



Family Practice

by Marie Leland, Assistant Editor, *Dentaltown Magazine*

Welcome to the newest installment of Office Visit, where we visit a Townie's office and profile his or her equipment, design or unique practice philosophy. If you would like to participate or nominate a colleague, please e-mail ben@dentaltown.com.

This month, Dentaltown Magazine visited Topsham Dental Arts in Topsham, Maine. This family-run practice consists of father, Dr. Howard Sprague; son, Dr. Gregory Sprague; and daughter, Dr. Polly Nichols (Mom, Rosemary also works at the practice as a dental assistant). Together they share the reasons they chose dentistry as a career, the benefit of being able to consult with each other on complex treatment plans and they provide advice for other dentists considering practicing with family.

Office Highlights

Bonding Agents

- Ultradent Peak LC Bond

Cements

- 3M ESPE RelyX luting cement

Implants

- Straumann

Impression Materials

- Replica

Miscellaneous Items

- 3M ESPE Sof-Lex Contouring & Polishing Discs
- A-dec 500 Dental Chairs and Delivery Units
- A-dec Assistina
- A-dec Sterilization Center
- A-dec W&H Electric motors with high and low speed attachments
- AMD Lasers, Picasso Soft Tissue Dental Laser
- Buffalo Dental No. 1A Vibrator
- Clinician's Choice Quad-Tray Xtreme
- Coltène/Whaledent BioSonic
- Custom Cabinetry by Banner Woodworking
- Dentsply Midwest Rhino Motors and Attachments
- Dentsply Midwest Tradition Highspeed Handpieces with Fiber Optics
- Dentsply Tulsa X-Tip
- DUX Dental Alginator
- Foster Dental Model Trimmer
- Garrison Dental Solutions Composi-Tight 3D Sectional Matrix System

- Garrison Dental Solutions Wedge Wands
- HSW Ligmaject
- Invisalign
- Kerr Corporation, Demi
- Midmark UltraClave
- Milestone Scientific, The Wand
- Nordent Instruments
- Physics Forceps
- Red Wing Lathe
- Satelec Scalers
- SciCan Statim 2000 Cassette Sterilizer
- Sybron Elements Obturation Unit
- Ultradent Endo-Eze System
- Ultradent Opalescence 10%
- Woodpecker Dental Curing Lights

Patient Financing

- CareCredit
- Henry Schein Citibank program

Restoratives

- **Prep Cleaner:** Ultradent Consepis
- **Etch:** Benco Dental
- **Flowable Composite:** Septodont Image
- **Filled Composite:** GC America GRADIA DIRECT and Kuraray CLEARFIL MAJESTY
- **Sealants:** Pulpdent Embrace WetBond
- **Base/Liner:** Pulpdent Lime-Lite

Technology

- Dell Vostro 410 Computers
- Kodak 8000 Digital Panoramic System
- Kodak Practiceworks Software
- Kodak RVG 6000 Sensors

Why did each of you choose dentistry as your career path?

Howard: My childhood dentist encouraged me toward dentistry by showing me his lab, dental models and examples of prosthesis he was completing. He also let me press the pedal and watch sterile instruments

Topsham Dental Arts' Top Five Pieces of Equipment on page 94, story continued on page 96

Name: **J. Howard Sprague, DDS**

Graduate from: Loma Linda University School of Dentistry, 1962

Name: **Gregory H. Sprague, DDS**

Graduate from: Loma Linda University School of Dentistry, 2005

Name: **Polly S. Nichols, DDS**

Graduate from: Loma Linda University School of Dentistry, 1996

Practice Name: **Topsham Dental Arts**

Practice Location: **Topsham, Maine**

Year when this office opened: **September 2008**

Practice size: **2,460 square feet** Staff: **8**

Web site: **www.topshamdentalarts.com**



Photography by Michele Stapleton

Topsham Dental Arts' Top Five

	Milestone Scientific's The Wand	Digital X-rays and PAN	RGP Dental doctor & assistant stools	A-dec 500 patient chair & delivery unit	Picasso Soft Tissue Laser
When did you start using it?	Howard: About 1994 I saw one at the Yankee Dental Congress and though I would give it a try. We have one in every operatory now.	When we opened this practice in 2008.	Howard: When I began to have lower back pain about 14 years ago I tried one and the pain disappeared. So when we furnished this office I advised Polly and Greg to use them.	When we opened September of 2008.	We had a soft tissue laser for a number of years at our previous office. So a laser was at the top of our wish list after opening this office. Picasso made our wish come true sooner than we expected.
Why can you not live/work without it?	The Wand reduces stress for both patient and dentist. Knowing that the patient is comfortable even while being given anesthesia is central to our enjoyment of dentistry.	We appreciate the instant images and the ease with which patients can interpret what they see on the screen.	Back pain has no place in dental practice!	The patient chair is so comfortable. The thin back is kind to our knees. The built-in electric motor and ultrasonic scaler minimizes the shelf clutter and cord tangles. Another great feature is the composite mode light button.	There is no better way to remove tissue obstructions, frenums and excess gingiva with accuracy while incurring minimal damage to adjacent tissue. All this translates into a comfortable outcome for the patient.
When do you use the item?	Every time anesthesia is needed.	For all radiographs.	All day, every day.	All day, every day.	Gingival recontouring, troughing for impressions, lesion removal, and frenectomies.
How do you market this item to your patients?	In our advertising (Yellow Pages, Web site), whenever giving tours of the office and by explanation when it is used.	It markets itself. We like to point out that radiation exposure is cut by half with the digital process.	Not applicable.	We tell them that we spent a lot of time choosing the most comfortable chair that we could find for them.	Our ads mention it (Yellow Pages, Web site and other ads) and we explain it as we use it.
If you could change anything about the item, what would it be?	The aspirate mode should not be the default setting as it is not needed in most cases.	Thinner, softer, wireless sensors would be nice. Positioning the sensors to open the contacts between anterior teeth can be challenging.	Nothing.	We would make it an over the patient system instead of a Radius set-up. It is bulky and awkward to maneuver. The answer to this problem might be the 300 series that has just come out.	The angle of the tip. There are places where a right angle would be more convenient.

continued on page 96

come up from the boiling water. His wife kept the books and assisted him. I thought I would like to have a close family like that. I also thought dentistry would be a good living since my dentist told me I could charge \$70 for placing a crown!

Greg: Growing up playing and working in my dad's office definitely influenced my decision positively. As a small boy I would slide off the patient chairs, light firecrackers in the lab with my dad, and play in the plaster – these are all fun memories. As I grew older I learned to assist and do just about everything else that goes on in a dental office including building remodeling and maintenance.

Polly: Dentistry was not a forgone decision for me. I think I considered nearly everything else first; from vet school to music education, but could not feel settled about any of those options. I knew that my dad found great satisfaction in his profession, and I had done every job in the office except being the dentist, so I decided halfway through my junior year of college to fill that gap in my resume. My dad never encouraged me to pursue dentistry. He said it was very demanding, confining work (and it is), but as soon as I decided to become a dentist I could tell he was very pleased and I have never regretted the decision.

How do your family dynamics work in and out of your practice each day?

Greg: Our family works very well together. We are not as good at playing.

Polly: Perhaps another way to put that is that we find pleasure in accomplishing things together, it *is* our play. Building our present office was a great adventure to enjoy together. We each have different strengths and we are learning to divide responsibilities accordingly. We share a great deal of professional and personal respect for each other. Having our dad and his 48 years of thoughtful experience at our fingertips is powerful.

Howard: The pleasure of being able to shift so much responsibility to Polly and Greg and see them “run with it” has been great. Being able to consult together and assist each other in various procedures is mutually beneficial. My wife, Rosemary, and I never dreamed of having two of our children practice with us so we are truly blessed.

What sort of challenges do you face in working with each other each day?

Polly: Clinically there really are no challenges. Administra-

tively, sharing responsibilities can be a double-edged sword. Tasks are shared, but there are three times as many bosses for staff to interact with. Frequent and clear communication between the three of us, and also with our staff is important. Finding each other's strengths is a critical process that is ongoing. This implies potential frustrations when we do not succeed in matching the right task (administrative, maintenance, you name it) with the right dentist.

What advice can you give other dentists who are considering practicing with family?

Howard: Having experience together in the office even before dental school graduation is helpful. Naturally, a shared commitment to excellence is critical. Beyond that and even more important is that the family members share a common worldview and life goals. Otherwise, friction would be difficult to avoid.

Polly: I agree. Philosophy, world view and goals in life all have to mesh. Agreement in the philosophical realm translates into agreement on practical

considerations such as salary calculation formulas and overhead sharing. We spent a good deal of time working these things out and putting them into official, legal formats that define our professional relationship.

Greg: It is important that each family member sees the others as colleagues who have unique information and insights to share.

What is your practice philosophy? How do you cultivate this philosophy in your practice?

Howard: Loma Linda University has a beautiful motto, “To Make Man Whole.” We share this in the sense that we desire to be available to serve our patients in more than just the dental dimension. Our patients come with many needs; social, physical and spiritual and our desire is to be competent; to encourage, share, grieve and rejoice with them as appropriate on all these levels.

Greg: We cultivate this philosophy by making sure that we have time with our patients; time to communicate, time to leave the topical on long enough, time to “get it right.” We send a good number of cards; get well, birthday, sympathy, etc.

Polly: Our team prays together each morning. We pray for each other and for our patients. Our mission is to participate in our finite way in the infinite healing ministry that Jesus began when He was here. As part of this we provide a good deal of donated dentistry within the practice, part of which is working



Dr. Polly Nichols with dental assistant Rosemary, her mother.

with MaineCare, our state's seriously underfunded dental program, and Give Kids a Smile. We also have each participated on many occasions in overseas dental missions and plan to continue to do so. One of the strengths of our joint practice is that we have more freedom to share our time and skills than any of us would have if we practiced individually.

What is the competition like in your area? What does your practice do that sets you apart from other dentists in your area?

Polly: Maine has a shortage of dentists, so we have yet to sense competition even though we practice in one of the better dentally served areas of the state. The local dentists have been very warm and helpful toward us. We appreciate being in an area that has so many fine dentists.

We can think of two things that set us apart. First, the fact that we are a brand new office with state of the art technology is a draw. Second, the three of us practicing together means that we are able to provide a broad range of treatment including most endo, oral surgery and implant services. The ability to conveniently consult among the three of us regarding complex treatment plans is another benefit to the patients.



Staff (from left): Tammy, Dr. Greg's assistant; Joanne, Becky's mom and assistant; Becky, Office Manager; Kathryn, Dr. Polly's assistant; Brenda, RDH; Rosemary, Howard's wife and Polly & Greg's mom is Dr. Howard's assistant; Dr. J. Howard Sprague; Dr. Gregory Sprague; and Dr. Polly Nichols. Not pictured: Robyn, RDH; and Timothy, Dr. Polly's husband, does IT and supervises accounting processes.

What piece of technology has the biggest "wow" factor for your patients?

Polly: The Wand anesthesia system and digital X-rays would have to tie for this honor. Digital X-rays have truly turned X-rays into a patient education tool. The Wand provides for practically painless anesthesia and is definitely worth the extra time it takes to administer.

What is each of your favorite procedures to perform? Do any of you specialize in a specific area of dentistry or prefer certain procedures over others?

Howard: Placing implants is the most personally rewarding thing I do. Being able to give patients a second chance at complete dentition is wonderful. For patients who have lost their natural dentition, using implants to stabilize lower full dentures is probably the most humane service we can offer.

Polly: I agree with my dad. Other things I especially enjoy are cosmetic procedures. The simple restorations that make such an immediate difference in a person's smile or a full mouth reconstruction.

Greg: I've added Invisalign to my toolbox and am really having fun with this new piece of dentistry. I have good relationships with local orthodontists and consult with them regularly.

How has Dentaltown changed the way you practice?

Polly: We are used to "top down" communication in dental literature and it is refreshing to experience the horizontal sharing that is possible in the Dentaltown forum. Hearing from other "everyday dentists" is encouraging and educational. The willingness of Dentaltown columnists and participants to share their ideas and office forms is helpful. For example, we downloaded and are using a slightly modified version of Dr. Howard Farran's patient financial policy.

If you weren't a dentist, what do you think you'd be doing right now?

Howard: My dad was an osteopath. The deep satisfaction that he and his patients gained

through his care influenced me greatly during my early years. Though I was only 11 years old when I lost him, the influence of his kindness and love of his profession almost tilted me in that direction. I think the one-area-of-the-body focus of dentistry, plus the information sharing of my childhood dentist tilted me into a dental career. After 48 years I'm more excited about being a dentist than ever and can't seem to wish for retirement.

Polly: I considered medicine. If my dad was not a dentist I would likely have been caught in the medical trap and become a surgeon because I like to use my hands so much. On the other hand, perhaps a literature professor or a journalist. There are all sorts of addictions, mine is to the written word. But dentistry has been a perfect fit for my interest in the arts, health, people and using my hands as well as my head.

Greg: A professional snowmobile stunt rider... in my dreams! I thought about being a college biology professor. I spent three years of college as a lab assistant and really enjoyed that experience. ■