



ALLSOPP SMILE ORTHODONTIC MENTORING

The framework described below will provide you with GDC registered Orthodontic Specialist planning, ongoing support for orthodontic cases & the final safety net of ME finishing the cases if there are any difficulties. We will have shared regulatory responsibility for the case.



Your patients want to see you, not someone else!
This is the definition of 'Good will'.

There is NO contract OR required case numbers. Just use it as you require with your aligner (Invisalign) based Orthodontics:

- 1) You've never done any before – You can now start some cases, safe in the knowledge that OM will keep you safe.
- 2) Have done a small amount – OM will give you total support as you learn & develop.
- 3) Are quite experienced – this will help you develop skills/learning further; both Orthodontic and Aligners. You can dip in & out of OM, as you choose.

OM currently will only work with 'Aligner based Orthodontics' (Invisalign) as the 'Dental Monitoring' of Fixed appliances is currently very slow (it will happen).

Summary of OM framework

Costs

Costs – you earn £1,650 per 'full' case (unlimited aligners for up to 5 years)

- OM fee per case - £1,000*
- Invisalign cost – approx. £1,100.00 if using my account & discount (or your own account cost)
- How much will you earn? Using my £3750.00 full case cost as an example; your cost will not be the same more/less etc. (probably more, because of lower volumes & no economies of scale?).

£3,750 - £1,000 (OM case fee) - £1,100 (Invisalign cost) = £1,650.00

Patients often push for Express & Lite because they are cheaper – be very aware of the product limitations & extra costs. This is where quality planning is critical because often they are inappropriate.

Express

Up to 7 aligners within a 1 year period.
We charge £1950.00, lab fee £390
(discounted)

Lite

Up to 14 aligners within a 2 year period.
We charge £2750.00, lab fee £710.00
(discounted)

Steps in process – summary (detail below)

- Smile mate – initial assessment at your practice
- Record collection at my surgery
- Use of either My Invisalign account (full with 'Diamond' discount, 44%) or your own. If you only have a 'GO' account, then the functionality of Invisalign is reduced i.e. only 5-5 etc so in some cases it would be better to use my account.
- Aligner fit at your surgery – attachments, IPR etc.
- 'Dental Monitoring' to allow weekly overview of the case – until the end or sooner if there is a 'Loss of Tracking' or other clinical issues.
- If further treatment is required the patient will need a rescan at MY surgery.

- Attachment removal, polish etc at your surgery if the patient is happy with the result. If they want 'refinement' (now additional aligners in Invisalign speak) to be rescanned at MY surgery.
- Final records (scan, photos etc.) at MY surgery – unless you have a digital intra oral scanner. It's a critical stage as we must have quality final records (photos and consent for social media) and the ability to easily make replacement retainers (on demand, cost after 1 replacement is our policy).
- Retainer fit at YOUR surgery.
- FINAL OM BACKUP** – Hopefully this will not be required because of the meticulous planning of the case and my experience. But it's important to plan for all scenarios. If there are any residual issues that you can't resolve with aligners, we will, in the contract, allow the use of 'fixed appliances' and MY surgery will complete this stage. This is part of the OM cost, there are no additional costs.

Other Business Opportunities

The key to everything is in the initial planning so it's 'transparent' to the patient what is required and what the costs are. The Orthodontic simulation highlights all of this and we will plan for it ("if it's an afterthought, it's an excuse", in the patient's mind)

For YOUR practice:

- Whitening – all patients want 'white straight teeth' so you'll either factor this in to your orthodontic price or quote as an additional cost at the start.
- Cosmetic dentistry – Many adults have 'Attrition, Abrasion & Erosion' so require composites, veneers etc. to restore incisal edges.

For MY practice:

- 'Life time retention' protocol – we have a product linked to DM where the patient scans every 3 months and we can tell if there's any relapse. We also offer 1 free retainer a year as part of the product. The goal is to prevent relapse and catch it at a very early stage – it does not include the cost of orthodontic retreatment.
- Gingival contouring (electrosurgery) – In addition to incisal edges, quite often in adult orthodontics there is a mismatch of gingival levels which some high smile line patients show (ie II div 2's) – I use electrosurgery to sculpt this.
- Facial Aesthetics – Patients may want Fillers or Botox after Orthodontics. A very important example would be non-surgical treatment of the high lip line and 'Gummy smile' seen in a Class II div 2 patient – the use of Botox will reduce/prevent this – far more aesthetic!

Detailed steps in the process

1) SMILE MATE – AT YOUR PRACTICE

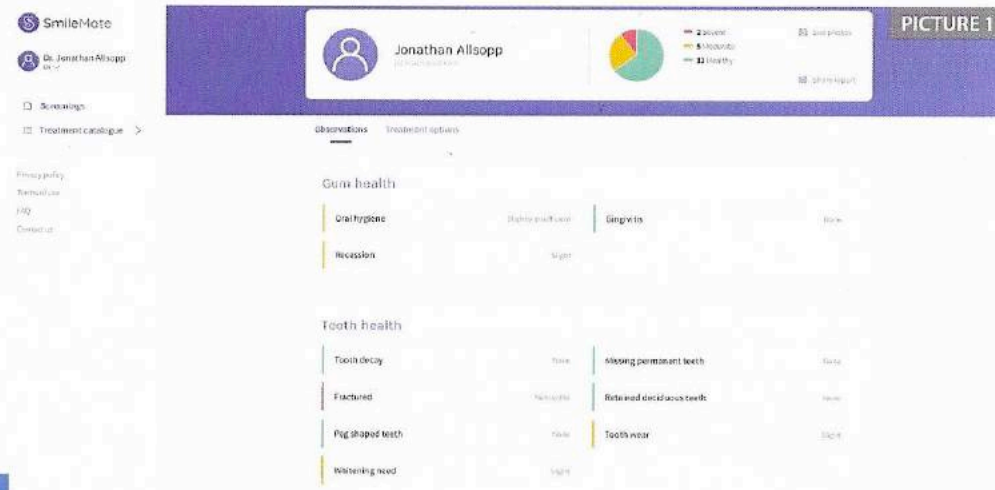
Scan the prospective orthodontic patient using a 'smart phone' & Scan Box via the SMILE MATE app. You will be using a 'satellite' account of my main one; this is just for possible orthodontic cases and is factored in to the cost.

Once you've seen it work, you will wish to use Smile Mate for all your patients to highlight dental issues, show possible solutions (you can prioritise your preferences i.e. bleaching, composites, Veneers etc.). We will need to alter your Smile Mate account to cover these additional costs.

Observations

Within 10 minutes of the scan we will both receive a full report on the patient's dental status including Periodontal, Dental & Orthodontic needs – this can be shared with the patient. This uses a traffic light scoring scheme (Red, Amber & Green)

PICTURES 1&2; I can also see the photographs PICTURES 4&5, to facilitate almost immediate informed comment on the case.



Teeth alignment

Molar class	I	Cuspid class	I
Overbite	Normal	Posterior open bite	None
Overjet	Normal	Segmental crossbite	None
Upper crowding	None	Lower crowding	Slight
Upper anterior spacing	Noticeable	Lower anterior spacing	None

Treatment Options

'Suggestions and guidance' – PICTURE 3 is already highlighting the potential difficulties/complications in closure of a midline diastema; its RED!

Loosely I would suggest the following allocation of cases following Smile Mate scoring:

GREEN	Suitable for any dentist
AMBER	Dependant on experience
RED	Specialist Orthodontist

OUTCOME SIMULATION – showing the patient what's possible
In PICTURE 3 (NEXT PAGE), the hyperlink takes you to 'vision' which is product from the company involved in this product i.e. DM. BUT, Invisalign's outcome simulator is far more accurate/correct.

2) RECORD COLLECTION & OUTCOME SIMULATION AT MY SURGERY. 22

BIRMINGHAM ROAD OR 26 BRIDGE STREET This visit is physically at my surgery, all the rest is with yourself.

- A digital Intra oral scan - Itero
- Radiographs – OPG & Lateral Ceph. (2d Imaging), possible CBCT (3d) for unerupted teeth/pathology.
- Photographs (Intra/Extra oral)

I will use these records to produce an outcome simulation and treatment plan.

DROPBOX – I share these with my practice team currently using DROPBOX and would propose the same with yourself – shown in PICTURE 6 (5 before/after images - NEXT PAGE).

PICTURE 3

Teeth alignment

Further evaluation by a dentist and/or a specialist orthodontist is needed before starting an orthodontic treatment. Treating "Upper anterior spacing" can involve complex treatments and requires careful consideration.

Want to show your patient what they look like with aligners or braces? Generate an instant photo-realistic simulations of your patient smile with different appliances.

[More details](#)

Lower crowding

Slight

Upper anterior spacing

Noticeable



ALIGNERS

What is it?

Aligners are a series of transparent custom-made plastic trays that fit tightly on the teeth. When they go into position, they press the teeth gently to move them gradually into position. Clear aligners are a modern and near invisible method for correcting mild to moderate orthodontic problems. They are comfortable to wear, easy to remove and very discreet.

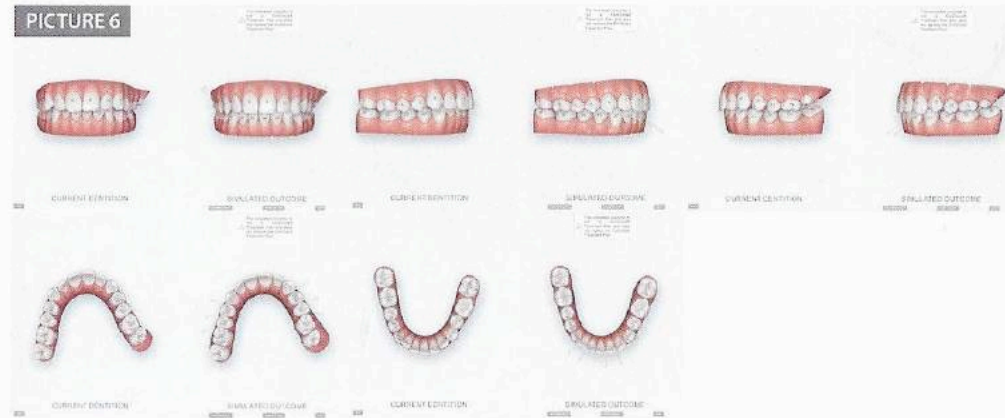
PICTURE 4



PICTURE 5



PICTURE 6



3) FITTING ALIGNERS, ATTACHMENTS, IPR (INTER PROXIMAL REDUCTION)

Once the plan is agreed the sequence would be:

- Fit aligner 1, also give patient aligner 2 – wear for 2 weeks each.
- Appropriate instructions on wear and care, use of Dental Monitoring
- Prior to aligner 3, any extractions or IPR involved
- At the fit of Aligner 3, placement of attachments
- Give the patient a reasonable number of aligners.

Within Smile Mate there is information, tutorials and videos, however, you may also wish to come in to see my and my team to get information & training on how we perform these tasks.

4) DENTAL MONITORING (DM)

I will monitor your patients on a weekly basis using DM scans. This has improved recently with the addition of the SCAN BOX, it makes accurate scans so much easier. DM is APP based and the patient gets prompts to scan their teeth every 7 days, if the fit is not quite correct a minimum extra 4 days is given before a repeat scan.

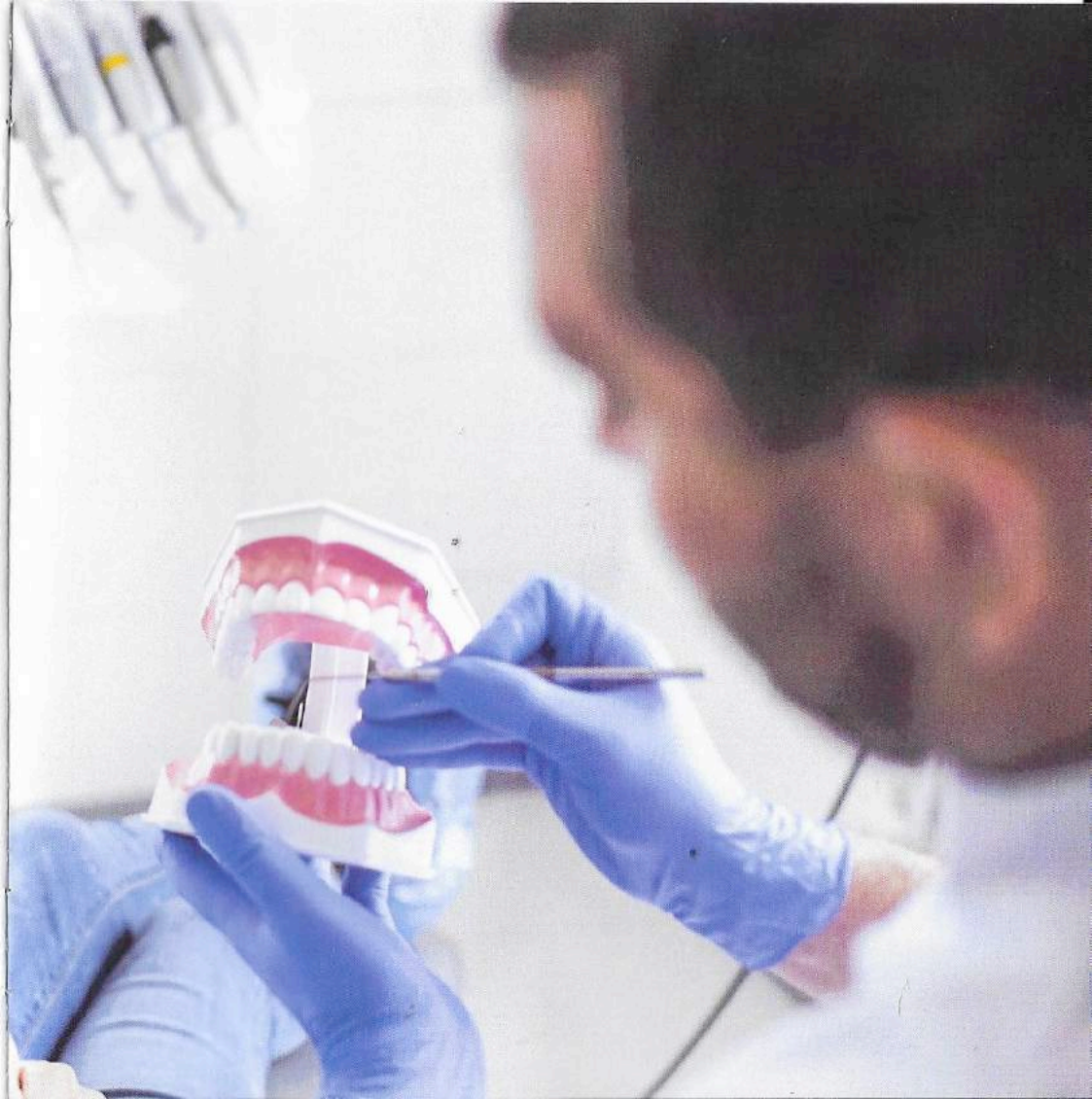
This is an incredibly powerful tool to ensure progress is good; also if there is lack of compliance (they're not wearing the aligners enough, it will show up very quickly!). See PICTURE 7 - green is 'GO' change aligners, red is 'NO GO' stay in current aligners. The patient receives automated messages on wear, chewie use etc.



WHAT'S NEXT?

If you feel that OM can be of use to you; it would be good to come and see what we do and how it works for a patient. We can then set up the Smile Mate and Dental Monitoring accounts and make a start.

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23rd September 2019



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