

“THE TRUTH ABOUT THE TOOTH”

Thank you for taking the time to read this report on “the truth” about solving dental problems once and for all. You may actually have some dental problem or need that concerns you. It may be pain, unattractive smile, old mercury silver fillings, uncomfortable bite, loose painful dentures. And modern dentistry today has many wonderful ways to deal with these problems. But the funny thing is that it is not just about the procedure. It is about you and the dentist choosing the *most appropriate* procedure by doing a 10 point examination and diagnosis *first*. Since no one enjoys going to the dentist you want to make sure the dentistry is done painlessly and most importantly done so that it lasts a long time, minimizing future problems, additional visits to the dentist, and additional expense. You want it to feel comfortable, look good and function well – you don’t want to have to worry about your teeth. So whatever the problem may be, a solution to the problem begins with a 10 point exam and diagnosis. More about that later.

First of all, why do we have dental problems? It usually is because of one of two reasons, sometimes both.

First, there is plaque (bacteria). Everyone has bacteria in their mouths. The bacteria produce acids, poisons and toxins that cause decay and gum disease. This must be professionally cleaned periodically at the dentist and you must remove it daily. And there are current studies showing that mouth germs are related to heart disease!! So your dental office needs to work with you, one on one, and figure out what works easily and effectively in your mouth. And the other thing is that all areas of the mouth must be easily cleanable. If dentistry is done that is not designed with this in mind there is a potential for problems. Or if there are deep gums pockets, or crooked teeth that are not cleanable there is a potential problem.

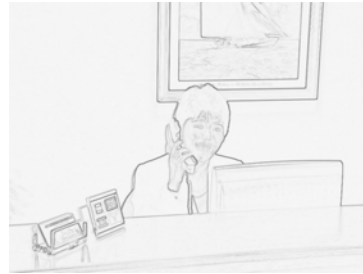
The second reason for problems is because of what I like to refer to as “engineering”, that is, the bite of the teeth. Think of the pressures and forces we can generate with our teeth. If you put a pencil between you back teeth, you could bite right through it! Studies have proven that it can be hundreds of pounds! If the bite is not “engineered” correctly, these forces can cause lots of problems. Such as chipped, broken or painful teeth, chipped or broken fillings or crowns, wearing of the teeth, loosening of the teeth and sometimes even headaches or other jaw problems. And since the teeth are connected to the jaw joints, you have to do a jaw joint (TMJ or temporomandibular joint) exam to really analyze the bite of the teeth. Like a hinge on a door. And since the muscles move the jaw and have to work when you bite together you also have to analyze the muscles. So you see this engineering check requires very careful consideration with models of your teeth on a jaw simulator.

If these two reasons are addressed, it is amazing how few problems people will have. So your dentist should look at these two reasons

and talk to you about them. We do at our practice. And in a bit, I will tell you exactly how we do that.

The next important question is how should you choose your dentist, or if you already have one, what he or she should be doing. The best way to answer that is to tell you what a report from the Academy of General Dentistry says. The Academy of General Dentistry is made up of thousands of dentists whose main goal is continuing education. They did a study in 1997 where they surveyed 15,000 patients and asked them what they expected from their dentist. Here are the top 10 answers:

1. The receptionist must be friendly on the phone and in person...a HOSTESS.
2. Be prompt and do not keep patients waiting.
3. Do not let assistants do very much without first explaining to the patient.
4. Be willing to work out more flexible finances.
5. Give patients personal attention and don't make them feel rushed like a number.
6. Tell patients what is being done before charging them.
7. Call and remind patients of their appointment.
8. The office must look, feel and smell clean.
9. Be helpful in processing insurance.
10. Let us tour the office and explain sterilization standards practiced.



So that's what 15,000 people said. Obviously a lot of dental offices don't do these basic things, or they wouldn't be in the top 10. Interesting!! So if the staff is not friendly or if you are kept waiting or if things aren't explained to you in an understandable way...should get you thinking!

These 10 things are basic issues of treating you like a person. What are some of the technical things that the dentist should be doing so that you aren't continually troubled with the problems that we talked about in the very beginning?

Here is a list of cardinal rules we follow that I feel are very important and must always be done if we are to get the results everyone expects...

- ✓ The dentist should take the time to listen to you first and be sure he or she understands your concerns and review your medical and dental history
- ✓ An oral cancer screening
- ✓ The initial exam should be thorough and done in a way that you fully understand the current condition of your mouth and teeth
- ✓ The exam should cover your teeth, gums, temporomandibular joints (TMJ), muscles, bite, and an esthetic check – and this takes a lot more than 10 minutes. It is what I like to call a **“10 Point Examination”**.



- ✓ Typically, a full series of x-rays should be made along with a panoramic so no hidden problems go undetected.
- ✓ A full series of photographs should be done too. The dentist cannot diagnose what can't be seen – photographs help us see more completely. Photographs are of great value in YOU understanding your condition
- ✓ Models are made to help see your mouth, gums and teeth in 3 dimensions
- ✓ This should all be done with enough time for you to ask questions along the way.

This first exam is done for the dentist to get a good view of the current condition of your mouth, gums, teeth etc. Make sure you understand the findings. If you don't, ask questions, and don't be afraid to ask lots of questions.

Without a doubt the *biggest mistake* I see is patients who have *limited* exams, *incomplete* diagnosis and treatment done in a vacuum. By that I mean limited treatment on one tooth or in one area with an *unawareness of other problems that may be going on*.

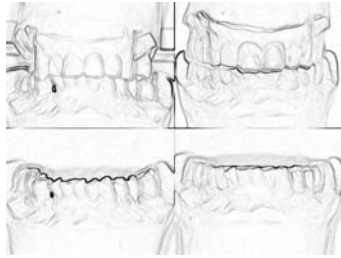
When it is done that way, the problems never really get solved and every time you go to the dentist there always seems to be something else to do. This can be very, very frustrating for a patient.

There is another *very important* reason to do this thorough 10-point initial evaluation. And it has to do with your future dental and oral health. Nobody has a perfect mouth, teeth or gums. But that does not mean that everything that is not perfect has to be treated to make it perfect. If something is decayed, infected or broken, that's a different story – that *does* need to be treated. But the important question to answer is “Is it changing or getting worse as time goes on?” In other words, if there is recession, is it continuing; if there are gum pockets, are they worsening; is the bone level dropping; is the wear worsening; are teeth getting more crowded, etc? The only way to answer those questions is to compare two or more points in time. That's why the baseline of the *10-point initial evaluation* is so important. Now when we see you for your yearly or twice yearly re-evaluation, we have something to compare to. If the issues in point are *not* changing or

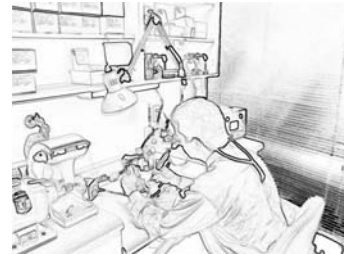
worsening, then great, nothing more needs to be done. If it is changing or worsening, then we need to develop a solution. But at that point we have a good, valid reason for the solution.

Ask what will be done next, after the evaluation. Here is what we do:

- ✓ Take time to study the clinical findings, x-rays, photographs and models. This cannot be done right during the exam appointment; it takes extra time to study.



- ✓ If dentistry is anticipated such as crowns, veneers etc, we first make a [blueprint](#) on the models of your mouth. This helps us (and you!) see exactly how things will turn out before anything is ever done in your mouth...a really important step! This



goes back to the issue I spoke about earlier regarding engineering and making sure it is planned correctly. The photographs of your teeth can also be “corrected” again so you can see the possibilities before anything is done.

- ✓ If you need specialty care for gums, root canals or straightening, I will meet with the specialist who will be doing it to review all the examination information. Any specialist referrals are orchestrated by us so that your time there is not wasted by them not having all the information. And information we have is not duplicated by them.

What this all means is ***make a diagnosis*** before treating. You would never go to a physician with an indigestion problem and just ask for Tagamet or something. You would want an exam and diagnosis to rule out other problems. You wouldn't want to be taking Tagamet if it was really a more serious heart problem.

Modern dentistry has so much to offer! Esthetic procedures such as



whitening, bonding, and veneers can create a beautiful smile. Porcelain crowns and onlays can restore broken teeth, or teeth weakened with mercury, silver fillings.

Implants can provide non-removable teeth to those who have lost teeth. Bite problems

can be solved. TMJ problems can be managed. And we LOVE being able to make a difference in our patient's lives with modern dentistry. And it truly CAN make a difference in one's life. However, before it can be determined which of these procedures is right for you and IN YOUR BEST INTEREST, I'm sure you know by now what absolutely, positively MUST be done first.

That's right, our “10 POINT” Exam and



Diagnosis!

Before any treatment is done in your mouth, we have you back for another visit to:

- ✓ Review all findings with you to make sure you fully understand.
- ✓ Talk with you about any individualized treatment recommendations, why they are recommended and discussed so all your questions are answered. With the 10-point exam, there are no surprises
- ✓ Discuss with you an appointment sequence that works for you and your circumstances. The beauty of this approach is that once the Master Plan is made, the timing can be variable. We have patients who want to get everything done right away. We have others who, because of their circumstances, prefer to sequence the treatment over several months, sometime years. This approach allows us to do that... and with no compromise of the end result.
- ✓ Discuss fully all fees involved
- ✓ Be upfront about any limitations that may be encountered that may compromise results.
- ✓ Give you a written report for your records.
- ✓ Since removing bacteria is so important to minimizing future problems, we offer a “Oral Health Program” to help you in this area.

All this that I just explained is an initial exam. If you have pain, an immediate concern or some urgent problem that will certainly be taken care of first.

All in all, it really takes a lot of time for the dentist to do all this. And a lot of this time is spent when you are not in the office, that is, working with all the information gathered during the exam. It is *“behind the scenes”* work on your behalf. But it is time well spent. And I feel that if you are going to spend your hard earned money on dentistry, then everything should be done to make sure it is the very best investment you could possibly make. You deserve no less!!

The benefit to you is solving the problem with the wisest use of your money. Our approach will help you have an attractive, healthy, comfortable mouth and teeth for a long, long time.

The following will be done during your “10 POINT INITIAL EVALUATION”

- ✓ 1. Review your medical and dental history; clarifying your concerns, wants and expectations and/or problems
- ✓ 2. Oral cancer examination
- ✓ 3. Tooth examination to check for decay, cracks, wear etc
- 4. Periodontal examination:
 - ✓ Measuring all gum crevices to check for hidden gum disease
 - ✓ Condition (quality, quantity and recession level) of gum tissue
 - ✓ Measurement of mobility or looseness, another sign of problems
 - ✓ Are fillings or crowns causing gum irritation?

5. Temporomandibular joint orthopedic examination
 - ✓ Palpation (pressing with finger tips) to check for inflammation
 - ✓ Range of motion tests to check jaw movements
 - ✓ Listening to check for clicks or grating noises
 - ✓ Orthopedic load testing to check TMJ disc
6. Muscle examination (sore muscles can be a cause of headaches and jaw fatigue)
 - ✓ Palpation (pressing) of all muscle groups both within and outside the mouth for any signs of discomfort or tension
7. Occlusal (bite) examination (bite problems can be a cause dental failures)
 - ✓ Check if all teeth touch equally (engineering check)
 - ✓ Check how teeth meet when jaw moves in all directions
8. Radiographs
 - ✓ Full mouth series, 18 views, to show decay, infection, bone condition
 - ✓ Panoramic showing entire upper and lower jaw and TMJs
9. Diagnostic study casts (models of your mouth)
 - ✓ Two sets, one is a baseline, the other for 3D planning or “blueprinting”
 - ✓ Measurement to customize models for jaw simulator
 - ✓ Measurement for how teeth bite together
10. Photographs – Purpose: to evaluate esthetics and condition of teeth and gums (diagnosis)
 - ✓ Full series of 11 different views

After your examination, we will:

- ✓ Evaluate and study all the above information
- ✓ Consult with any specialists, if indicated
- ✓ Make a specific diagnosis for your current condition
- ✓ Design a blueprint for your care with the diagnostic casts
- ✓ Develop an individualized long-term treatment program and sequence

At your consultation appointment, we will:

- ✓ Review all findings
- ✓ Discuss your treatment recommendations and sequence
- ✓ Give you a customized written report
- ✓ Discuss all fees
- ✓ Answer all questions to your satisfaction and understanding