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Paperless Dentistry — Yesterday's News?

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The recent "gold rush" toward paperless dentistry — the storing, searching, and sorting of computerized dental records — has brought a bonanza to the many dentists who have mined its benefits.

For more on this topic, go to www.dentaleconomics.com and search using the following key words: paperless dentistry, dental records, computerized dental records, Bruce Stephenson.

I am such a proponent of paperless dentistry that I have developed an entire Web site ([www.Paperless Dentistry.com](#)) devoted to its tips and techniques. Done correctly, it is simple and makes a dental practice easier, faster, more efficient and more profitable to operate. But even as the techniques of paperless dentistry evolve, we need to look beyond its immediate benefits to some of the other rewards dental computing has for our practices. We want to make our computer systems work harder and produce more "gold" from the useful data it has accumulated. The best part is that using this "business intelligence" is free! While paperless dentistry is highly desirable, it is not a prerequisite. Our present dental software and existing hardware should be capable of doing all the things discussed in this article.

Computers have been a boon to dentistry, but using them optimally requires us to rethink some of our pen-and-paper habits. My great-grandfather learned to drive an automobile when he was 50. When things got tense during some of his early driving experiences, he tended to revert to his old horse-and-buggy techniques. His shouting, "Whoa damn it, whoa!" rather than pressing the brake pedal was an

ineffective habit he had to relearn. He had the right idea but the wrong method. Similarly, our old paper-based management habits are equally inappropriate for computers. How we use reports is an example.

Reports: your untapped gold mine

›Who owes you money?
In our paper-based days, reports were often difficult to get. An aged accounts receivable from a ledger tray (remember those?) was a very labor-intensive and time-consuming job. As a result, we didn't do it very often. Unfortunately, many offices still do not run this valuable report often enough. In our office, we run it at least weekly and include it in our Wednesday "5 Minute Manager" meeting with our administrative staff. Because this report takes no human time or effort, we create several different views of this information. The "oldest balance first" and "largest balance first" views call our attention to accounts that are of greatest concern. Because we are looking at these weekly, the staff knows they will be asked about the steps they're taking to collect our fees. We can spot trends and take action much earlier than we could with only monthly reports. We can also take advantage of the "Hawthorne Effect" from industrial psychology that says just monitoring performance causes it to improve.

› Automatic patient recare reminders
At our Wednesday meetings, we also look at projected production for each provider for the next month. If the hygiene schedule looks sparse, for example, we can dedicate some of our human resources to reactivating overdue patients. This is much more profitable than simply waiting for the bad news in the end-of-month report telling us what we should have done! We also have an automated recare system set up. It not only sends out recare reminders for patients due but without a prebooked appointment, it continues to send out follow-up cards every three months for a year unless an appointment is made. If there is still no appointment at the end of the year, it sends our patient the "dusty chart" letter. This letter says we are going to put their "dusty old chart" in storage if we don't hear from them. (Actually, all their "charts" are stored as electrons and they stay right in our computer system. But we do quit bugging them with recare postcards.) A follow-up recare system like this makes our computers work harder and uses data we already have. It is simple and very effective. It is not dependent on being paperless. It is just an example of modern computerized practice management.

› Referrals and marketing performance
At our "5 Minute Manager" meetings, we also look at our weekly, monthly, and yearly referral source reports. Are we doing enough, and in a timely enough manner, to thank those people who are referring new patients to our office? Has someone suddenly stopped referring to our office? If we don't know about it we can't fix it. Paper-based reports were valuable but difficult to maintain, especially if you wanted to know the total amount you produced from all the patients for each referral source. With computers, this information takes no effort to acquire. For practices that spend money on external marketing, it is imperative to closely monitor the results and reallocate spending to the most productive areas while discontinuing spending for those things that are not working. Not paperless, just sound modern management.

› Track your patients!
We also have a report we call "Where Are They Now?" We have the computer generate a list of all the patients who had initial exams 12 months ago. The report is configured to show their referral source, e-mail address, last appointment date and, most important, next appointment date. Of all the new patients who walk in our front doors, how many just keep walking right out the back doors? Are we getting better or worse at patient retention? Do we lose more patients referred by our external (costly) marketing when compared to our internal (free) marketing? We share this information with our entire staff, both to get their input for possible improvements but also to get the benefits of the Hawthorne Effect. We

persistently nagged our staff for two years about the importance of collecting e-mail addresses, but with little success. But when we started sharing the information in this report with them every month, compliance increased from about 70 percent to virtually 100 percent! Information is power! And it's free!

› Newsletters and e-mail broadcasts
Like a lot of offices, we send out a patient newsletter "once in a while." As they require a fair amount of work to write, edit, print, and mail, newsletters tend not to happen as often as we would like. Recently, we've started supplementing them with "e-mail broadcasts," which are short, timely, much easier to do, and very inexpensive. The service we use charges about $20 for 1,500 e-mails, and reports back information such as wrong addresses. It also automatically removes the e-mail addresses from our list for the few patients who ask to be removed. An example where we could get the information out quickly and answer many questions before patients came back to the office is the recent changes in the American Heart Association recommendations for antibiotic premedication. (We also directed them to a link on our Web site where we posted the actual AHA article and invited them to have their physicians go there for the latest information directly from the source.)

We continue to send out the longer printed version of our newsletters and we recently had a "contest" that asked patients to identify baby pictures of our staff members. (Patients loved it!) Interestingly, when we sent the "contest" as an e-mail broadcast, we got almost triple the response — and virtually for free!

› E-confirmations
For the last few years we have used an e-mail confirmation service that automatically collects information from our computer about appointments, patients, and e-mail addresses. It then sends up to three e-mail confirmations automatically. We do absolutely no work. It costs about $200 per month — much less than the average cost of even one failed appointment. Because some of our patients do not yet have e-mail, we continue to mail appointment confirmation postcards to patients with prebooked hygiene appointments. Of course, this is also automatically handled by our computers, but postage and postcards cost money!

Stake your claim and get digging!

What I have discussed here are just a few things offices are now doing — moving past paperless dentistry — to use more "business intelligence." Once a computer-based strategy is set up, it works automatically and pays dividends forever! And being "paperless" is not necessary to start. All we need to do is develop some new computer management techniques. We need to stop shouting, "Whoa, damn it, whoa," and simply lightly press on the power brake pedal! We need different skills for different times. Beyond the "gold rush" of paperless dentistry, there is still a "mother lode" to be mined in dental computing!

Bruce A. Stephenson, DDS, practices and is the managing partner in the highly computerized, paperless, front deskless, wireless adult group practice he founded in 1977. He bought his first dental computer in 1979 and has consulted, lectured, and written about dental computing since 1985. You can find lots of useful information about dental computing and his seminar schedule, or contact him directly at his Web site, www.PaperlessDentistry.com or e-mail Bruce@PaperlessDentistry.com.

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