

# Digital Photography: Today's Necessity

I have been a management consultant for private practicing dentists since 1980. In all of my years of consulting I have not seen anything that has impacted the credibility of the dental team and the case acceptance rate of treatment like computerization of the treatment rooms and digital photography for patients. Patients are more easily educated and motivated toward a higher level of dental care when they can easily see for themselves the treatment that is needed.

This change in our style of diagnosis, treatment planning and consultation is *patient driven*. Over the last few years the general public has been exposed to TV programs and print articles that have influenced their perception of the modern dental office. TV shows such as **Extreme Makeover** and **The Swan**, the local 5 o'clock news, and articles in magazines such as **Cosmopolitan** and **Good Housekeeping**, have given our patients the belief that excellent aesthetic restorative dentists must be using computers, lasers, digital radiography, CAD/CAM technology and imaged enhanced photography. While we in the dental field know that this has little to do with the quality of care that is actually delivered, the patients' perception of the environment cannot be ignored. They now expect that a clinically excellent dentist must have all the new *bells and whistles*, which translates to *high tech equipment*.

Sadly, we find most dentists are seriously lacking when it comes to electronic technology in dental offices. Dental teams are in denial about the situation, having convinced themselves that they don't have a problem with patient case acceptance, and therefore, they don't need to make the financial investment and change their style of practice. Meanwhile, patients are leaving clinically excellent practices in pursuit of a dental office that fulfills their expectation of electronics and gadgets. We need to fulfill that patient expectation to help increase the trust our patients place with us, and to improve the dentist's clinical credibility. We also need to create the WOW Factor in the treatment rooms.



While we have used intra-oral video-type cameras for years in patient education, the impact has not been as dramatic as one that is created with a set series of high quality digital images. Over the years the intra-oral camera images have greatly improved in quality, but I find that the camera systems are not used consistently or in a systematic manner in the treatment rooms by the dental teams. The sporadic use of these intra-oral camera systems does not aid the team in documenting the clinical findings or educating the patients. A consistent digital photo series for each patient is much more effective in the long run.

Each dental office will vary with the number and types of photos taken in the digital series. We have found the following 7 to 13 images to be most helpful:



- Full smiling portrait-straight on
- Un-retracted full smile in occlusion-central shot (lips and teeth only)
- Un-retracted full smile- lateral shot (Right & Left) – **Optional**
- Retracted smile-central shot (teeth only)
- Retracted smile-lateral shot (Right & Left)- **Optional**
- Maxillary arch- occlusal mirror
- Mandibular arch- occlusal mirror

- Buccal mirror-teeth in occlusion (Right & Left)
  - Contrasted Anteriors (Upper & Lower)
- Optional**



When a predetermined series of digital photographs are taken in conjunction with a full series of radiographs at a comprehensive examination, the following benefits are available to the dental team:

- **Patient Recognition:** easy recognition of patients; used in the patient chart or in the dental management computer software.



- **Patient Education:** used during the current consultation and as a method of comparison in the future. Being able to see a complete set of photos rather than sporadic individual images can be very *eye opening* for the patient when evaluating the total oral health.
- **Before & After Similar Situations:** being able to create a library of dental conditions with your own before and after pictures. Use these photos when

explaining a patient's current condition and the expected result with treatment.

- **Professional Referral:** send a portrait of the patient along with a photo of the condition for which the patient is being referred to a specialist. This not only makes for a stronger referral, the specialist really appreciates the additional information prior to seeing the patient.
- **Insurance Documentation:** being able to send a digital image of the affected area along with a radiograph can make all the difference as to whether or not the patient receives a benefit from their insurance carrier for needed treatment. This is especially true in the case of porcelain or gold onlays, crown build-ups, anterior restorations and crown lengthening.
- **Legal Documentation:** documenting the case with digital before and after images can often mean the difference between a case going to court, or a case being dismissed. This is just one more form of documentation that is easy, efficient and available to the dental team.
- **Marketing:** the dental team being able to use digital images of their own dental procedures for any marketing efforts such as newsletters, brochures and web sites.

With all the positive benefits of digital photography I have encouraged my clients to incorporate photographs into their daily routine. At times this has been a difficult task for several reasons:

- #1 This is something that they have not done before. The team now must allocate more time in the record taking portion of the comprehensive examination of a patient. The team knows that *time is money*. Is this use of additional time going to be more effective in the long run than what they are currently doing?
- #2 The doctors feel that the responsibility for learning the photography techniques and the actual taking of the pictures falls on their shoulders. The digital camera system can be expensive and the doctors are concerned that staff members may not properly use the equipment.

#3 The doctors feel that they do not need this additional diagnostic information to educate patients. Presently the patient case acceptance rate of needed treatment is fine without it.

Responding to those realistic concerns, I have found the following to be true.

#1 The additional time spent with a patient during a comprehensive examination should be the auxiliary staff's time, not the doctor's time. The dental assistant is trained to take the images and the administrative team is trained to download, edit and save the images. It is true that the doctor may need to spend a few extra minutes showing the images and educating the patient. However, spending more time in the diagnostic and treatment planning phase, answering their questions and motivating them to accept ideal comprehensive care saves time in the long run.



When a patient is highly motivated to receive treatment, less time is spent with the Treatment Coordinator discussing fees and financial options. Additionally, less time is spent by the administrative staff in the follow up process with a patient. Patients seem happy to make their next appointment and keep that appointment. With acceptance of a complete treatment plan, longer appointments can be scheduled and more treatment can be accomplished at each visit.

#2 The doctor's time is valuable. The doctor needs to be performing services that only a doctor can provide in the practice. Allow the auxiliaries the time to provide the additional services, including the taking of radiography and pictures. When properly trained, the dental assistant is often more competent and effective than the doctor with the digital camera. Dental assistants are trusted daily with \$6,000 to \$10,000 digital sensors when

taking radiographs. Why wouldn't the doctor trust them with a \$1,500 to \$4,000 digital camera system? The assistant simply needs training on how to use the camera and some guidelines on how to take pictures.



#3 When tracking treatment completion in my clients' offices, I find that the doctor and teams perception of patient treatment acceptance and what is reality is often quite different. The patients seem to be compliant and agreeable while in the treatment room with the doctor, listening to the needed dental procedures. When the patients are escorted to the administrative area, they hear the fees for treatment and the reality of their dental insurance benefits. At this point their enthusiasm starts to wane. Once treatment is initiated the patients becomes less and less compliant in completing the needed treatment, often delaying needed treatment over the next 18 months to 24 months.

I find by pulling charts and reviewing treatment plans that most dental offices have hundreds of needed dental procedures that were never completed in a timely manner for the patients. While we could take complete responsibility for this dental neglect by saying that the administrative team didn't follow up with the patient, we must also put a large part of the blame on the patient who was not motivated to achieve complete quality dental care. I have rarely seen a practice with 100% case acceptance rate. When I have seen such a rare situation, it was because the doctor was diagnosing the patient's initial concern only, never a complete ideal treatment plan.

A series of digital dental images can be one of our best tools for education with today's patient. They are expecting that you are *high tech*. They want to see the computer screens in the treatment rooms. They want to see the x-rays

blown up to a size much bigger than life. And they expect to see photographs of their own teeth to help them understand what is necessary for complete dental health. The patients want a level of care that is different than what has traditionally been delivered in the past.

The answer to my clients' reservations about initiating this new concept in their own practices comes in the form of a Digital Photography Coach. Len Bucko, our coach, has been a professional photographer for over 35 years. Seeing a need in the dental industry, Len switched his focus to dentistry a couple of years ago. Within a very short time, he has become extremely successful in his dental niche.



Working on the concept that a mechanical skill cannot be taught in a lecture hall, Len comes into the dental office and works one-on-one with the staff. His unique in-office coaching style easily allows dental auxiliaries to understand the basics of photography and editing, resulting in excellent dental images. Incorporating the digital photos into the comprehensive exam appointment becomes easy when the dental assistant is confident in the process.

Because Len's training includes the use of his 20 cameras and 4 laptop computers, each team member has a camera in-hand and an available computer with editing software. Len explains the menu settings, parts of the camera and the techniques used for dental photography while the team follows along with a camera. The team has an opportunity to use several types of cameras, seeing the pros and cons of each system. Because most dentists do not own a digital camera for the dental practice, being able to *test drive* several systems before purchasing can be extremely helpful.

Len's knowledge of photography, cameras and the editing of images is unmatched. Having been a professional educator for his entire adult

life, he has the experience and unique ability to structure the lesson to the level of the student. His approach is fun and upbeat making for a very enjoyable day for all.

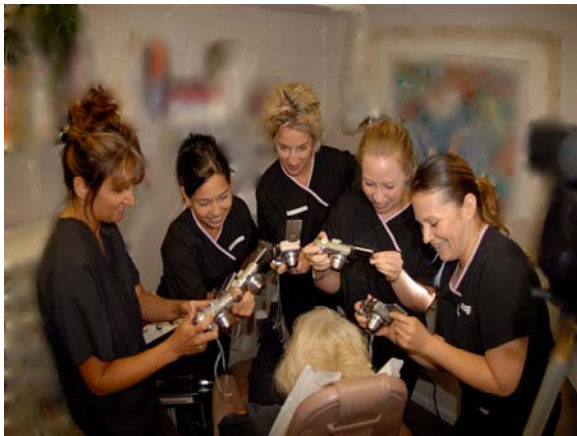
We have found that many of the dentists who have *taken the leap* and purchased a digital camera system prior to any training did so without any criteria other than "it looked like it was the best camera available". This is not necessarily the best method of selection when trying to determine what is best for you and your team. Many doctors "*over buy*" when purchasing their camera systems. The bigger and most expensive is not always better. The more expensive, bigger and heavier Digital Single Lens Reflex (DSLR) camera systems are necessary if your purpose in taking photographs is for lecture presentations, for certification or membership qualification in a dental organization, or to become Board Certified in a dental specialty. Often the doctor needs a camera with specific qualities to meet the photography requirements of those organizations.



If the purpose of purchasing a digital camera is to augment the dental radiography during a comprehensive examination and to assist in educating the patient, most dental offices will do just fine with a Compact Point and Shoot Digital camera. These cameras are lighter weight and easier to use for the dental team, and less expensive. The latest version of this type camera is now 10 megapixels, easily competing with the DSLR cameras and taking some incredible images. With Len Bucko's knowledge of all the commonly available camera systems, he can assist you in making a camera decision that is right for your practice.



After an in-office coaching session with Len, the team is ready to incorporate digital photography into their daily routine. The results have been remarkable. Virtually all team members have benefited from the incorporation of dental photography. The assistants are having fun doing something new; the administrative team finds that the patients are more motivated to start and complete treatment; the hygienists job is made easier because they are working with more highly motivated patients; and the doctor is delivering more complete complex dental care. Most of all, the patients are getting what they expect and what they deserve.



Digital dental photography is a necessity, not a nicety, for the dental practices who are dedicated to assisting the patient in achieving total dental health. Photographic images have already proven their value in the decision making process with the patients. Consider your options, develop a plan and a strategy, and get some professional help in implementing your change. You will be glad that you did.

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Pamela Strother is President of Strother Brunner, Inc., a motivational management and business consulting firm specializing in the private practice of dentistry. Prior to forming Strother Brunner, Inc. in 1989, Ms. Strother was a long-term managing principal of the Pride Institute, an internationally recognized dental management company.

Strother Brunner, Inc. has assisted thousands of dentists across the United States, Scandinavia, Canada and Great Britain in implementing effective management strategies, establishing business goals and realistic action plans, and effectively applying values-driven decision-making principles to the private practice of dentistry. As a member of the National Speakers Association and a distributor for Inscape Publishing, Pam continues to specialize in dynamic leadership development, team building, system organization, communication skills, marketing strategies and patient education for the dental team.

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