

Perspectives

THE "PATIENT-CENTERED" PRACTICE

Recently, I had the opportunity to meet Dr. Greg Kerbel, a dentist who hosted me while I was speaking at the Southwest Dental Meeting in Dallas, TX, USA. I meet many dentists in my travels while lecturing at various dental meetings; however, few have made such a profound impression on me and my practice priorities than did Dr. Kerbel.

In the context of our discussions, we shared the common concern that young, newly graduated dentists are coming out of dental school with such a debt burden, that "doing the right thing" for their patients was becoming an increasingly difficult task. Indeed, as an educator for over 30 years at the University of North Carolina School of Dentistry, I have a genuine heartfelt concern over the magnitude of the debts being incurred by our graduating, new dentists. The practice pressures this debt creates are troubling.

Dentists' concern to generate adequate income often appears to cloud the decisions being made regarding what indeed is in the best interests of their patients. Dr. Kerbel's viewpoint was so refreshing that I asked Greg if he would

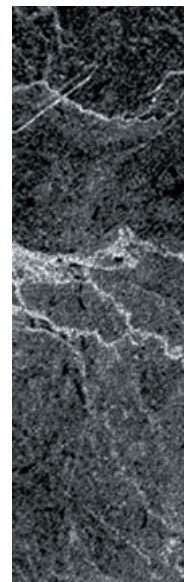
mind if I shared his viewpoint during a recent forum held at the Thomas P. Hinman Dental Meeting devoted to the topic of ethics and esthetic dentistry. During this forum at which I was fortunate to serve as moderator, my colleagues, Drs. Frank Spear, Mark Friedman, Gordon Christensen and Henry Gremillion, and I addressed these growing ethical concerns. Everyone agreed that Dr. Kerbel's viewpoint, printed below, was both timely and "on the mark."

Dr. Kerbel's approach to focusing on a genuinely "patient-centered practice" is not unique, but enacting it and following through on this philosophy to the extent that he does is. It is one thing to say you have a "patient-centered" practice and quite another to commit to it and follow through on this approach. At the beginning of each day, Dr. Kerbel and his staff discuss not only the treatments at hand, but more importantly, the patients they will be treating. He and his staff genuinely know their patients, their jobs, their families, and their hobbies and interests. They make every patient feel special and cared for. They view patients as people, not procedures. The irony in this

approach is that if we do what is truly best for our patients, and not what is necessarily best for "our wallets," the rewards can be immeasurable as Dr. Kerbel notes.

The following excerpt is from the written comments shared with me by Dr. Kerbel. I am grateful to him for his efforts to help foster this "patient-centered" approach to dental practice.

I was talking to a group of dentists informally. They were asking me different questions about practice management and tools to better equip their practices. Among them were also new dentists and dentists just graduating, and the conversation became more interesting because the newer guys in practice were wanting to "do" things more efficiently and better, but their only focus was "paying the bills." One commented how thankful he was that an "upper denture wandered in off the street on Friday morning" and how that would help him significantly for the week.



I asked him with a smile if the “upper denture” had arms and legs and a personality, or even if he could recall even one relational piece of information about that patient and he simply looked bewildered. I let the young dentist know that the “upper denture” probably will quickly forget the office he “wandered” into, so don’t count on any “other upper dentures” that patient knew finding their way back to his care.

It got kind of awkward and quiet and then I posed this question to each of them, both seasoned dentists and new graduates, “If you no longer owed money to anyone, would it change the way you formulated your treatment plans?” I realized that a nerve had been hit, because there wasn’t as much talking happening anymore. I let

them know how comforting it would be to know that each doctor treating me had no pressing financial obligations and that from his/her perspective, the only influencing factor for treatment was the betterment of my health.

I told them I was not talking about removing subjectivity, but rather changing the way they viewed each one of these “people” placing their trust in us. For those that have realized the power of building relationships, they have also found the blessing in building a strong referral-based practice. It is hard to “over treat” those people that you know, have invested in, and see as more than just “an upper denture.”

Don’t misunderstand my view. I am all for making a solid profit, but not at the expense of anyone

else. I have found the more you care for the “needs” of each patient, the more your own “needs” will be cared for . . .

This simple anecdote from Dr. Kerbel illustrates an unbelievably effective formula for success. It has powerful implications for all of us who treat patients, and is a time-proven recipe for professional success and personal rewards. Thanks Greg!

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