



What's it Like Doing Corporate Orthodontics? Western Dental, Bright Now, etc.

Honest answers from dentists experienced with corporate orthodontic chains.

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amalgamator22

Member Since: 09/15/07

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I am looking for jobs and talked with Western and they asked me, "Would you have a problem seeing 80-100 patients per day? I said, "no problem." But the back of my mind I said, "how the hell are you going to do that, newbie?"

So, tell me the truth, what's it like working for these corporate chains? Is the quality compromised? Do you get on the 7s? If kids are non-compliant with elastics, do you give up? What mechanics are used to be so efficient? Do they influence your treatment planning (more or less extractions)? Do you see more relapse problems later on these patients? Do they just cherry pick easy cases and send the hard ones away? ■

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mkdad

Member Since: 11/10/05

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I have been working at a chain and opened my own practice, started eight months ago. I have worked at almost every office (other orthos get sick, pregnant, etc.).

Nobody else bonds 7s, the hygiene is terrible and nobody seems to care, and they slop adhesive all over the teeth without cleaning it up.

I only see 50-60 patients per day though, so I have put a stop to that in my office. The assistants do place the brackets, clean the glue up, and then I come and set the braces and tack them (if they don't clean the glue up, I let them know to clean the remaining).

You will have to train your assistants. I implemented my own protocol for what is said, word for word, about hygiene on the day of bonding.

If you don't, they will use too much adhesive and not clean it up, and their hygiene instructions will be something like "brush your teeth."

I would negotiate based on production, I am at 30 percent, most of the other orthos are higher at 33-35 percent, so I would go more for that.

Some days I am really frustrated, but my office is going well so I won't be here forever. ■

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charlestonbraces

Member Since: 06/05/09

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I did this when I first started up. I went from school to 120 patients overnight at an OCA practice seven years ago. It was horrible, but the pay was steady when I was first starting up. You can do it. You won't like it, but you can do it. ■

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ucla98

Member Since: 09/28/07

Post: 6 of 17

I've worked for Bright Now Dental for 10 years (well, I left Bright Now to work for Western Dental and then came back to Bright Now 18 months later). I love it because the pay is good and I have full autonomy. I am the only orthodontist. I get to diagnose, treatment plan and treat the patients from start to finish. I refuse to do Phase I treatment on the majority of kids with mixed dentition and the company doesn't say anything about it. Since I've been with this company for so long, many parents feel comfortable with me and keep on sending their other kids for me to treat.

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One complaint I have is they make me work an eight-hour shift (either 9-6 or 10-7) when I can easily see all 60-80 patients in five or six hours; thus there are a lot of free time in between. In fact, I am working at Bright Now right now and I still have time to type this post.

Time management is crucial. Some new, inexperienced doctors tend to spend too much time on the consults and ignore the active treatment patients... and the waiting room gets more crowded.

To save time and avoid emergencies, I don't do Herbst nor TAD. I use Class II elastics, extract upper 4s, or 5s, or upper 4s lower 5s depending on the severity of the Class II. I do band all the 7s usually when I extract the 5s or when I need to open up the deep bites. I think the treatment results at the dental chains are just as good as the ones in private practices. The ortho relapses are caused by not wearing the retainers as instructed and these can occur at both chains and private practices.

I don't think OH problem only occurs at dental chains only. In general, kids who have braces tend to have more OH problems than kids without braces. Since it is very hard to get approved for Medicaid, less than 5 percent of my patients are Medicaid patients.

Here are some of the negative things about chains:

- Poor patient communication. Parents have a hard time calling the office after office hours. Longer waiting time.
- Lack of instruments and supplies. They always run out of brackets, bands and wires. All the cutters are very dull. I actually learn a lot from working under this non-ideal condition...I learn to improvise and become more efficient.
- Expensive. Patients pay a lot for the mediocre customer service. They charge extra for broken brackets, for treatment extension, for no shows, etc. ■

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r-1

Member Since: 02/09/04

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Wow, you had a much better experience than I did. I would see roughly 20 patients a day, and they wanted me to work eight hours. Plus they would give me one assistant that was poorly trained in ortho. I think in the three years I was there, we went through maybe 12 or 13 assistants (I am not kidding – they wouldn't pay them anything and the poor assistants would have to drive to four locations, never get reimbursed for gas, etc.). I was the one doing adjustments, pouring models and making retainers.

Also, they pay you on collections, not production, at least here in the southeast. At first, I had a \$1,000 guarantee. This past year, it went to I think 28 percent of collections. So, I was figuring my paycheck went to about half. I got offered another part time job one day a week, and that paid more than Bright Now did working the eight to 10 days a month they wanted me to work.

Also, my centers didn't charge for broken brackets, wouldn't call to confirm appointments, and parents were routinely absent when I needed to communicate with them.

We, also, ran out of stuff all the time. Basic mechanics only... you have wires, brackets (sometimes) and elastics to work with. Oh, yeah, we did have power chain (in the colors of yellow and purple...what? You don't want that color? Guess no power chain for you today). You know, stuff like that.

Again, I did the best I could with the situation, but in the end, I just couldn't do it anymore. ■

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