Managing the practice micromanager

By Sally McKenzie, CMC

It is said that the No. 1 fear for most people is public speaking. That may be true unless you happen to be a dentist/practice owner. In that case, I would argue that for many of these types, what they fear the most is loss of control.

They are accustomed to doing it all themselves, and handing over responsibility for even seemingly insignificant tasks can be a struggle. Consequently, these micromanaging dentists are stressed out, working and working, yet never able to actually get ahead.

Forget quality of life, forget balance, forget dreams ... these practi-tioners are living their jobs.

Meanwhile, the employees working in these practices are operating in misery mode. They are treated like children; therefore, they act like children. They’ve learned that the dentist won’t be happy unless he/she does it his/her way.

“Don’t do anything unless you’re told. Don’t make a decision on your own. Don’t take the initiative to address an issue yourself. And, if possible, please don’t think unless directed to do so.”

It’s not an environment that quality employees will tolerate for long; so this is why they seem to change.

Adding fluoride varnish to your armamentarium

Fluoride varnishes have been used in Europe, Canada and Scandinavian countries since the 1980s, but are relatively new to the United States.

FDA action on amalgam

The American Dental Association (ADA) agrees with the U.S. Food and Drug Administration’s (FDA) decision not to place any restriction on the use of dental amalgam, a commonly used cavity-filling material.

The FDA ruling issued categorized encapsulated dental amalgam as a Class II medical device, placing it in the same class as gold and tooth-colored composite fillings.

The ADA has supported a Class II designation for dental amalgam since 2002, when it was first proposed by the FDA.

“The FDA has left the decision about dental treatment right where it needs to be — between the dentist and the patient,” states ADA President Dr. John Findley. “This decision underscores what the ADA has long supported — a discussion between dentists and patients about the full range of treatment options.”