

A management manifesto: Standard Operating Protocols and the application of checklists for orthodontic practices



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The management of an orthodontic practice needs to be highly structured and organized. The actual treatment process obviously benefits from a disciplined clinical approach, which can be facilitated by Standard Operating Protocols and Checklists. In addition to the clinical management of patients, the organizational management of the office itself can be further enhanced by adopting these protocols and checklists. This article provides an introduction to both concepts, with sample protocols and checklists that doctors may use in their offices. (Semin Orthod 2016; 22:262–269.) © 2016 Elsevier Inc. All rights reserved.

This article is written to introduce the practicing orthodontist to the concept of standardizing treatment protocols, chairside procedures, and management systems. The reader will notice that the subtitle includes both “Standard Operating Protocols” and “Checklists.” The two are not mutually exclusive or contradictory—indeed; the two processes complement each other and assist in making the treatment process both efficient and effective. The author of this article has frequently lectured and written on the concept of Efficiency and Effectiveness. We should begin our understanding of the process by recognizing the importance of amalgamating efficiency and effectiveness.

Effectiveness, you see, refers to “doing the right things.” To effectively rotate a tooth, then, we must apply the appropriate orthodontic couple to that tooth. To effectively change the axial inclination of the root of a tooth, we must apply the appropriate third order activation to that root. Efficiency, on the other hand, refers to “doing things right.” The conundrum is, of

course, that it is entirely possible to be very effective while being terribly inefficient. If we eventually get to the end result with a prolonged series of activations, it could be argued that we have been eventually effective, without really being efficient. The mantra behind the concept of developing a disciplined Management Manifesto, then, is to recognize the author’s mantra: being Effective and Efficient means “Doing the Right Things Right.” That, in essence, is the objective in introducing Standard Operating Protocols (henceforth referred to as SOPs) and Checklists in the management of orthodontic offices, orthodontic treatment, and routine day to day procedures. This article will introduce the practicing orthodontist to both these concepts and their applications, and will include some sample SOPs and Checklists.

Standard Operating Protocols

Standard Operating Protocols are written step-by-step procedures that assure quality control (QC) and quality assurance (QA) in the management of orthodontic treatment, and in the overall management of an orthodontic practice. An SOP should be viewed as a compulsory instruction. For example, applying an etching agent to prepare enamel for a bonding procedure without first removing all plaque from the tooth through an appropriate pumicing procedure is a fundamental violation of appropriate treatment protocol. Anyone in clinical practice recognizes that there are deviations from protocols driven by

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1073-8746/16/1801-\$30.00/0
<http://dx.doi.org/10.1053/j.sodo.2016.08.005>

specific clinical variations. If a deviation from the protocol is allowed, the conditions for such deviations should be well defined. Therefore, the purpose of an SOP is to carry out the operation correctly and consistently. As will be demonstrated in this article, the SOP begins with the initial consultation, becomes a significant part of the treatment planning process, and is integral to the consistent delivery of treatment at the chairside.

Checklists

A checklist is an informational aid used to reduce failures by compensating for the potential limits of human memory and attention. Checklists help to ensure consistency and completeness in carrying out a task. Checklists are sometimes referred to as "to do" lists. This author has lectured and written extensively on why checklists are beneficial in the day to day operations of an orthodontic office and, indeed, in any health care facility. Those readers who are familiar with the lectures and writings of this clinician are familiar with the origin of the application. For over 30 years now, I have been an active pilot, and have remained extremely active in the aviation world. I am not just your average weekend pilot. I have pursued this hobby and avocation at an extremely serious level, is currently rated as an Airline Transport Pilot, and has been flying jets and other types of aircraft for over 30 years. During that experience, it came to my attention that the aviation world adheres strictly to checklists. Even pilots who have been flying for many, many, years do not simply rely on personal memory, but adhere strictly to checklists because of the complexity of the tasks that we encounter in the course of what may appear to be a routine flight. The application of that discipline into orthodontic practice has proved to be extremely effective in assuring consistency in the everyday delivery of orthodontic treatment. We have been able to reduce the incidence and frequency of errors, thereby enhancing both the effectiveness and efficiency of orthodontic treatment.

The amalgamation of SOPs and Checklists

As will become readily apparent to the reader, SOPs and Checklists frequently overlap and complement each other. Although they each

have their own place in the efficient execution of orthodontic treatment, as well as in the daily operations of an orthodontic practice, they need to be understood both individually, and in combination. There is sometimes a concern that excessive dependence on SOPs and Checklists may hinder the execution of tasks that may appear to be straight-forward and routine, because they depend on rote-learning of processes that are concerned routine in the management of an office, and in the execution of treatment. However, as we will demonstrate, an adoption of these protocols can help in integrating the use of adaptive and flexible problem solving techniques.

Standard operating protocols applied to orthodontic practice

Orthodontics, to a significant degree, is a procedural specialty. That is entirely consistent with the fact that the dental profession is primarily a procedural profession. That does not, of course, in any way diminish the cerebral elements of what we must do on behalf of our patients, from interpretation of radiographs to differential diagnosis. However, once the diagnostic aspects have been accomplished, the remainder of what we do to deliver the treatment is largely procedural. Such procedures will simply be better executed if SOPs are adopted. Due to the significant variation in the way treatment is delivered in different orthodontic practices, there is obviously room for a lot of variation in the development of such protocols. For example, this author primarily utilizes indirect bonding in his practice. Frequently, when a new member has been added to our clinical staff, they have come from offices that do not have much experience with indirect bonding, and therefore, do not have an appreciation for the level of attention to detail required to properly completing an indirect bonding procedure. For the purposes of training new members of the clinical staff, and to ensure consistency in our clinical technique, we developed a specific SOP for indirect bonding. A sample is provided below.

Indirect bonding procedure

Initial preparation

1. Seat patient and place a napkin around their neck. The patient should have been given two

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