

A Diary of a Dentist – Part 3: Happy Patient, Happy Dentist.

Any treatment on anterior teeth or especially involving an incisal edge such as anterior class 3's and 4's used to be intimidating and stressful. Shade-matching was my major concern. If I prepped the tooth and tried a shade, but didn't like it, I would have to hit the redo button. If it came out nice, I wouldn't celebrate the win with the patient like I should have.

These wins should be celebrated every day, not just for anterior teeth but any teeth that you have restored. One way I like celebrating these wins is showing the patient before and after images. These pictures can be worth a thousand words and even more. The patient might see how good they look but sometimes you need to help point this out. If you are excited, they will become excited too.

Before showing the patient their beautiful esthetic composite restorations make sure they are ready for viewing. For anterior cases, I sit the patient up and have them turn their head toward me so I can evaluate if the incisal edges are contoured well and perpendicular to the floor. Sometimes I have to use discs to even them out. Wetting the teeth and not leaving it dry is also helpful. Then show them the post op images and wait for the smile.

Here's a case with your classic sticky dark pit on a lower molar. I took a pre-op image and showed the patient, and they said, "wow that's gross". So, the patient became aware of the dark pit and was ready for the transformation. Showing patients, the pre-op or mid prep image of a cavity has been a game changer for me. The patient owns the problem and there is never that "this filling should never have been done" conversation.



Before



Decay removed

With the use of air abrasion, I excavated out the dark decay without the need for local anesthesia. Patients love when I can use air abrasion. I tell them "Instead of using the drill I can use my sand blaster to clean out the cavity. It will feel like a lot of air and powder". There is also no need for bur preparation. This is such a practice builder, and the patients will tell their friends and family about their experience. It becomes a superefficient and stress-free procedure for both you and the patient.

So, for this case, I excavated out all the carious enamel and dentin with alumina oxide. I then thoroughly rinsed off all the particles with my air water syringe. I went right to bonding the prep using Tokuyama Universal Bond. I didn't need to etch as the air abrasion removes any biofilm and creates excellent retention for the restorative materials. This bond is quick and easy and doesn't need to be cured. It has two-components that I mix together and apply with a brush to the preparation. A quick air dry is all I need as there is no need to wait or cure it. I followed by injecting OMNICHROMA *Flow,* filling up the entire prepped area. The new restoration was then thoroughly light cured and then lightly smoothed with a carbide bur. Then it's occlusal verification time. I always check the occlusion with thick blue carbon articulating paper. With this technique the occlusal adjustments are accurate and efficient since the patient is not numb and has full proprioception of their bite. Be sure to also confirm the occlusion when the patient has sat up as it is different than in the lying down position. After the occlusion has been adjusted with my carbide bur then I will finish off the restoration with a polishing cup.



OMNICHROMA Flow before curing



OMNICHROMA Flow after curing

The patient was super happy and impressed with the esthetic result and the pain free experience. I could sense their joy. When patients are happy you should be happy too and capture the moment. This patient said they were going to write us a positive five-star review. This case was a simple lower molar occlusal pit restoration. It was 20 minutes of chair time. So, you can see a great patient experience doesn't have to be from a full rehabilitation of crowns or veneers. It can be as simple as an occlusal composite. Regardless of the restoration, if you show them the pre-op image and compare it against the new post op image, they will be happy and excited, and you should be too. This is an excellent time to capture the moment and use it to promote your quality work.