Allow me to share data that can enhance readers’ essential hygiene awareness, as well as enabling every dentist to easily and accurately calculate his or her current hygiene profitability. Once a factual information base has been established, we’ll consider a powerful strategy that will delight patients, hygienists and dentists, while enabling motivated offices to increase hygiene profitability several hundred percent above the paltry national average. Wise travelers begin every journey by establishing their exact current location. To discover your existing hygiene profitability, first precisely determine last year’s hygiene production (I’d suggest including everything billed in hygiene, such as sealants, x-rays, fluoride, teeth-lightening cases, study models, etc. but excluding doctor’s exam). Then calculate total hygienist’s salary investment including all benefits paid, FICA, Medicare, Workman’s Compensation, etc. Get help from your accountant, if needed.

Next, calculate what percentage of total office production is derived from hygiene. (I’d suggest including everything billed in hygiene, such as sealants, x-rays, fluoride, teeth-lightening cases, study models, etc. but excluding doctor’s exam). Then calculate total hygienist’s salary investment including all benefits paid, FICA, Medicare, Workman’s Compensation, etc. Get help from your accountant, if needed.

Subtracting the sum of salary, applicable percentage of office overhead expense and supplies devoted to hygiene from productivity determines annual hygiene profit or loss. I contend that in a well-managed office, hygiene net alone should easily fund the entire team’s retirement plan. Sadly, in too many offices, hygiene net won’t pay for a staff trip to the Dairy Queen!

Let’s consider how dentistry in general shapes up regarding hygiene profitability. RDH Magazine stated that in 1999, the national average for hygienist’s salary was $26 per hour. I agree with most hygienists that this figure is below the level their education, effort and value of service dictates. Having managed a dental office for 28 years, I also understand many dentists lose money paying even this relatively modest remuneration. The net result of the current antiquated system is hygienists delivering care for less than they feel is adequate compensation, while the practice owner might well be losing money in hygiene. This mutually disadvantageous scenario creates a stress-filled environment. Little wonder so many dentists, hygienists, patients and fellow staff are unhappy.

In my office, careful calculation of total non-salary expenses detailed above (including hygiene supplies) came to $18 per hour. Our practice strives to enjoy the competitive advantage of being the area’s low-cost producer of dental treatment, averaging a total true overhead (after personal expenses such as car, life insurance, etc. are removed) of 48% over the last three years. Consider my overhead figures as possible guidelines, but to be optimally meaningful one MUST determine his or her own costs.

Adding the national average hygienist’s salary to my overhead we get a total of ($26 + $18 = $44 per hour x 8 hours =) $352 per day expense. Under our assumptions, $352 per day is the very least production a practice can achieve and break even on hygiene. While not precise for any given office, this does provide a quick and dirty figure one may employ to check the status of his or her existing hygiene, but let’s continue to consider national averages.

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A 1998 Dental Economics survey stated average hygiene production nationwide was $6,835 per month, or $82,000 per year. If we assume a twenty day month (although the survey did not state hours or days worked), hygiene production averaged ($6,835/20 = ) $342 per day. Even employing expense figures from our low-overhead office, average daily Net hygiene LOSS is $352 - $342 = $10.

The above calculations represent merely a hypothetical exercise. Only figures from your unique practice really matter. If you aren’t aware of your precise average hygiene production per eight-hour day, find out at once! I believe many dentists don’t know this critical management fact because they sense things are not well, and shy away from painful truth. Considering the effort and expense hygiene demands, the above stated general estimate is depressing to see. But IT DOESN'T HAVE TO BE THIS WAY. Understanding the truth can set you free. Consider this glimmering ray of hope.

In 1999, a typical year for my practice, our hygienist averaged production of $133 per hour, or $1,064 per day, roughly triple the above stated national average of $342. Our average NET from hygiene alone was ($133 -$26 hygienist's salary -$9 hygiene assistant salary -$18 general overhead =) $80 per hour, or ($80 x 8 =) $640 per day NET.

I’m certain many offices outperform our humble, rural practice, but our results were made possible by dentist and hygienist working together to create better systems that resulted in highly profitable dental hygiene. And in our time-intensive service industry, any profit that doesn’t involve direct participation of the dentist is of much greater value, as there are only so many minutes in the day during which a dentist can produce. (Howard has shown himself to be a master of this philosophy of self-leverage by employing associate dentists so early in his career. I’ve practiced as sole owner of a two or three dentist group over the last 15 years.)

We were able to achieve the above stated result by employing a system called expanded hygiene. Two treatment rooms and a full-time assistant dedicated to nothing but hygiene are required. (Why go to all that bother? At $640 net per day x 20 days = $12,800 per month from hygiene alone...more than many dentists currently take home in total!) I wrote an entire book describing the workings of expanded hygiene, but in this more truncated venue, let me touch briefly on a few critical points.

1. The addition of a dedicated assistant and two rooms allowed hygiene to start treating twelve patients a day instead of eight, an immediate 50% increase in production. Since 16 hours of staff time is now available to care for twelve patients, each patient has (16 hours/ 12 patients =) 80 minutes of total staff commitment, rather than the customary 60 minutes. These extra 20 minutes are employed to answer questions, build trusting relationships, facilitate usage of intra-oral cameras (we have one in each of our five operatories), really focus on oral hygiene instructions, take blood pressures, etc. All activities that enhance diagnosis and case acceptance.

2. The day we switched to paying our hygienist based on a percentage of her total billing (rather than salary), our production increased an additional 25% above the existing 50% increase. This may come as a shock, but people work harder when they know they can earn a greater reward! (Most hygienists toil under the communist, collective economic model, where pay is identical every day regardless of effort or talent. Comrade dentists, this economic system has been proven ineffective. The Berlin wall has fallen!)

3. Dentists must stop treating all periodontal disease with a prophy. Offering care in this manner is akin to treating all decay with an occlusal filling. We offer five levels of soft tissue treatment, each varying in time scheduled and fee charged, based on the patients level of disease and resultant need for care. Make an immediate commitment to no longer accept bleeding tissues. (No more clinical notes like, "Gums bleeding. Stress floss. Apt. 6 mo. prophy.) Begin to offer whatever level of treatment is required to stop every patient’s active bacterial infection.

Our expanded hygiene operation has been in place for fifteen years. Over that time four excellent hygienists have graced our office, along with five dentists (myself included), and many additional invaluable team members. We practice among a total of seven dentists offering care in the 13,000 population blue-collar community of Keokuk, Iowa. Our achievements are not due to hygienists, dentists, staff, or wealthy local...The secret is our SYSTEM, which anyone may copy.

Thoreau once advised that, “If one advances confidently in the direction of their dreams...they will meet with success unexpected in common hours.”

Refuse to continue accepting an archaic system that disadvantages the dentist, hygienist and patients. Dream of great things—such as caring for grateful patients with healthy gums, while enjoying highly profitable hygiene—and find the courage and wisdom to develop systems that result in uncommon success. Life is too precious to waste being “ordinary.”

Dr. John A. Wilde is the author of over 100 published articles and five dental books, including Profitable Dental Hygiene that details how $133 per hour production and $80 per hour net is possible from hygiene alone. To discuss issues with Dr. Wilde, to receive information about, or to place orders for books, call 217-847-2816 or fax 217-847-9922.

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