



Dr. Michael Stewart

Atlanta Orthodontic Specialists
5555 Peachtree Dunwoody Road
Suite 301
Atlanta, GA 30342

First Impressions

How to connect with Patients and Parents during New Patient Exams

Patients come to you only knowing they need braces. There are so many questions, concerns, and worries for both the patient and the parent. The first meeting is crucial as it sets a tone for every visit for the duration of that child's treatment. For the orthodontist, it's a chance to create a sincere connection with the family and earn a trust that goes well beyond that child's treatment. We wanted to get a sense of the importance of that first visit in the exam room. That's why we were happy to get some wisdom from Dr. Michael Stewart of Atlanta Orthodontic Specialists. He spent the first twenty-five years of his career developing clinical skills. He served as an Assistant Professor in the departments of pediatric dentistry and orthodontics at Emory after completing his dental education. In addition, he's a Diplomate of the American Board of Orthodontics.

team tops: A benefit of interviewing orthodontic experts is discovering who first influenced them. Can we start with that?

Dr. Stewart: Absolutely. I consider myself fortunate because I first learned from the masters of modern day orthodontics. Most notably, I studied under Dr. Bob Ricketts, who was one of the first orthodontic thought leaders. I later studied under Dr. Gene Williamson where I first learned about occlusal instrumentation. I also studied under Dr. Ron Roth at the Foundation for Advanced Continuing Education. Perhaps the greatest influence came from my mentor, Dr. Charles Smith, with whom I had the honor of both practicing and teaching.

You underwent quite a bit of mentoring.

I think it's equally important to have mentors as well as being a mentor to others. I see the value of having a strong, connected orthodontic profession where we work together for better outcomes for our patients as well as a stronger sense of community. That's why I am always excited to talk about connecting strongly at that very first new patient visit.

That's a great place to jump into our discussion. Let's talk about that experience.

Stated simply, it's my favorite thing to do! I love it. Let me start by saying the exam room should never look clinical. Nor should a new patient have to walk through the primary clinical area for the first time. It can be a little distracting to both the parent and the patient. I think the exam room should feel relaxing, not sterile or even clinical. Think comfort. I have my exam chair over to the side. The first thing I do is invite them into the exam room and start it all off with a conversation. But not one pertaining to their teeth. It's really important to me to know about my patient. I want to get to know them and their parents. Where do they live? What do they do? I'm looking for that relatable element. It's the connection. When you find it, it creates a bond between you and them. You're now more relatable. You want to find a common ground upon which to build. I have a fairly extensive connection with many of the local schools. Think about it. You create a relationship that's positive with one family, and when friends from that school go in search of an orthodontist, they'll remember how you made them feel, and they'll make the referral.

You're creating a shared experience.

Better yet, I'm giving them a story to tell. I can't stress that enough. Both relationships and your reputation take time to build and grow. It just takes one thoughtless act to ruin either one. This is why I often tell younger docs that the most important tool they'll ever need are their ears. Listening. Truly empathetic listening is a powerful skill.

Any examples you remember?

Actually, yes. I have one. A number of years ago, I had an adult new patient come in, and I immediately recognized her name. I asked "Didn't you have a son at UVA?" She looked at

me in a puzzled manner and said “Yes, how did you know that?” I explained that we met twelve years ago in Charlottesville as I was helping my son get his dorm ready, and borrowed some power tools from her husband. That’s what I mean by having a story to tell.

Is that because you’ve given your “first time visit” speech thousands of times?

Yes, but for that parent and patient who’s sitting in your exam room, never forget it’s their first time. You’ll know you’re doing something right when you say something, and they reply “I was told you’d say that.” That goes back to always giving them a good story.

So how about approaching the exam?

Once we’ve had a chance for our first discussion, we’ll step over to the exam chair. I’ll have my treatment coordinator there to take dictation. As I do my exam, I’m expressing my thoughts with two intentions. One is to get as much information as I can get for planning their treatment, but at the same time, I’m educating both the parent and the patient about the conditions in their mouth. In other words, I want them to understand what I’m looking at. I think it’s key to also add a little side bar note.

How so?

There are some practices where patients are encouraged to get in, sign up and begin treatment as soon as possible. I would never do such a thing. I firmly believe that really making the effort to do the right thing at the right time is key. It’s one of the reasons we charge for the exam. I’m going to give them both a thorough exam but also an honest one. I’d rather wait and deliver better treatment than to jump in quickly.

What kind of questions are most common?

It’s almost always the same three: Do they need treatment? How long? How much? That’s an area where you want to tread lightly. Every patient is different. Few treatments are exactly the same. What I like to give are options. The great thing about practicing today is that advances in technology

have enabled us to cut treatment time in half. We’re delivering a much better overall patient experience. But you need to also build in flexibility in order to ensure that the impact of treatment is maximized.

Let me add another side bar to this. I often mention that as we cut our treatment time in half, we increase our capacity. Extra capacity is only meaningful when you can fill it. This is where you’ll want to focus on building strong relationships with existing clients as well as smart marketing efforts to reach out to new patients through advertising, social media and involving yourself in the community.

We now live in an age of digital information. How do you use that to your advantage?

The management and possible uses of the data are rather remarkable. Data gives us factual information where we can see trends in treatment and procedures. Data gives us insight into where our patients are coming from, which schools and which communities. Data tells us in our practice where we’re making money and where we are losing it. One of the best examples of data is in before/after treatment photos. Show both a parent and the patient a good before and after, it makes their decision process easier and gives them a better sense of the value of their investment.

Any last words?

Just let me reiterate the passion I have for my job. I love entering that exam room and meeting my next parent and patient. I want to give them a great experience and that really comes back to making that connection. The longer you do this, the better you get. Tell a patient that you know their teacher or their coach and you’ll see their face light up. I never get tired of that.

During his 40+ year career, Dr. Michael Stewart has served on the faculty at Emory University and directed the orthodontic department at the Center for Craniofacial Disorders. He and his wife, Melisa Rathburn, practice together and were early adopters of both the Invisalign® and SureSmile® technologies. He currently serves as A.D.A.M. at Atlanta Orthodontic Specialists (Alpha Dog And Mentor) and is committed to promoting the success of the next generation.