

Killing Three Birds With One Stone

By

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Has it ever happened in your practice that a patient came in for a routine visit, received “spot probing” with a note to do a complete periodontal evaluation *at their next visit*, simply because there was no one to assist with recording probing data *today*?

Has a patient ever thought they needed to return for a “deep cleaning” simply because you didn’t get it all off the first time?

And how about this issue of examining a patient’s periodontal status today which varies greatly from the last recording and you are left wondering whether it is error in one of the two recordings or a true clinical difference?

Probably for most any of us we could relate to one, if not all of those situations at some point. Thanks to constant force computerized technology it is now possible to “kill three birds with one stone” and eliminate the need for assistance with probing data collection, eliminate a patient’s confusion about why they need to return for periodontal therapy, and eliminate at least one of the two variables responsible for probing errors!

The issue of not having an assistant to help record probing data is a significant one. Obviously, there is the issue of cross-contamination if the hygienist is probing in the mouth and recording that data immediately onto a paper chart. It is next to impossible to prevent 100% cross-contamination, which leaves the next person handling that record vulnerable to whatever pathogens are transferred onto the record. Secondly, there is the time management issue. The amount of time needed to record data independently may be just enough to cause a hygienist run behind, therefore, it is easy to collect *incomplete data* or have a skewed assessment. How many patients in this situation have missed being informed of the earliest stages of periodontal infection due to the lack of time and or assistance to collect accurate data?

The second issue of a lack of understanding on the patient’s part often occurs due to lack of time necessary to discuss potential treatment and answer questions as well as a lack of appropriate visuals to assist the patient in a clear understanding of the need for treatment. Particularly, this is true when discussing the need for periodontal therapy for a condition the patient didn’t know they had, doesn’t hurt and, no one discussed with them the last time they were in. Perfect conditions for patient misunderstanding. How many patients never return to complete necessary periodontal therapy because they do not fully understand the diagnosis, treatment and consequences of non-treatment?

The last and perhaps most significant issue is being able to reproduce accurate probing measurements and create continuity between clinicians in data collection. How many pockets have gone untreated, or possibly been over-treated due to inaccuracies in probing data and subsequent diagnosis?

In light of all of the technological advances being used to assist dentistry today, it is surprising how few practices have incorporated constant force computerized probing into state-of-the-art periodontal diagnosis and treatment.

Let's take a close look at the reality of this technology and examine the real benefits.

Constant force probing has been used as a valuable research tool for decades. Initially, the amount of force used to collect data was 20 grams of pressure. For some patients this was uncomfortable and therefore was not widely used in private practices. Today, constant force probing uses 15 grams of pressure for each measurement and is considerably less than what most clinicians use when probing manually. In fact, it is clinically impossible to manually reproduce a constant force from the same clinician throughout data collection and pressure can vary as much as 50 grams or more when being tested. Constant force probing also measures to within two tenths of a millimeter, so it is possible to monitor whether a 3mm pocket is really 3.0 or if it is 3.8.

The visual charting system revealed on the monitor for patients to see as well as hear as the computer collects and calls out the probing data adds a dimension of understanding and confidence in the data not always present when clinicians quietly collect data or dictate it to another team member. Reports from practices using this technology to inform patients of an accurate diagnosis of gingivitis or periodontitis confirm that less time is spent explaining and answering patient's questions because the computerized data is so clear and easy to understand.

An additional feature of constant force computerized technology for periodontal evaluations is that the revenue generated from minimal fees charged to patients to collect precision data, more than covers the cost of the technology itself. How interesting that in the 21st century we have technology at our fingertips that can "kill three birds with one stone", generate a profit from it's use, and advance diagnostic and educational ability to the next level. What is everybody waiting on?

Karen Davis has used Florida Probe computerized technology in her dental hygiene care for the past 4 years.