

PSILENT PRODUCTIONS

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Sugar Bugs and Sleepy Juice

1. Dealing with Parents- the best promotional plan going

- A. Your first job is to be sure the parents feel heard by you-- establish credibility
- B. Prepare them and set guidelines-- teach them positive behavior
 - 1. Prepare them for their children's visits
 - a. Explain your techniques of empowering their children
 - b. Outline the procedures that are to be done
 - 2. Set clear guidelines around operative appointments
 - a. Be optimistic, but realistic
 - b. Acknowledge potential areas of difficulty
 - c. Discuss strategies
 - d. Make agreements regarding their role
 - 3. My office's **guidelines**
 - a. Do not over-prepare the child
 - b. Use our terminology
 - c. Be a silent observer only
 - d. Leave when asked (this must be agreed upon up front)
 - e. Do not make promises
- C. Studies show 82% of parents follow instructions

2. Rubber dam—a tremendous management tool in pediatric care

- A. Punch two holes and cut a single slit— isolate a quadrant
- B. Advantages
 - 1. No tongues or lips
 - 2. Dry field
 - 3. Easier access
 - 4. Current standard of care
- C. Clamps
 - 1. Maxillary teeth
 - a. Permanent molars= 3, 14, 14A, W5
 - b. Primary second molars= 3, 8A, W5, W8
 - c. Primary first molars and bicuspid= 2
 - 2. Mandibular teeth
 - a. Permanent molars= 3, 14, 14A
 - b. Primary second molars= 8A
 - c. Primary first molars and bicuspid= 2

3. Local anesthesia—getting past “the needle”

- A. Infiltrations vs. Blocks
 - 1. Infiltrations
 - a. Class I and II restorations
 - b. Single root extractions
 - c. Good patient
 - 2. Blocks
 - a. Stainless steel crowns
 - b. Pulp therapy
 - c. Multi-root extractions
 - d. Nervous patient
- B. Needles
 - 1. 27 ga. short
 - 2. 30 ga. short
 - 3. 30 ga. extra short—very helpful on infiltrations
- C. Septocaine 4% (see dosage chart at end of handout)
 - 1. Especially effective for infiltrations
 - 2. NOT recommended for children under 3 years of age
 - 3. NOT recommended for mandibular blocks
 - 4. Effective for hard-to-get-numb patients
- D. Lidocaine 2% (see dosage chart at end of handout)
 - 1. For children under 3 years of age
 - 2. For mandibular blocks
 - 3. Can be used for infiltrations, too
- E. Topical Anesthetic
 - 1. Caine sticks
 - 2. Can give to kids for soft-tissue extractions at home
- F. Safety techniques
 - 1. Assistant hands of child’s forehead and child’s hands
 - 2. Mouth prop
- G. Vocabulary
- H. Onset-- a local anesthetic buffering solution
 - 1. Uptake and onset is faster (average time is 1:51)
 - 2. Comfort is enhanced (72% felt injections was more comfortable)
 - 3. Speed makes restorative at recall visit possible
 - 4. Mixed with “pen” and done chairside
- I. Oraverse— a vasodilating solution (Phentolamine mesylate)
 - 1. Vasodilating solution
 - 2. Reduces lip and tongue symptom time
 - 3. Delivered as follow-up injection
 - 4. Acceptance has been reasonable to very good by parents

4. Sealants—one of the most difficult procedures to do well

- A. Statistics
 1. 70 percent of caries in primary teeth occur interproximally
 2. Retentiveness in broader and shallower grooves is not as predictable
- B. Sealants on permanent teeth- the Robert Feigel technique
 1. We always use a rubber dam to isolate and keep dry
 2. We use topical anesthetic for placement of clamps
 3. Cleaning of grooves is done by air abrasion
 4. Etching is brief
 5. Prime and Bond is used to increase flow of filled sealant material
 6. UltraSeal material is our material of choice
- C. Air abrasion
 1. Cleans grooves better than anything I've used
 2. Partially etches teeth while cleaning, enhancing bond strength
 3. May expose carious pits that are not otherwise visible

5. Patient Napkins—hands-free information

- A. Hands-free information at the chair
- B. Advantages
 1. No need to check charts or computers
 2. Codes can convey information without speaking
 - a. Patient name
 - b. Procedures to be done
 - c. Latex allergies
 - d. Any other codes you may determine

5. Denovo matrix bands—a very simple matrix band system

- A. Come in a kit with varying sizes
- B. Re-usable
- C. Very fast for placement
- D. Requires wedges

6. Patient traditions—another way to connect with patients

- A. We give a book for high school graduation
- B. Photographs at every cleaning visit

7. SonicFill—a bulk-fill composite technique

- A. Unique delivery system
 1. Handpiece creates sonic energy to make material flowable
 2. Material is injected directly into prep
 3. When activation is ceased, the composite returns to high viscosity
- C. Advantages over conventional composites
 1. Marginal adaptation due to initial flowability
 2. Low shrinkage
 3. Depth of cure

- 8. Office Handouts-- Assures that parents know what you've said**
 - A. When self-generated, handouts will reflect your exact words
 - B. Advantages of handouts
 1. Some people learn best by visual cues
 2. If a handout is marked, patients are three times more likely to keep it

- 9. Heighten Your Sense of Gratitude—your non-fiscal “pay”**
 - A. This comes in many forms
 - B. Advantages
 1. Government does not tax it
 2. You keep it forever
 3. Can lead to surprising long-term results

- 10. Smart Burs—non-invasive plastic burs**
 - A. Come in several slow-speed round bur sizes
 - B. Single-use
 - C. Removes only soft carious dentin
 - D. “Chatters” when it contacts secondary dentin

- 11. Valo Light—a high intensity and fast curing light**
 - A. LED curing light in the wavelength of 395-480nm
 - B. Very light weight and cordless
 - C. Speeds appointments for short-attention span children

- 12. The Infant exam—the new norm for starting pediatric patients**
 - A. All children should establish a dental home no later than 12 months
 - B. Infant oral health—critical aspects
 1. Establishes a dental home
 2. Oral health risk assessment
 - a. Familial patterns
 - b. Transmission via spoons, etc.
 - c. Frequency of ingestion
 - d. Physical properties of foods
 - e. Juices at night
 - f. Organic foods are not exempt from causing caries
 3. Teething
 4. Oral hygiene
 5. Diet
 - a. High sugar diets are established by 12 months of age
 - b. Frequent night-feeding and/or nursing associated with ECC
 - c. Night-time feeding of juice not advised
 - d. Frequent between-meal snacks increase caries rate
 6. Fluoride supplementation
 7. Injury prevention
 - a. Greatest incidence of trauma occurs at 2-3 years of age
 - b. Causes of trauma (in order of frequency)
 - i. Falls

- ii. Traffic accidents
- iii. Violence
- iv. Sports

13. Alasticks-- a simple technique for simplifying strip crowns

- A. Isolate with rubber dam with individually punched holes (small)
- B. Place orthodontic alasticks by stretching over teeth with two pieces of floss
 - 1. Retracts gingival tissues
 - 2. Hemorrhage control
 - 3. Leave facial floss to facilitate removal of alastick
- C. Caries removal
 - 1. Slow speed round bur
 - 2. Place glass ionomer in deep areas (also increases retention)
- D. Minimal prepping incisal and axial walls with 169 fissure bur
- E. Fit strip crowns
 - 1. Must trim away “cuff”
 - 2. Crowns should fit snugly
 - 3. Place vent holes in MI and DI line angles
 - 4. Fill 1/2- 2/3 full with restorative material (Filtek Supreme Ultra A1D)
 - 5. Place over tooth
 - 6. Wipe away excess material and light
 - 7. Removing strip crown form
 - a. Course disk to remove incisal edge of crown form
 - b. Sharp instrument (Hollenbeck) to “unzip” lingual of crown form
 - c. Hemostat to remove entire form
 - d. Finish with disks
 - 8. Remove alasticks by pulling them toward labial over the crowns

LOCAL ANESTHETIC MAXIMUM DOSAGE CHART

		4%	Articaine	
<u>Age</u>	<u>Weight</u>	<u>Max Dose</u>		<u>Carpules</u>
< 3 years	<i>NOT</i>	<i>RECOM</i>		<i>MENDED</i>
3-5 years	25-40#	80-128 mg		1- 1.8
5-8 years	40-70#	128-224 mg		1.8- 3
> 8 years	70-100#	224-320 mg		3- 4.5

		2%	Lidocaine	
<u>Age</u>	<u>Weight</u>	<u>Max Dose</u>		<u>Carpules</u>
< 3 years	20-25#	40-50 mg		1- 1.5
3-5 years	25-40#	50- 80 mg		1.5- 2
5-8 years	40-70#	80- 140 mg		3- 3.5
> 8 years	70-100#	140- 200 mg		3.5- 5.5