Hiring a Hygienist Who Will Fit Your Practice Philosophy

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Dentists often provide their own dental hygiene services when their practices are just getting off the ground. Don’t keep this up long or you’ll be using your valuable time and talents doing procedures that can be provided by a dental hygienist less expensively. Hiring a dental hygienist will create a stream of patients that need your specialized care. Your dental hygiene department will be the primary source of patients needing restorative work. Emergency patients come directly into the doctor’s schedule, but these patients will not keep a practice going. Far and away the majority of patients needing restorative work will come directly from the dental hygienist’s schedule. While the dentist is providing needed and more expensive restorative care, the dental hygienist will keep his or her restorations healthy, detect needed work in others and contribute significantly to office overhead.

When interviewing for a dental hygienist there are three main topics of discussion: employment aspects of the job, specifics of the clinical position and practice philosophy. Obvious employment issues deal with the work schedule, hours, salary and benefits. Questions about the clinical position relate to the specifics of patient care: available instruments, supplies and oral hygiene products, appointment length, etc. And lastly, an important and enjoyable part of the interview is discussing your practice philosophy and that of the prospective hygienist.

Your practice philosophy will be the foundation of the dental hygiene department within your practice. This is also the department that will be responsible for maintaining the health of tissues around your restorations and preventing any secondary decay. Well-organized, optimized dental hygiene departments will establish and maintain a high level of oral health for patients and also contribute significantly to the financial success of the practice.

It’s never too soon to give some serious thought to your practice philosophy. Answering the following questions will provide a foundation for your practice philosophy as it relates to dental hygiene.

1. **Do you believe dental disease is preventable?**

Your dental education focused on repairing the destruction of dental disease, with little time for prevention. The vast array of new restorative products and materials used today naturally took up your time in school. It’s now, with your own practice and perhaps your own family, that you can consider the potential for prevention.

2. **Do you believe early demineralized lesions can be remineralized?**

You’re an expert on restoring lost tooth structure, but backing up just a few steps to identify lesions before they cavitate provides an option to reverse the caries process before restorations are needed. This is still a treatment that is being provided, with a code and fee.

3. **Do you want to know the pH, flow rate and buffering capacity of your patient’s saliva?**

Caries is now considered a pH disease, not just a sugar and poor oral hygiene disease. Frank carious lesions begin as demineralized areas. Normally the buffering and adequate flow of saliva will reverse early microscopic demineralization. Reduced salivary flow and compromised buffering will significantly increase the risk of dental caries. Placing a restoration will not cure caries when low pH of the mouth continues to demineralize the enamel. Identify and monitor risk factors like pH.
4. Do you consider interproximal surfaces at greater risk for dental disease than facial and lingual surfaces? 
   Toothbrushing is taught first, yet the greatest risk for caries and periodontal disease is found on the interproximal surfaces. Toothbrushing should come second to interproximal plaque biofilm removal.

5. Is your primary tool for daily interdental oral hygiene dental floss or are you open to sticks, picks and water irrigation? 
   Brushing and flossing are the traditional mantra of dentistry, but research shows us that more than 80 percent of people don’t floss and those who do are not effective. It’s time for alternatives that have been show by scientific research to be effective alternatives to flossing – or rather, to not flossing at all!

6. What are your definitions for periodontal health and periodontal disease? 
   As simple as this question appears to be, it will define your periodontal treatment. According to definitions, health is the absence of probing depths over 3mm and no bleeding upon probing. Allowing your practice and your dental hygienist to perform “bloody prophies” does not respect this definition of health. What is the definition of health you want for your patients?

7. What are your criteria for referral to a periodontist? 
   It’s not just probing depths, but also crown lengthening, grafting and implants. What do you plan to do and what do you want a specialist to handle for you?

8. Do you have patients start brushing on the mandibular lingual surfaces? 
   Since the greatest amount of plaque biofilm and calculus accumulate on the mandibular lingual surfaces, teach patients to begin here and not on the facial of the maxillary anterior teeth as shown in toothbrushing brochures.

9. Do you counsel mouth-breathing patients to breathe through their nose and not their mouth? 
   Dental school highlights the drying and irritation of anterior gingival tissues caused by mouth breathing, but the list of problems associated with mouth breathing is long and serious. Give this issue some thought as your advice will impact many lives.

10. Do you check for and treat ankyloglossia or refer to a specialist? 
    Untreated, tongue-tie can lead to significant problems with palatal – skeletal development and tooth alignment. Tongue-tie also leads to mouth breathing, among many other problems.

11. Do you want a dental hygiene department in your practice or a dental hygienist employee? 
    Working collaboratively with a dental hygiene colleague who manages your dental hygiene department can lead to healthy patients who appreciate and utilize the services you provide while contributing significantly to the financial success of your practice.

These questions are a start to creating a clear picture of your practice philosophy. Discussing your goals, beliefs and desires for your practice with potential employees during the interview process will lead to hiring a dental hygiene colleague to lead your dental hygiene department to patient health and financial success.