



Team Activity

Team Activity

Series 8 The Four Pillars

Session 2 Diagnosis (Part 1)

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1. Make a copy of this worksheet for each team member to use.
 2. Complete the Team Activity.
 3. Fax or email one “Master Worksheet” containing your team’s collective efforts.
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Send Us Your Master Worksheet

Fax
615-807-3301

Email
Champions@DentalSuccessToday.net

Team Activity

Step 1 Clinical Philosophy

Begin by expanding our vision and underlying beliefs of diagnosis.

Commit to mastering minds before mouths.

Remember

Nothing can be done to help a patient if it isn't diagnosed!

Synonyms for Diagnosis:

- Creation
- Opportunity
- Health Impact

The Simplest, Most Impactful, Upgraded Change in Thought:

"Is it bad enough?" < "Could it be better...and how?"

As a team, openly discuss clinical philosophy.

Has our clinical philosophy changed over time?

If so, how?

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Are we all in alignment, thinking and speaking in harmony, with our clinical philosophy?

Are there any newer team members who'd benefit from further clarification?

How to Define Clinical Philosophy:

- What are we here to do?
- How do we help people?
- What is our state of ideal for patient outcomes?

Our clinical philosophy is...

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Step 2 Pillars of Health

Continue by exploring where there's opportunity for integrating these pillars of health.

Dive into the details of how we're constructing diagnosis.

Pillars of Health in Their Simplest Form:

- Health
- Function
- Beauty

Treatment Coordinator

During the intake interview with all new patients, set the expectation that the team will be looking at gums, teeth, bite and smile.

Hygienists

Set the same expectation and follow through on delivering that during every re-care, health enhancement, and maintenance appointment with everyone.

Remember

At every engagement, at every opportunity, we're doing a 360-degree assessment of the pillars of health.

Use a scale of 1-10 as our guide as we make our assessment moving through the pillars. With anything below a level 10, offer a leveled up question for patients to engage with.

Example

"Is there anything you'd change about your smile?" < "If there was something we could do, what would that be, to help you achieve your state of ideal smile?"

Creating opportunity is creating the pathway to optimal health and achieving state of ideal with as many patients as we possibly can!

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On a scale from 1-10, how well are we doing at assessing all pillars of health, with all patients, all the time?

On a scale from 1-10, how well are we doing at asking leveled up questions and inviting patients into a high quality conversation about their state of ideal?

If we're less than a level 10 in either of these areas, how can we commit to improving?

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Step 3 Diagnostic Protocols

Continue by considering how we can more effectively leverage our diagnostic protocols.

Discover and discuss how we can consistently demonstrate and create diagnosis through our diagnostic protocols.

Remember

The purpose of our protocols is to bring the pillars of health to life and engage patients!

Use Objective Data (the 3 Ps) to Create an Experiential Diagnosis:

- Pictures
- Proof
- Pain

The 3 Ps is the pathway to educate and engage patients during their diagnostic experience.

With new patients, on a scale from 1-10, how do we rate ourselves for how well everyone on the team knows, has time for, and follows all of our diagnostic protocols?

With new patients, on a scale from 1-10, how do we rate ourselves for how consistently we're capturing pictures, proof and pain?

With new patients, on a scale from 1-10, how do we rate ourselves for how well we leverage pictures, proof and pain?

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What about existing patients?

Examples:

- Patients who treated one arch but not the other.
- Patients who treated one quadrant but not the others.
- Patients who are in hygiene and think they're healthy when they're not at a state of ideal.

With existing patients, on a scale from 1-10, how do we rate ourselves for how well everyone on the team knows, has time for, and follows all of our diagnostic protocols?

With existing patients, on a scale from 1-10, how do we rate ourselves for how consistently we're capturing pictures, proof and pain?

With existing patients, on a scale from 1-10, how do we rate ourselves for how well we leverage pictures, proof and pain?

Our standard of excellence for diagnosing patients, new and old, is...

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Step 4 Preparation and Invitation

Discuss how we're preparing and inviting patients into their diagnosis.

Commit to how we're going to create opportunities.

Two Success Principles of Diagnosis:

- Treat every patient like a new patient.
- Show patients the big picture of how dentistry fits into their lives, not just their mouths.

Remember

We can never achieve more than the opportunities we create!

What engaging questions are we asking / can we commit to asking patients during their diagnostic experience with us?

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Are we holding our weekly treatment plan reviews from the current week to the next week?

Yes or no?

Are we holding our morning huddles every day and are they dialed in to a level 10?

Yes or no?

What can we do to prepare for each patient so we can execute experiential, comprehensive diagnosis at the highest level?

How can we set ourselves up for success?
