MOTIVATIONAL IDEAS IN CONJUNCTION WITH THE USE OF THE OCCLUS-O-GUIDE® APPLIANCE

The Occlus-o-Guide® is a removable functional appliance that allows a child to develop a beautiful occlusion. Proper patient selection, timing, and measuring are important principles of the Occlus-o-Guide® technique, but the most important is probably patient compliance. Whether one is successful with the appliance or not ultimately depends on the ability to get the patient to exercise daily for 2 to 4 hours. In most practices, it is possible to get 70% of the children to use the appliance for 2 or more hours a day for several months. For some, however, this percentage can be as high as 90% compliance. Females are usually more cooperative (80%) than males (60%).

The oldest of several children or a single child is usually more responsive and successful than younger children in the same family. Good students or children that are good at sports or musical instruments that require individual initiative or effort such as swimming, tennis, gymnastics, piano, violin, or dance are, in most cases, very successful. Younger children (8 or 9 years) are usually better than older ones (12 to 14 years), and children from less wealthy backgrounds are often more motivated than economically-advantaged spoiled children. Obviously children that are more determined towards achievement are far better than those who are resistant to parental control or individual goals. Many of the following ideas have been contributed by those doctors who have achieved success with the technique by their many motivational skills and helpful suggestions. Some of these are as follows:

A. MOTIVATIONAL SUGGESTIONS

- 1) In order to accomplish successful compliance, it is necessary for the doctor and the staff to enthusiastically motivate the patient. In most cases the measure of enthusiasm the doctor and staff emanate will dictate the level of success from the patient. Despite careful office planning, effective motivation is sometimes overlooked.
- 2) Before introducing the technique to a family, the doctor should determine the staff member who has the best relationship with young patients by offering a bonus to the assistant for each patient who successfully complies for 6 to 8 months. Find the person who can best motivate the

children in your office. Younger patients on the whole, as stated previously, are more easily motivated than older ones.

- 3) At the time of the consultation when the Occlus-o-Guide® appliance is first introduced to the patient and family, the doctor often prefers at some point to speak alone with the patient. The child is able to decide for themsleves whether they would like straight teeth. Parents often tend to either try to decide for the child regarding the treatment or make up excuses for their child even before they start wearing the appliance. Talking to the child alone also initiates a doctor/patient relationship that will help future motivation. It is sometimes helpful to try and be a little resistant as to your feelings whether the patient will be motivated enough for success. If the patient or parent ends up begging you for the treatment, it is often a good sign. Explain to the child that he/she is beautiful but the teeth are not. Let them know that the office wants to help make the teeth as beautiful as possible. A commitment by the child is essential for success. It is also important for you and your staff to be truly interested in the child and about their activities and accomplishments. Remember these activity details so that a running conversation can be made about **them** at each appointment. The child often can hardly wait to come to your office each time so that they get to talk to you about themselves, and this interest in them will be reflected in their motivation.
- 4) Before the end of the consultation, a set schedule should be established as to the time and length of wear each day. The controlling parent should take charge for at least the first month. In most cases, this is the mother. If the mother is a fairly strict disciplinarian rather than a "wishy-washy", indecisive, lenient parent it is usually the difference between success and failure, particularly when the child is obedient and interested in pleasing the parent rather than being resistant and disrespectful. A recommended procedure is to arrange a schedule with the child and the parent after the child has stated their own desire to proceed with this technique. One half hour of exercise before breakfast, one hour after school, and two hours after dinner is an ideal example of a good schedule. The parent should monitor the child at the end of each day to see that the schedule of exercise time is being kept each day and the cooperation chart is accurately being kept. If not, the parent must insist that the time lost is made up the following day. Don't have a parent punish a child such as "grounding" them for non-compliance. Rewards are more positive and does not make the procedure seem unpleasant.
- 5) Before the patient leaves the office, many doctors insist that both the patient and parent view the 7 minute Occlus-o-Guide® instructional tape together (\$80.00). The tape is an overview of how and why patients are to wear the appliance. The advantage of this video is that you can be sure all of

the points are covered in your instructions. In this way, it is an advantage over verbal instructions.

- 6) Many doctors prefer to speak to the parents away from the child in order to determine their interest in the treatment, and also to determine if they would be willing to reward their child for a successfully completed case.
- 7) If a parent is willing to provide a reward incentive for the child, the doctor could ask the child what they would like if they wore their Occlus-o-Guide® as directed. Negotiations might be necessary until an appropriate award has been determined. We recommend that the patient actually sign an official contract with the doctor. It sometimes becomes more serious to the patient when they do this.
- 8) Another interesting motivational idea is to allow the child to watch TV or watch a video only while exercising with their appliance. On average, a child will watch 3 to 4 hours of television a day. If the television goes on, the appliance should be in the mouth. The child can leave the appliance in it's container on the TV set. This idea can also apply to the use of video games, computer time, and practicing the piano.
- 9) Some doctors have patients who are athletes . The Occlus-o-Guide® appliance can also make a wonderful athletic mouth guard during contact sports.
- 10) Motivating with a reward as mentioned above, is very successful. A reward could be a doll, a tape recorder, or even money. One doctor gives children a bicycle if they are successful, and simply adds the cost onto the treatment fee. Another doctor has the child get a present each time a percentage of correction is made for example, \$10 for each millimeter of improvement. Another gives a gift certificate at a record store, and one has each child that does anything successfully (come to an appointment on time, has clean teeth, or wears the Occlus-o-Guide® properly) place his or her name in a big bowl for a drawing each month for a large stuffed animal. Another issues tokens to play video games in his lower level entertainment center which is off-limits to uncooperative patients.
- 11) Tee shirts are a great reward in more ways than just motivation. They are an advertising aid that successful patients are given. On the tee-shirt, the name Occlus-o-Guide® and the fact that they have obtained straight teeth at a specific office is written. Every time a patient shows up with a tee-shirt at school, all of their friends want to know how they got it. They go home and ask their parents if they can go to the doctor who gives out those tee-shirts.

- 12) One doctor gives out washable "Paper" jackets that can be drawn on with a magic marker. The doctor and staff sign the front of the jacket, thanking the child for being such a good patient and allow the child to color on the jacket in the waiting room so other patients can see what they can receive if they also wear the Occlus-o-Guide® appliance. The child's friends at school can sign their names on the jacket and again publicize the Occlus-o-Guide® technique and your office.
- 13) Another way to increase motivation is to play one patient against another. If one patient has had good progress while a couple of others have not, schedule them at the same time in your office. After seeing the successful patient first, bring out either an initial plaster model or a photograph (such as the initial lower incisal crowding), and show the progress to the mother in the waiting room. Make sure the other mothers of the less motivated children are within listening distance.
- 14) Your first patient should be a highly motivated child, and you will never forget the result. Too often a doctor will first treat their own child or a child of an assistant who may not be cooperative, which can often result in poor success, thus depriving you of the confidence in the technique that is needed. Your own confidence in the potential success of the procedure influences the reaction of the patient and parent more than you might imagine.
- 15) Some doctors have reported success in establishing post-hypnotic suggestions to increase motivation. For example, in Canada there are hypnosis specialists who are used specifically for increased motivation.

B. OFFICE PROCEDURE FOR TREATMENT OBSERVATIONS:

- 1) After the patient takes the appliance home, a phone call should be made after 24 hours to the patient by the individual (assistant or doctor) who is in charge of motivating the patient. The doctor or other motivator should ask the child if he/she has worn the appliance properly. If the appliance has not been worn, the child should be scheduled for a quick look (5 minutes). This meeting allows you to reinforce your agreement, and lets the child know the office is checking on them. Insist that the mother also come in with the child. Have them watch the 7 minute video again as well. If the assistant is a likable good looking young girl, the personal phone call by this person directly to the patient makes a great impact on the child.
- 2) Many doctors insist on seeing the patient once every week for the first month to verify the level of cooperation, and to allow the child to see their own progress, which is often observable even after a couple of weeks. The progress is shown to both the mother and child, with a set of initial study models or photographs. An estimate of the amount of correction that has been made and the projected remaining time of correction is made and frequently the child can be asked to estimate the treatment time remaining themselves. When this is done, the level of motivation increases. If the patient has not worn the appliance, the child should be talked to alone and asked why they have not worn it as requested. Tell the child he/she has one more month in order to comply, or else they will have to sign a release form. The form will state that the child has to accept their ugly teeth, and cannot come back later to complain about these teeth. This allows for a final motivational effort, and has proven successful in many cases.
- 3) The patient is then scheduled monthly and at each office visit the overjet and overbite is measured and recorded. At the same time, the temporomandibular joints are checked to see that they are free of clicking, crepitus, and/or pain. If the child does not respond with measurable progress within two months and does not get at least 1/2 mm. of correction in the overbite or overjet each month; the treatment should be terminated as discussed above. Don't continue month after month without progress.
- 4) There are five motivational checks that are usually used at each visit. These are (a) measure the overbite and overjet progress (should be at least 1/2 mm. each month); (b) check the correction of the incisal crowding in the lower arch (should be almost completely corrected within one month); (c) check the color of the appliance (will be translucent, but slightly white, with only nighttime wear, but will turn opaque white with 3 to 4 hours of wear each day plus night wear); If it isn't worn for 48 hours it will return to it's original transparent see-through state; (d) check the cooperation card they are requested to fill out each day for compliance; and (e) talk privately with both the patient and parent.

5) These monthly observations are recommended for the first 5 months of treatment and then the patient is often successful on their own initiative, and can then usually be seen every other month until completion.

INCREASING YOUR PRACTICE WITH THE OCCLUS-O-GUIDE® AND NITE-GUIDE®.

- 1) A good promotional and motivational technique is to have the Occlus-o-Guide® and Nite-Guide® combination waiting room tape running in your reception room. This film describes the technique and interviews children and their parents who have used the appliance, (although individual motivation in the use of the Nite-Guide® appliance is not very necessary in most cases). The video lasts about 20 minutes (the tape continually repeats itself for 2 hours, and with the proper video machine, rewinds and shuts off automatically.) The video will stimulate a mother or child to ask you questions about the technique rather than the reverse, where you are trying to convince the mother about the use of the appliance. It has also been found that a training video to properly instruct the patient and parent when the child starts the Occlus-o-Guide® procedure will also increase their enthusiasm and motivation to produce success and refer others.
- 2) Our most successful doctors also hand out waiting room brochures. These waiting room booklets will often be given to friends and relatives, and have been successful in bringing many new patients for the Occlus-o-Guide®and Nite-Guide® treatment into your office. For your convenience, there is also a place for you to put your name, address, and phone number on the back of the booklets. Also with each successful case that leaves your office, one usually receives between 3 and 10 referrals from that family.
- 3) Some doctors have reported considerable success in video taping the progressive treatment of each patient. The video is shown to prospective patients and parents as a selling and motivational tool. If a video is not feasible, models and photographs of previous cases should be utilized in your office. Photos of finished cases are available for your use if you don't have those of your own cases at the beginning.
- 4) In many offices, the staff should be motivated as well. This can often be accomplished with bonuses or rewards for producing patients with successful results with the appliance. In hiring personnel, it is important to remember that those employees that can be most easily motivated to be enthusiastic about your office and your procedures will also be the ones who can benefit you the most, not only in drawing and keeping patients, but also

in creating new motivational ideas for you and increasing the motivation for individual patients.

5) And last of all, if you have motivational procedures that have been particularly helpful to you, share them with us so that they can be passed on to others for their benefit.

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