data provides the clinician with the information to develop and design strategies for preventing or limiting disease and promoting overall health.

Examples of factors that should be evaluated to determine the level of risk (extremely high, high, moderate, low):

a. Fluoride exposure
b. Tobacco exposure including smoking, smokeless/spit tobacco and second hand smoke
c. Nutrition history and dietary practices
d. Systemic diseases/conditions (diabetes, cardiovascular disease, autoimmune diseases, etc.)
e. Prescriptions and over-the-counter medications, and complementary therapies and practices (fluoride, herbs, vitamins and other supplements, daily aspirin, etc.)
f. Salivary function and xerostomia
g. Age and gender
h. Genetics and family history
   i. Habits and life style
   i. Cultural issues
   ii. Substance abuse (recreational drugs, alcohol)
   iii. Eating disorders
   iv. Piercing and body modifications
   v. Oral habits (citrus, acids, toothpicks, lip/cheek biting)
   vi. Sports and recreation
j. Physical disabilities
k. Psychological and social considerations
   i. Domestic violence
   ii. Physical, emotional, or sexual abuse
   iii. Behavioral
MODULE 3: continued

iv. Psychiatric
v. Special needs
vi. Literacy
vii. Economic
viii. Stress
ix. Neglect

During the dental hygiene appointment, the hygienist will at various intervals, assess the information afore mentioned.

Module Three follows the recommendations of the ADHA Standard of Care.

For more information, refer to: www.adha.org

Utilizing these assessments means you will have at least four profit centers within the dental hygiene department. These profit centers are: Non-Surgical Periodontal treatment, Caries Risk Assessment, Same Day Services, and Home Care Products. When these assessments are utilized at the appropriate intervals, you will add value to your prevent care, patient services. When patients understand the importance of regular preventive care they are certain to know you care enough to provide the highest level of care. When patients understand the relationship between oral health and systemic health, they will begin to feel urgency about returning for their preventive care appointment.
MODULE 4: The No Fail Continuing Care Process

To avoid patients falling off the schedule and their regular maintenance it is very important to pre-schedule close to 100% of all dental hygiene appointments.

Do not allow patients to call back to schedule their next dental appointment of any kind. This is one reason for attrition in the dental hygiene department.

Example:

"Mr. Jones, today we found six areas with pocket depths that are not within normal limits. They used to measure 3mms and today we noticed that these areas measure 4mms. With good homecare and regular preventive maintenance, we can prevent these areas from future progression of the disease. What we found today is called gingivitis and it is the beginning of periodontal disease. When we treat periodontal disease, the patient needs to return for what is called scaling and root planing. This can be very costly but we have found this disease at an early stage in your mouth and it can be reversed with good homecare and regular hygiene appointments. Once you have periodontal disease, you will always need to come back for regular periodontal maintenance appointments. Not only can this be costly and time consuming to treat but it can contribute to other diseases such as high blood pressure, heart disease, diabetes, etc. I am able to see you in three months to re-evaluate your mouth and make certain your oral health has returned to within normal limits. I can see you on Monday October 6th at 10:00am. Does this work for you?"

There is no perfect recare system but when we make every attempt to have patients schedule their future appointments rather than call back to schedule, you will find a close to perfect recare system is in place.

When a patient responds with a challenge to the time the auxiliary has suggested communicate something like this to your patient:

Example:

"Mr. Jones, we have found that it works best when we have scheduled an appointment for you. I know that you are a pilot and your schedule changes but please allow me to schedule a tentative appointment and when you find out your schedule please call to reschedule if you find this appointment doesn’t work for you. Does this make sense to you?" (Wait for the patient to respond.)
Problems will arise when you continue to allow patients to *not schedule a next appointment*.

The dental hygiene department is what will drive profits in your dental business. The success of your dental hygiene department depends upon patients pre-appointing all future appointments and understanding the value prevention will bring to their overall health. These are the patients that when pre-appointed for their dental hygiene appointments will continue to return for preventive, restorative and aesthetic procedures.

Your patients need to understand the value of the dental hygiene appointment. The communication regarding the science behind the oral health/systemic health link and the importance of preventing disease begins at the first dental appointment. This is valuable information that needs to be continually communicated at all future dental hygiene appointments.

What occurs when patients do not understand the value of a preventive and patient centered dental appointment? Here is a list of the negative aspects when you do not pre-appoint for all future dental (hygiene) appointments:

- Your active patient base will decrease
- Patients will cancel last minute
- Patients will fail an appointment
- Time and thousands of dollars are spent capturing patients who fell through the cracks
- Patients’ health will decline
- Patient rapport can be lost
- Bottom line - - Net profits will decline
The hope and goal of this eBook is that all your patients schedule and attend their dental appointments; every time and on time. Not every patient will accept your request to pre-appoint his or her next dental visit.

We have trained our patients that we will call to confirm their next appointment. Ultimately, patients need to take responsibility for their oral health and their various types of appointments. How many healthcare providers call to confirm an appointment? Have you known of a chiropractor to call and confirm an appointment? What about your nail salon or massage therapist? How many of these businesses call to confirm an appointment?

When you update your patient records also update how your patient would like you to contact them.

How many of your patients use their home phone or have a home phone? We are in an age of technology. With various types of electronic systems, we can get a quick message to our patients. Here is a list of various ways to contact a patient. Find out what your patient prefers and what will work best for your dental business.

**POSTCARD OR LETTER**

If you choose to send a postcard make, every attempt to have your patient write their own name and address on this postcard. We all receive junk mail in our mailbox and postcards can very easily get lost in between these papers. Having the patient write their own name on the postcard will provide mental recognition of their own writing.

If a patient forgets their dental appointment of when you have patients on a list of patients who need a dental appointment the best way to contact your patients are by a personal phone call. Leave a postcard as a last resort.

**EMAIL**

Most people today, have at least one email address.

Find out if your patient wants you to send an email to them. If they are open to accepting emails from your dental practice, make certain you know which email address to send a message to.

Email is a great way to tell patients about an upcoming appointment and you can also email them with a thank you or special message regarding their birthday, holiday events, open houses, etc., your dental office may want to send a message about.

**TEXT MESSAGES**

Always ask your patient if they will accept text messages from your dental office.
Many people don’t wish to receive text messages. Some people pay per text message and don’t want to incur this expense.

Text messages can also be a great way to relay a message about an upcoming appointment in your dental office.

**Patient Messaging Services:**

**Smile Reminder** - [http://www.smilereminder.com/home.do](http://www.smilereminder.com/home.do)

Patient Messaging Software Suite - Smile Reminder is the market leader in patient messaging and provides an ALL-inclusive suite of personalized patient communication tools.

**Sesame Communications** - [http://help.sesamecommunications.com/?q=whatsnew](http://help.sesamecommunications.com/?q=whatsnew)

- Text Messages
- Emails
- In addition, more!


- Text Messages
- Emails
- Allows you to build online reputation
- Enhances your website optimization
- Increases exposure for new patients
MODULE 7: Message Content

Make every message, verbal or written, short and to the point.

It is very important to add value to why the appointment is important for your patient.

Understand each patient’s personality type. Many patients respond well to humor and others respond to a tone that shows concern or even compassion.

Always be sincere in your tone and in the words you use when speaking with patients.

Re-enforce the risks for the patient should they decide to forgo scheduling an appointment for their dental needs: Preventive, restorative and even aesthetics.

1. Communicate health concerns and risks:
   - Heart disease
   - Hyperlipidemia
   - Diabetes
   - Chrons Disease
   - Parkinson’s disease
   - Alzheimer’s
   - Rheumatoid Arthritis
   - Breast Cancer
   - Go to www.perio.org for resources on the oral health/systemic health link.

2. Communicate concerns regarding the patient’s periodontal status

3. Communicate caries risk (CAMBRA)

   Go to http://www.jdentaled.org/cgi/reprint/71/5/595 for more information regarding recommendations for patients at moderate to extremely high risk for caries.
MODULE 8: Timing of Your Message

A plan for how and when to contact your patients needs to be in place.

There may not be a perfect time to contact a patient. People are very busy. The dental appointment needs to be a primary concern to the patient. This value needs to be added at the dental hygiene appointment. If your patient is new to your office, this will be the time to begin communicating and possibly changing this current value for your patient.

When contacting dental hygiene patients, there should be a specific auxiliary who is responsible for this important task. Days each week and specific times should be scheduled and added to the office computer secretary. Many dental software systems have what is called the Office Secretary. You can schedule a pop-up for a time to begin this task, each day, each week and every month throughout the year.

Always run a monthly report to track what types of patients are outstanding for dental hygiene appointments, non-surgical treatment, periodontal maintenance and even restorative treatment that has not be scheduled.

Write down at what intervals for the various types of appointments you will send a post card, letter, email, or text message. Always begin contacting overdue patients or unscheduled patients personally, which is by a personal phone call at a number you know where they can be contacted.

When you create a schedule listing how to contact patients with one through five, eventually, your patient will receive the message that means something or the timing of your message will be perfect for a positive response.
Your Dental Hygiene Department is no longer considered a loss leader. The Continuing Care System is only one area that you need to keep well oiled.

When your patients return regularly for non-surgical preventive therapy by the dental hygienist, you will have a thriving dental business. Without regular preventive appointments in the dental hygiene department, you will essentially have an urgent care or emergency care dental business.

Here are some money saving tips to keep your patients entering the front door of your dental practice and your practice profitable:

1. Take charge

One of your valuable team members need to be held accountable for patient follow-up. This task should be completed each day. The size and current success of your dental practice will dictate how much time will be spent on follow up.

2. Timing is important

Many dental offices offer evening and weekend appointments. This is a perfect time to call patients and schedule missed or overdue patient appointments. Most patients will answer their phones and schedule if you call them when they are not busy at work, participating in family activities, etc.

3. Call the most current overdue patients first

Calling your current continuing care patients is the easy part. When patients drop off the hygiene or doctor’s schedule, getting patients to return for an appointment can become tedious and very time consuming. This is where communication is one extremely important system to have in place. Patient retention and reactivation efforts are critical for your dental business to thrive and survive indefinitely.

4. Call before you write a letter or send an email

How many times have patients told you “I’ll call you when I know my schedule”? Do you believe that calling the patient later to schedule the appointment may create anger and they won’t return for future appointments? If this is true, then this patient was never really a patient. This is very similar to a friend who gets offended very easily. A real friend will accept you through the good and the bad.

It never hurts to call someone you care about and ask, “How are you doing?”

5. Encourage patients to pre-book their next dental appointment

The dental auxiliary who just participated in the patients treatment and the same person who knows and understands the patients’ needs, is the best person to schedule the next appointment.
6. Track your results

Just as in real estate, they say “Location. Location. Location”, in dentistry we need to “Track results. Track results. Track results.”

If you don’t track your results you will not know where you stand in the order of success or failure - what works and doesn’t work.

IMPORTANT:

Have a clearly defined Continuing Care strategy in place. This is just one area of success that will bring profitability to your dental business for many years to come.

For a Complimentary Pulse of your Dental Practice call or email us today.

Office: 503-970-1122
Email: info@dentalpracticesolutions.com
Website: www.dentalpracticesolutions.com
Scheduling the Next Hygiene Appointment

Scheduling the next hygiene appointment:

The hygiene appointment: preventive care, periodontal maintenance and especially scaling and root planning appointments are the most cancelled and failed appointments in a dental practice. One cancellation or failed appointment each day on the hygiene schedule, can lead to an annual loss as high as $60,000 in potential hygiene production.

Healthy Patient Script

“Mrs. Smith, Your teeth and gums are very healthy today and I want to be certain they remain healthy. I recommend that you return for your next preventive care appointment in six months. To be certain that you have the day and time that works best for you, I want to reserve Tuesday July 26, 2011 at 11:00 am for you. Will this work for your schedule?”

Always try to recommend the day of the week and similar time to the one they are currently scheduled for this day or what you know usually works best for their schedule.

Periodontal Maintenance Patient Script

“Mrs. Smith, Today you had some areas where the pockets around your gums were inflamed and the measurements were 5-6 mms which is above normal limits. There were two areas of bleeding: one was on your upper right near the very last molar and the other area was between the lower front two teeth. I want to be certain you gums remain healthy and these pockets do not become deeper. I recommend that you return for your next periodontal maintenance appointment in three months. At this appointment, I will recheck these areas and again recommend that we apply the Arestin if the areas are 5mm’s or greater. This will assist in keeping these two areas stable. In the meantime, you will need to focus your brushing and especially flossing in these problem areas. To be certain that you have the day and time that works best for you, I want to reserve Tuesday April 19, 2011 at 11:00 am for you. Will this work for your schedule?”

Root Planing Appointments

Once the patient has completed their periodontal screening exam, you will want to sit them up and explain what you have found.

At the end of this initial hygiene appointment, you will say something like this:
“Mrs. Smith, Your Today we found some areas where the pockets around your gums were inflamed and the measurements were 3-6mms. Anything above 4mm’s indicates that you oral disease as we call periodontal disease. You will need to have four appointments where we will do the scaling and root planning as we earlier discussed today. I will schedule the four appointments about one week apart. At the end of these four appointments, you will return for a re-evaluation appointment, which is similar to a post operative appointment. At this appointment, I will check to make sure that the disease is under control. I will remeasure the pockets to be certain they are within normal limits. Any areas that still measure 5mm’s or greater we will scale and reapply the antimicrobial agent called Arestin. I will now schedule the four appointments to scale and root plane and your re-evaluation appointment, which we call the (1st) periodontal maintenance appointment. It is scheduled 4-6 weeks after the scaling and root planing is complete. The periodontal maintenance appointment will continue indefinitely during you lifetime and usually about every 90-120 days. I want to find the times that work best for you. We usually see our patients for scaling and root planing later in the morning. I can reserve Tuesday February 1st at 12pm, Tuesday February 8, 2011 at 12:00pm, Tuesday February 18, 2011 at 12:00pm and Tuesday February 22, 2011 at 12:00pm. For your 1st I can see you on Tuesday March 29, 2011 at 11:00am.
Preventive Care Appointments
(Usually these will be the six month continuing care)

Dear (Insert Patient’s Name Here),

You have scheduled an appointment for your (you can insert other words such as continuing care but the goal is to add value to the hygiene appointment. Using the word “Cleaning” tends to diminish the value of a dental hygiene appointment.) preventive maintenance appointment on (Insert Date and time of appointment patient has scheduled). At the time of your appointment (Insert Doctor’s name) will examine your teeth, gums, complete various assessments which check your oral and overall health. We will also complete an oral cancer screening exam. The latest science has indicated that optimal oral health will contribute to good overall health. Your total health is our priority and our entire team looks forward to seeing you very soon!

In good health,

(Insert Doctors name here or name of you office, address, phone #, website and email should also be on the card.)

It is highly recommended that you do not mention anything about a cancellation because many times this can be an open invitation to call and cancel an appointment. If you must add something about a cancellation policy please add this at the bottom of the postcard. It is best and most successful if patients are introduced to all of your office policies from their first appointment in your office. Have patients sign this policy and only if patients misuse the policy should you begin to re-communicate the fees associated with last minute cancellations or failed appointments.
Periodontal Or Supportive Periodontal Maintenance Appointments

Dear (Insert Patient’s Name Here),

You have scheduled an appointment for your (you can insert other words such as periodontal maintenance or supportive periodontal maintenance, but the goal is to add value to the hygiene appointment. Using the word “Cleaning” tends to diminish the value of a dental hygiene appointment.) on (Insert Date and time of appointment patient has scheduled). As you are aware, the health of your teeth and gums is very important for your overall health. The hygienist (You can also insert the hygienists name here.) will be evaluating the health of your gums, the soft tissues which surround your gums, your teeth and annually, we will provide various assessments which include an oral cancer screening exam, and x-rays at specific intervals. Your overall health is very important to everyone on our team and we all look forward to seeing you very soon!

In good health,

(Insert Doctors name here or name of you office, address, phone #, website and email should also be on the card.)

______________________________________________________________

NOTES:
Many types of software will allow you to specify which patients will be seen for x-rays and which patients will only have a prophy or periodontal maintenance. In this case, you can separate out the patients who need to receive a card which states they will or will not have x-rays and this can be added (As appropriate) as indicated.
Calling Hygiene Patients To Schedule

Sample telephone conversation to Patients

Scheduling Coordinator: "Mr. Johnson, Dr. Goodtooth has reviewed your dental record and found that your last preventive oral-health examination and professional dental prophylaxis (or professional care with the hygienist) was back in May of 2009. Dr. Goodtooth is concerned and has asked me to call to schedule this important appointment. Would next Tuesday May 30th work for you at 9:00 am?"

Key words and phrases may include: “The doctor has asked me to call,” along with giving patients the date of their last appointment, is often all it takes to prompt patients to schedule. In addition, some doctors have had great response when offering a “program that offers something such as a free tube of whitening gel when they return for regular dental hygiene appointments.” This strategy has proven successful not only in reactivating patients of record, but also in attracting family and friends as new patients. A sample dialogue for this call might go like the following:

Scheduling Coordinator: "Dr. Goodtooth is committed to your prevention of disease and oral health care. He/She is concerned about your overall health so doctor would like to provide you with a complimentary oral cancer screening examination. The appointment will be approximately 15 minutes and, of course, there will be no charge.” (Schedule a one-unit appointment in the second chair. This is only one suggestion to get a resistant patient into the office. Be ready to communicate the risks for the general population and the increase of oral cancer that has occurred.)

Depending upon the patient, a brief conversation may be in order about the significance of regular oral cancer screening examinations as a life-saving mechanism. The information is important to the patient and is a significant responsibility in our role as oral health-care providers.

You can also let them know that your office does provide the free whitening when patients return for their regularly scheduled dental hygiene appointments. This can be worth up to $50.00 to patients in value for returning for their scheduled hygiene appointments.

This has been a great service for patients and incentive to keep patients returning on time for their dental hygiene appointments.
Sample Patient Recall Letters

Purpose:

A strong patient continuing care system focuses on pre-appointing patients. Even with a strong pre-appointment percentage, there will undoubtedly be some patients who are unable to pre-appoint or who are not offered the privilege due to a history of canceling or failing appointments. For the patients who do not pre-appoint, it becomes the practice’s responsibility to contact these patients to schedule them for their hygiene continuing care.

It is a known fact that a letter will weigh more heavily than a postcard or even an email sent.

The following templates are intended to both notify the patient when he/she is due, or overdue, for continuing care, and inform the patient of the risks involved if he/she does not seek the recommended dental care.

Instructions:

For the patient who is unable to pre-appoint, it works best to first make a personal phone call. While the patient is in the dental office and when they have stated for some reason, that they cannot make the next dental hygiene appointment it is more effective if you ask the patient when a good time to call in the next week is, to schedule a date for their next hygiene appointment.

When you place urgency on the dental appointment and if patients understand they can’t call a day, week or even a month before they need an appointment, you will find over time, that the patients learn to schedule their appointments sooner than later.

If the phone call attempts fail, the following letters should follow to ensure the patient has been notified and informed of the risks should he/she not seek hygiene continuing care.

Series of Contact Calls and Letters

1. Let the patient know you will call them within the next week to schedule their dental hygiene appointment. (This does not always work but it can be helpful to prevent chasing down patients in the future.)

2. Send the first continuing care card or letter a month before they are due for the hygiene appointment.

3. 1 month after patient has not called to schedule their hygiene appointment attempt to contact patient by phone. (now the month they are now due for their appointment)

4. When there is no response to the 1st phone call send the 1st letter of concern
Sample Patient Recall Letters

5. Within 3 months of no response from calls or a letter send the 2nd letter

6. Within the next 3 months of no response from the 2nd letter send the 3rd letter

7. After not seeing a patient for over 18 months it is time to consider inactivating the patient. This is why the 3rd letter usually works well.
1st letter to Patient who is due for hygiene:

This letter is sent after a phone call to the patient has been attempted.

Today’s date goes here:

Dear ____________:

Today I was reviewing your chart and realized that it has been over 6 months since our team last saw you for your hygiene preventive care (or if appropriate your periodontal maintenance) visit. I want to encourage you to contact our office as soon as possible to schedule this important appointment.

Your dental hygiene appointments are critical to sustaining your oral health and helping to prevent future dental problems. Your hygiene appointment entails much more than a cleaning, as we check for decay, provide a complimentary oral cancer screening, various assessments and give you tips to help you maintain a healthy smile in between visits to our practice. Years of research also tells us that without good oral health we may not be able maintain our overall health. Your oral health is a key to preventing other diseases. We are committed to your dental care and want to help you achieve your desired oral health results.

If you have any questions please don’t hesitate to call me. Our office will be happy to schedule your next appointment, please call us at (enter practice phone number). We hope to hear from you soon.

Sincerely,
(enter doctor’s name and practice name)
2nd letter to Patient who is due for hygiene

This letter is sent after no response from the 1st letter has been sent.

Today’s date goes here:

Dear____________:

I was reviewing your chart and realized that it has been 9 months since we last saw you for your dental hygiene (or if appropriate your periodontal maintenance) visit. We are concerned you are not receiving hygiene preventive care, which is critical to sustaining your oral health and helping to prevent future dental problems. Please contact our office as soon as possible to schedule this important appointment.

Your hygiene appointment entails much more than a cleaning, as we check for decay, provide an oral cancer screening, and give you tips to help you maintain a healthy smile in between visits to our practice.

We are committed to your dental care and want to help you achieve your desired oral health results.

If you have any questions and/or need to schedule your next appointment, please call us at (enter practice phone number). We hope to hear from you soon.

Sincerely,

(enter doctor’s name and practice name)
This is a sample patient reactivation letter that is meant to be sent to patients that have not responded to telephone attempts or previous letters to get them back onto the schedule. It may be modified for your practice. You may also want to send this with a return receipt if you are planning to inactivate a patient after no response. It is suggested that you send this in a SASE so the patient can tear off the bottom half and return to you if they are not planning to call. This has provided an easy solution for many patients.

Dear ________________,

It has been quite some time since you have been in for dental care. We have made several unsuccessful attempts to contact you by telephone and sent letters. It is our responsibility to inform you that regular dental visits are absolutely essential to maintaining good oral and overall health. Please understand if disease exists and is left untreated it can lead to other more serious health problems.

If you are avoiding treatment because of fear, there are many ways to minimize this common problem. If you are experiencing financial hardship at this time, we have a variety of options available to help you continue with your care. If you have transferred to another dentist, we will be pleased to know you are in capable hands. Please contact us and allow us to update our records with appropriate information by calling or returning the bottom of this letter in the enclosed envelope.

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I apologize that I have not called to schedule a continuing care appointment.

The best number to reach me is ________________.

___ Please call me so we can discuss my situation. The best time to reach me is ______
___ Thank you for your concern, I will not be returning because:
___ I have found a new dentist. Please transfer my records to the address I am providing:
___ You are not a provider for my dental plan.
___ I cannot afford dental care at this time.
___ I have moved from the area.
___ Fear is keeping me away.
___ Other _____________________________________________________________

Signature ___________________________________Date __________

If records are to be transferred please provide the name and contact information of your new provider on the other side of this form. Please sign your name, date and send this to our office. Let us know how we can contact you if we need further information to transfer your records.
ABOUT THE AUTHOR:

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President of Dental Practice Solutions

The customized client curriculum and proven advice is from years of hands-on experience. Ms. Seidel-Bittke, has personally worked in clinical practice, years before she ever began as a coach and consultant.

Ms. Seidel-Bittke, has also proven herself as an educator. She worked for many years as a dental hygienist and as an assistant professor at the University of Southern California, in the dental hygiene department and taught practice management to the senior dental students.

In 2007, Ms Seidel-Bittke, authored the accreditation for a new dental hygiene program in Portland, Oregon. She also assisted in writing much of the CAMBRA protocols and initial evaluation forms alongside 3M ESPE.

Her list of speaking engagements is impressive, including repeat appearances at many of the following:

- Chicago Midwinter Meeting
- Yankee Dental Congress
- California Dental Association
- Rocky Mountain Dental Conference
- Holiday Dental Conference
- Pacific Dental Conference
- Oregon Dental Association
- Wisconsin Dental Association
- New Mexico Dental Hygienists’ Association
- Kansas Dental Hygienists’ Association

For more information on how you can benefit from the products and services offered by Dental Practice Solutions please visit www.dentalpracticesolutions.com