

An Interview with Richard Cooper, DDS

A personal experience with digital technology in the dental office



Richard Cooper, DDS, owns West Loop Dental Associates, a private practice in Chicago, Illinois. Dr. Cooper is an advocate and owner of the CEREC and ORTHOPHOS XG 3D, Schick 33 digital intraoral x-ray sensors, and Schick intraoral cameras.

INSIDE DENTISTRY (ID): How did your relationship begin with Sirona?

RICHARD COOPER, DDS (RC): My relationship with Sirona began with a coffee maker promotion. They were giving away Keurigs if someone would take a demo with CEREC. I was not interested, but my team wanted a new coffee maker and scheduled a demo without my knowledge! Best decision of my career.

With my interest peaked, we went for a few in-office visits and I had a couple of conversations with other docs who were using it, and we started with CEREC in December 2012. I was practicing for almost 12 years before getting into digital technology other than digital x-rays. It was good for me. The day-to-day had no excitement and work was not really fulfilling. It definitely revitalized my interest in dentistry.

ID: Were you doing implants in your office prior to 2012?

RC: We started placing implants in 2007. I can say from 2007 to 2012, we probably placed 30 implants. I wasn't completely comfortable with only working in 2D. We were using Schick digital x-rays, but I would have to send my patients out for a panorex, because in 2007, cone-beam x-rays were not the norm. If the patient actually went for the panorex, we were still having to plan the placement in 2 dimensions. I had to then decide if I was comfortable doing treatment. If I was, then we would schedule that patient for the procedure. If not, we referred the patient. Even though we had advanced implant training and education, it was not something we offered comfortably because there was no real level of control.

ID: How has your implant practice changed since incorporating 3D technology?

RC: We probably placed between 300 and 400 implants in the last 3 years. We started with CEREC in December or January 2012. Literally 4 months later, I was at a Sirona 3D Summit. After 2 minutes of hearing a lecture about 3D imaging, I was looking for my Sirona rep, because I wanted it right away. Because I placed implants, it had always been on the radar, but I was sold when I saw the integration between CEREC and Sirona imaging products. It was a no-brainer. It allowed for restoratively driven guided implant placement. Now, I had total control.

ID: How has it affected the finances of your practice?

RC: I would say since 2012, we've probably doubled our revenue as well as grown our staff. We are finding dentistry on our existing patients that we never would have even known was there. I can look at years of 2D x-rays and then all of a sudden I look at a 3D image and I can see things that have been there the whole time. We were just not able to detect them without 3D imaging.

ID: That must be huge in terms of patient experience.

RC: Absolutely. Everybody looks at it like a new toy. I can show my patients new things—even sinus pathology. They say, "I've had a really hard time breathing out of this side," and I can show them why. There are other benefits other than just looking at the teeth. I can show them the overall picture, and interestingly, 30% to 40% of my patients have some sort of odontogenic or non-odontogenic pathology.

When they can see a 3D model of their teeth and skull, it gives them a new perspective. Patients actually ask me, "What is this?" just from looking at the image. That aspect is worth a thousand words.

ID: So case acceptance was affected as well?

RC: Definitely, especially with implant placement. The software allows me to drop an implant right on the screen. Then I can import

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a CEREC-designed tooth and actually stitch it to the CBCT in 10 minutes. We have all the tools now and we have all the information, so I can show a patient exactly where this implant is going to go. Patients are excited they can have this treatment done predictably, without having to go to multiple offices.

ID: You use SIDEXIS 4 software in your office. What can you tell us about the Light Box feature?

RC: We use the Light Box feature for 90% of all our treatment planning presentations. This feature allows us to use images from multiple sources on one screen. I liken it to the days in the offices where I used to work that required a light box to view film x-rays. This is a similar concept, but it is all digital. I am putting my photos, bitewings, and 3D images up. Everything is up on the screen and I am not closing one to look at another. Instead of having all these different screens open and trying to bounce back and forth, everything on Light Box is right there. You can scroll, zoom back and forth, and move different areas. It's awesome.

ID: And SIDEXIS 4's Compare feature, how often is that something that you need to use?

RC: We use Compare, but because we've only had CBCT for less than 3 years, we don't have multiple images for 3D for all patients. If a patient has pathology or something that I need to monitor every 2 years or so, I can compare images at the same time and look for changes. Compare is a great feature for the clinician and the patient to be able to see progression.

ID: Does your team find SIDEXIS 4 easy to use?

RC: Absolutely. Our biggest concern with anything we bring into the office is, "Is it going to sit on the shelf or is it going to be something we are using every single day?" All the data is available at a glance. Switching to other programs is minimized so you have the optimal basis for diagnosis. With SIDEXIS 4, it is easy for my staff to export and load multiple programs and images. It's one click to export

and they are ready to go. On the clinical side, image quality is awesome and the windows are intuitive. Other software I've seen doctors use is so cumbersome, I'm thinking, "How can they work with this software?" Now, with SIDEXIS 4, my staff is able to quickly locate and export images they need for insurance purposes or for another doctor who may be requesting a specific image. They are able to export on their own. It's freeing up time on my end, because I am no longer doing these things, and it is freeing up time for them because it can be done in a couple of clicks. It's intuitive software that's easy to use.

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ID: Do these features make any difference in terms of time?

RC: Yes, it can streamline things and cut down on time, because you don't have to go between images—it makes everything fluid. It's all on the screen and I can flip from one screen to the next. Instead of having to spend 10 minutes searching around software for multiple images, I can say, "It's here, and here, and here. What do we want to do?" in a consult that is relatively straightforward. Instead of, "Hold on, let me search. Where did I put that?"

ID: How do you feel technology impacts patient retention?

RC: When a patient comes in and they see digital x-rays, most of them are saying, "My old dentist had film." Then I pop open the 3D scan on SIDEXIS 4 then they literally say, "Holy cow!" They can't stop looking at it. I offer to export a copy that they can take home. The next visit they want to know what new technology I have, like it's a new toy! In all seriousness, my patients appreciate that I am investing in my practice and ultimately their care.

ID: How does technology help you in a multidisciplinary case?

RC: Definitely with referrals. One of my biggest exports right now is to my endodontist. I will probably see five or six of her patients a week because she has questions like, "Is the tooth fractured?" or "Is there a fourth canal?" The beauty of Sirona CBCT is that it is one-to-one imaging. I can measure and I can call her and say with confidence and exact precision, "This is a 21.2-mm canal and you won't even need an apex locator" because the measurement is so accurate. If she asks for images, I can export them with a click and send her anything she needs. I'm helping her and my patients are benefiting from more predictable results.

ID: Your colleagues who don't have this technology—what do you tell them about it?

RC: I started with CEREC and when I saw what it could do, I imagined the value this technology would bring to my practice. Identifying when to make the change was the hardest thing for me. After implementing the technology, we saw the impact on our practice. For this reason, I talk to a lot of doctors about the positive impact implementing this technology has brought to my practice in terms of financial growth and improved patient care.

It has also opened the door to a worldwide dental community. Before digital dentistry, I could count the number of dental friends I had on one hand before owning this technology, and now I have friends all across the world that I can talk to or message and ask them questions about dentistry or really anything. Digital dentistry is the present and future of dentistry. I am proud and excited to be part of it. Having all the tools and integration that Sirona provides has made practicing dentistry fun again. It is really something that has made a huge impact on me, my practice, and what I want to learn and achieve.

ID: It really sounds like this technology has revolutionized your practice.

RC: It has been very impactful for my patients and my practice. SIDEXIS 4 has made a huge difference for case acceptance. Patients can get a full understanding of what lies ahead for them as far as treatment and care. That's the whole benefit of having this technology in the office—the confidence level and how it makes you a better dentist. You can't put a price on that.