About the Speaker: Lauren Gueits, RDH BS

- Lauren Gueits, a dental hygienist of 20+ years and a recipient of the 2010 RDH Sunstar Award of Distinction, lectures nationally to health professionals on Comprehensive Care and Oral/Systemic links.
- Lauren received her degree from the State University of New York at Farmingdale in 1991 and post graduate training in Myofunctional Therapy through the AOMT in 2013. Lauren is a published author and has been seen on WNBC, WABC and the Colgate Oral Health Network raising awareness about diabetes and oral health.
- She is passionate about the perio-ortho connection and the health benefits of aligned teeth, thus enjoying her role as Hygiene Education Manager for Align Technology.
- *Mom of 3 — all in Invisalign treatment

PART II

The Hygienist's Role in Implementing Ortho in the Dental Practice
Our Time Together: Part Two

Part I
• Ortho 101: Para-Ortho-Systemic Connections
• Long Term Oral Health Solutions with Invisalign Therapy
• Attributable vs. Accessible
• Implementing Ortho in the Dental Practice

Part II
• Orthodontic Conversations from the Hygiene Chair
• Hygiene Ortho Exam
• Effective Strategies for Increased Case Acceptance
• Case Reviews

Clinical Protocol: “Prevention” Planning
• PERIO
• ORTHO
• RESTORATIVE*
*Restorative takes precedence if active decay/pathology/pain.

Supportive Evidence…
Most Need Straighter Teeth, but Few Get Treated

75% of US affected with malocclusion¹
Epidemiological study by NCDS²
49% want straighter teeth³
Braces vs. no treatment⁴? Opt for no TX

¹ Brunelle, et al. in Journal of Dental Research (2/96)
² National Center for Health Statistics
³ Data on file. Align study of 18,000 adults 25–49
⁴ 75% of US affected with malocclusion¹
Epidemiological study by NCDS²
49% want straighter teeth³
Braces vs. no treatment⁴? Opt for no TX
Invisalign vs. Braces

**INVISALIGN CLEAR ALIGNERS**
- Enhanced periodontal health
- Less risk for enamel de-calcification
- No food restrictions
- Esthetic clear advantage: No wires
- Less time in dental chair

**BRACES**
- Oral Hygiene compromised
- High risk for enamel de-calcification
- Must avoid certain foods
- Less esthetic: wires/brackets
- Emergency appointments / broken brackets

Not One Case of Root Resorption in Over 3M Cases!
Caries Exam | Oral Cancer Screening | Periodontal Assessment

Who Is Doing the Ortho Exam? In Many Offices, No One!

- Doctor is focused on esthetics and restorative
- Hygienist who focuses on optimum oral health
- Ortho exam should be a routine part of the hygiene exam

One Second Ortho Exam

CLOSE!
Top Five Clues to Disclose Malocclusion (CLAWS)

- C - clefting/Recession
- L - lingual Inclination
- A - abfractions
- W - wearing (night guard candidates)
- S - shifting (slipped the contact)

Barry: Slip the Contact

Case Selection...Who Qualifies?

- Crowding
- Spacing
- Ortho relapse
- Anterior cross-bite
- Deep Bite (over-bite)
- Narrow Arches (Lingual Inclination)
Pre Restorative Ortho

Combo case with Invisalign and veneers with post-op profile shift

Pre Profile Shift

Pre Profile Shift and Veneers

Combo case with Invisalign opportunity for full mouth TX

The orthodontic conversation
Getting patients to value tooth alignment

6 Reasons Dental Patients Say “No” to Treatment

1. They Don’t Feel a Connection
2. They Don’t Understand the Value of the Dentistry
3. You Don’t Listen
4. You Don’t Have a Treatment Coordinator
5. You Rarely Follow Up
6. You Don’t Offer Financing

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The Orthodontic Conversation in the Hygiene Chair

Goal: Patients to Understand the **VALUE** of Tooth Alignment

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“Show and Tell” — “Bib On” and “Bib Off” Conversations

- Do not offer solutions before discussing problems
- What “not” to say:
  - “Have you considered straightening your teeth?”
  - “Your teeth are crowded, does this bother you?”

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“Bib On” Conversations

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"ING" Conversation Starters: This Concerns Me Because…

• Your gums are receding
• Your teeth are chipping
• The enamel is thinning
• Your teeth are shifting
• Your teeth are wearing
• How is Dr. _____ going to fix this in 10, 20 years?
• "Your teeth are colliding rather than sliding"

"Show and Tell"

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Solve Instead of Sell

6 WORDS NOT TO USE
• Invisalign
• Ortho / Braces
• Crowded
• Straighten
• Crooked

REPLACE WITH
• "Teeth out of trauma" (solution)
• Clear Aligner Therapy
• Shifting or crowding
• Align
• "No such thing as "crooked teeth"
“Bib On” Conversations:  
A Review Goal: Create Patient Value

1. My concern is, if you do not take your teeth out of trauma, “something’s gotta give” (law of physics) = destruction of hard tissue/soft tissue. Use “ING” words resulting in fractured teeth, loss of tooth support, etc.

2. “Now really need to consider taking your teeth out of trauma”

3. Pause: Patient will usually inquire “how do we do that?” … “Do you mean braces?”

4. Offer vehicle of solution: “No, you do not need braces, we use a modern approach; clear aligner therapy” You may have heard of… INVISALIGN

5. NOW IT’S TIME FOR BIB OFF AND IT’S ALL ABOUT INVISALIGN THERAPY!!

“Bib Off” Conversation

“Bib Off” Conversations: Hygiene Invisalign Education

Goal: Patient Consult (5–10 minutes chair time)
- “You may have heard of Invisalign” Now “bib off” “Let me show you”…
- Sample aligners Typodont in operatory
- Straight talk brochure we chair side tool
- Review Patient Case Portfolio/Gallery Show Evin
- Explain how clear aligner therapy works play movie of ClinCheck
- Review Patient intra-extra oral photos/mirror Play Straight Talk Video
- Review findings from Straight Talk Brochure with doctor in front of patient
Teeth Don’t Age, They Wear

- “Anti-Aging Strategies”
- Roman time skull
- “Real Age” 200–400 AD
- “Do you want to keep your teeth for a lifetime”?
- “Teeth that fit together properly, last longer”

Malpositioned teeth causing malocclusion

Provide Solution

“BIG” Words
- Chipping, receding, chipping
- Hard and soft tissue damage
- Teeth lose and costly dentistry: surgery, implants

Take your teeth out of trauma

PCS: Problem, Consequence, Solution

Communication Flow: Use Straight Talk Brochure

5x Trust Transfer
1. Hygienist to Patient
2. Hygienist to Doctor
3. Doctor to Patient
4. Hygienist to Office Manager
5. Office Manager to Patient

Teamwork Team Communication
Recipe for Invisalign Success Pathway

When to Refer to Orthodontist

- Class II or Class III A/P Correction (Teen)
- Pre-Teen Mixed Dentition
- Are Auxiliaries Required?
- What is GP comfort level?
- Consider networking with Orthodontists

What if a Patient is Periodontally Compromised?
Hygienists and Ortho Are Integral to Comprehensive Care!

- Be proactive! Is this condition related to malocclusion?
- Offer patients long term solutions that are non-invasive; Treat problems not symptoms
- Patients trust RDH's to give them proper guidance

How Could This Have Been Prevented?

Invisalign As an Oral Health Solution?

Scientific Evidence + Clinical Expertise = Evidence Based Dentistry

- Does this make sense?
- Will my patients benefit?
- Is it minimally invasive?
- Pros vs. cons?
- Do my patients deserve options?
• Dr. Miguel Casanas went from 0–65 cases in 9 months
• Hygienists are integral component to patient education!
• Patients “Happy and Healthy”
• More Referrals
• More productive hygiene schedule with longer hygiene appointment times

Recession Caused by Tooth Brush Abrasion...Really?

Monday Morning Action Items

• Use the conversation starters. Try an “ING” or two!
• Avoid the “6 words”
• Use the intra-oral camera on each patient. (focus on recession, abfractions, excessive wear)
• Schedule appointment with Territory Manager to assist in setting up operatory /tools/role play
Thank You…

Transforming people’s lives by improving the journey to a healthy, beautiful smile.

Contact: lgueits@aligntech.com