

ORTHO2

EMPOWERING PRACTICES

PRESIDENT'S PERSPECTIVE

Edge Cloud was one of the first cloud-based practice management systems when it was launched more than a decade ago. Since then, Edge Cloud has grown in unimaginable ways. From patient reminders to animation videos to online forms, Edge Cloud has countless features to not only meet, but also exceed your expectations. This past year, Ortho2 released several new features for Edge Cloud including:



- **Online Scheduling** – Conveniently allow new patients to schedule an exam online
- **inVisit** – Integrated virtual appointments
- **Edge Cloud 7 Enhancements** – Including insurance correspondence history by plan, not just by company; displaying a friendly, patient-facing office name in certain places; and acquire multiple scans at once.

To all our customers, thank you for the trust and loyalty you have placed in us. If you're already using Edge Cloud, hopefully you're familiar with many (or even all!) of these features. If you're not, please

explore them, either through the Edge Cloud release notes or by contacting our Software Support Team.

If you're still using ViewPoint, I really encourage you to take a look at all the benefits Edge Cloud offers. In addition to the features listed above, and with your data stored securely in the cloud, you gain added peace of mind and can quit worrying about backups and if they are complete and usable. You can easily access your data wherever you are, from a satellite office to your home, or even while on vacation. You can save money by eliminating the cost of a new server, software licensing, and other expensive IT functions. And Edge Cloud will scale with you, whether you're looking to expand your office or add a new software module. But the best reason of all is it's from Ortho2. We will work with you to ensure a smooth transition from ViewPoint to Edge Cloud and you can still receive the same level of quality support and services you have come to expect. Rest assured, ViewPoint isn't going anywhere, but if you haven't done so recently, consider contacting your Ortho2 Regional Manager to start this conversation. I think you'll be happy you did. ☺

Amy Schmidt

Amy Schmidt, Ortho2 President

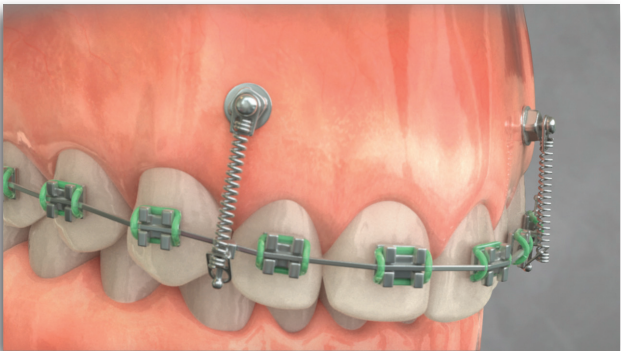
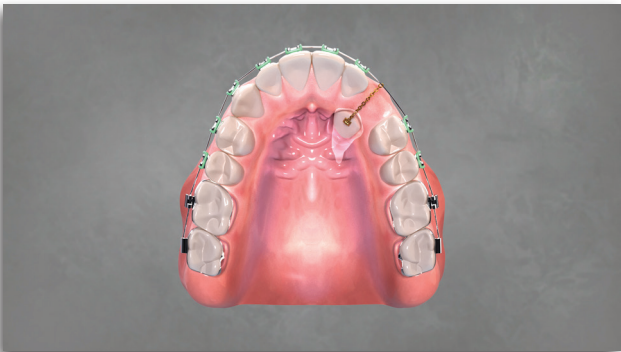
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ANIMATION DEPARTMENT UPDATE



The bristles clean under the gumline



The 3D Animation Team has been hard at work expanding the library of videos available through Edge Animations and the Edge Animations Mobile App!

New videos since the last Animation Team update include:

- Bass Brushing Technique shows an effective way to manage oral hygiene
- Palatal Impacted Canine features different approaches to treating this malocclusion
- TAD for Gummy Smile also shows different approaches to treatment

In addition to the videos produced here at Ortho2, we have just released a series of videos about treatment using Reveal Aligners, including various topics such as inserting and removing, cleaning, storing, retention, and what to do if you lose or break an aligner. These videos are specifically about the Reveal Aligners, but the information presented can be applied to any aligner, and much of it can be useful for how to take care of a retainer.

We also wanted to take a moment to give you a peek at what we have nearing release:

- A new Haas expander video showing the use of braces to close space. Accompanying this is an update to the original Haas expander video.
- A new Mara appliance video showing the use of braces. There is also a newly updated version of the original Mara appliance video accompanying this new video.
- A new video showing different types of brackets and their features. This video expands on the few videos we have of individual bracket types, but presents the information in a single, longer form video.

As always, if you have ideas or suggestions for new videos you'd like to see created and added to the Edge Animations library, please share your ideas with us by emailing animations@ortho2.com.

USERS GROUP MEETING

2021 UGM Recap

Thank you to everyone who attended our first ever virtual Users Group Meeting, Live From Iowa: A UGM Special Event! We were so glad to bring you content to enhance your practice's day-to-day duties.

If you weren't able to attend the day's sessions, or you want to re-watch the best parts, simply go to www.ortho2.com/ugm.



2022 UGM Information

Mark your calendar for January 27-29, 2022 for the 38th annual Users Group Meeting! The event will take place at Planet Hollywood in Las Vegas.

Be sure to let us know you are interested in the UGM by filling out the Interested Form found at www.ortho2.com/ugm.

Hey ortho
team,
do you
ADORE your
profession?



Auxiliary Donations for Orthodontic Research and Education (ADORE) was created to offer opportunities to orthodontic team members to join the American Association of Orthodontists Foundation in their mission to advance the specialty by supporting quality education and research that leads to excellence in patient care. Members of ADORE will receive special benefits, communication and recognition from American Association of Orthodontists Foundation for their commitment.



facebook.com/AAOF/ADORE

Look for our booth in Boston in
the team lecture corridor.

Learn more and become a
member on the AAOF website!
aafoundation.net/ways-to-give



Are you the only person in your office who sees the newsletter? Pass it along!

You can also read the newsletter on our website
www.ortho2.com > Our Company > Newsletters.

INTRODUCING QLARK FROM ORTHOSCIENCE

Craig Scholz, Ortho2's Vice President of Emerging Technologies, recently sat down with Dr. Sean Carlson to talk about Qlark and how it can assist Ortho2 customers.

Sean, for Ortho2 customers who aren't familiar with OrthoScience can you give us a brief overview?

OrthoScience is a technology company based in California. We created Qlark, the Learning Network for doctors and their teams. Qlark is accessible from anywhere in the world using any web-connected device. The iPhone app also gives doctors a native mobile option.

Qlark connects thousands of doctors and their teams with up-to-date learning material. Our technology delivers trustworthy case report data allowing for apples-to-apples comparisons across different philosophies and appliance types. We've translated real-world clinical case work into manageable learning bites. Plus, Qlark members can earn ADA-accredited and AGD-accredited CE credits while gaining skills they can take right to the clinic.

Ortho2 is excited to be the first practice management system to integrate with Qlark. What does this integration offer now and where do you see it going in the future?

Doctors will benefit the most from Qlark's integration with Edge Cloud. Integration makes case sharing a lot easier. Remember, the foundation of our Learning Network comes from doctors sharing case reports and collaborating with each other over treatment ideas.

Qlark members learn in real time from doctors all around the world. Practice management integration makes it easier for our network of doctors to share. Therefore, they learn from each other more quickly. Thanks to this integration, doctors can now share case reports with the click of a button.

Keep in mind, doctors mostly practice in isolation. But Qlark is changing that. We're watching more collaborative learning happen for both younger and older doctors. Better treatment solutions are now being exchanged from one doctor to another exponentially faster. This is incredibly beneficial for patients.

OrthoScience has more than 50,000 CBCT cases – a huge amount of data. How can orthodontists best leverage this big data?

Yes. Many of our doctors have committed their entire career of casework to our Qlark network. Keep in mind that this also includes two dimensional data sets. We are not limited to CBCT. We now have the ability to collect and organize up to 30,000 case reports per month.

We hope to reach our goal of one million case reports, from all over the world, faster than expected. We are off to a great start. We think this data benefits doctors in a big way, as they will simply become better at what they do. With Qlark, not only can they learn from their own treatment trends, but they can tap into those from other doctors. Most importantly, this approach results in better patient care for everyone.

What are OrthoScience's plans for the AAO this year?

Of course, all of us are looking forward to getting back to the social aspect of live physical meetings. But understandably, the pervasive nature of the current COVID-19 pandemic has us all uncertain about when live meetings will return to normal.

Fortunately, OrthoScience technology works all day every day without physical constraints. So having Qlark in your pocket during the AAO this year will only make it a better

OrthoScience continued on page 14

About the Author



Dr. Sean Carlson is an Associate Professor of Orthodontics at the University of the Pacific School of Dentistry, a longtime customer of Ortho2's Edge Cloud, and the CEO of OrthoScience. Check out OrthoScience's Facebook page at www.facebook.com/MyOrthoScience.

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OSHA COMPLIANCE UPDATE

As our orthodontic offices have settled into a new pattern for seeing patients (including screening, temperature checks, etc.) there have been questions regarding compliance with the current OSHA guidelines. In March 2020 OSHA released interim guidance to get us through the COVID-19 pandemic. ADA has also released their Return to Work Interim Guidance Toolkit. Both documents give us interim guidance on protecting our teams with safe working conditions as well as managing exposures from either patients or team members. The OSHA Bloodborne Pathogens Standard is still in effect and must be followed by all offices.

There is often considerable misunderstanding as to what OSHA regulates, and many confuse OSHA requirements with regulations for infection control. OSHA, in fact, is concerned with only one thing: the safety of employees. OSHA does not care if the hazard is from a chemical, bloodborne pathogen, electrical device, or fire. Its only concern is the protection of workers, and this includes those in the dental industry. The CDC sets the guidelines for infection control regarding patient safety including instrument reprocessing in a healthcare setting.

Annual retraining is required by CDC and OSHA for existing employees, and training for all new employees is mandatory. Training programs must thoroughly review all aspects of employee safety and must be documented in a written training log. The log must be signed by each employee.

OSHA Coordinator

All offices must have one person designated as the OSHA coordinator. This person requires training in OSHA compliance and training the team for a safe work environment.

The Hazard Communication Standard

The Hazard Communication Standard (HCS) deals with hazardous chemicals in the workplace. For our offices, these include disinfectants, acids, bonding materials, cleaners, and impression materials. HCS requires a written chemical safety plan, safety data sheets (SDSs) for hazardous chemicals and products, labeling of hazardous products, and training of

employees who work with hazardous products. Offices are responsible for labeling any "secondary" containers that materials may be transferred into.

Bloodborne Pathogen Standard

Because our clinical team members are exposed to blood and saliva every day, this standard is of extreme importance.

In general, the standard requires employers to:

- **Establish an exposure control plan.** This is a written plan to eliminate or minimize occupational exposures. The employer must prepare an exposure determination that contains a list of job classifications in which all employees have occupational exposure along with a list of the tasks and procedures performed by those workers that result in their exposure.
- **Employers must update the plan annually** to reflect changes in tasks, procedures, and positions that affect occupational exposure.
- **Implement the use of universal precautions** treating all human blood and other potentially infectious materials as if known to be infectious for bloodborne pathogens.
- **Identify and ensure the use of work practice controls.** These are practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of

OSHA continued on page 14

About the Author



Andrea Cook is a clinical consultant and trainer for premier orthodontic offices across the country with more than 20 years experience chairside. She offers a variety of services to train your staff and improve your practice.

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INITIATIVES FOR TEAM ACCOUNTABILITY

Oh no, not another meeting! If the word meeting suggests a dull and unproductive waste of time, think again! Brief, well-planned progress meetings will inform you of the advancement and ultimate success of your practice growth strategies. 2021 is an excellent time to regroup and recover from the 2020 disarray and establish practice success meetings!

Marketing Initiatives

To keep marketing initiatives on track, schedule weekly progress report meetings. Monthly, quarterly, and annual meetings with a closely adhered to agenda are valuable of course; however, there is no substitute for weekly meetings to keep track of project progress and regroup on ineffective strategies.

I recommend scheduling the full team for a one-hour, post-lunch weekly meeting. A suggested format may include:

- 15-minute update on current promotions with statistical results
- 15-minute patient service review focusing on one or two key initiatives that may have fallen away
- 10-minute assignment review
- 20-minute break away to perform assignments

Meetings must be held consistently to address pertinent information to all team members, including issues related to marketing initiatives, team cooperation, and patient service efforts. Additionally, compliments and concerns may be addressed during each session.

Note: It is essential that every team member, no matter what their role, participate in your success for everyone to reap the benefits of a thriving practice.

The first project on the first day of your weekly meeting is to establish a Practice Success team. The full team may assume marketing duties, with leaders in each promotional category, or a small team of 4-6 members may lead the charge with additional players placed on projects as needed. In either scenario the full team and the doctor are present at the weekly meeting. Recommended promotional categories include:

- Social Media Leads
- Review Site Leads
- Website Leads
- General Practitioner and Specialist Leads
- Community Relations and Event Leads
- Patient to Patient Leads (includes family and friends)
- School Outreach

Check-in/Check-out Meeting

On non-patient days when the team is present, start the day with this meeting and allot the full workday to projects, meeting back at 15-30 minutes before closing to outline progress. ALWAYS meet at the start of a non-patient day to determine assignments, whether the doctor is present or not. You may wish to rotate the person in charge of the check-in/check-out meeting.

Monthly Progress Report

Review statistics for the previous month during the first week of the month. Present a growth chart reflecting new patient contracts with comparison to statistics from the previous month and previous year. Due to COVID-19 2020 practice closures, you may opt to average 2019 and 2020 statistics or rely solely on 2019 information. Set a goal for new patients contracts or increased case acceptance percentage, for each month. You may choose to randomly reward the team if/when goals are met. Quiz your team about what rewards are appreciated!

Team Accountability continued on page 15

About the Author



Nancy Hyman founded Nancy Hyman Coaching to help orthodontic practices jump-start patient referrals, develop a patient rewards system, increase patient enrollment, and improve implementation of practice growth systems.

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WHAT THE 2020 CENSUS REVEALS ABOUT AMERICA AND WHY IT'S IMPORTANT TO ORTHODONTISTS

As our country just wrapped up another decade, we will soon see ten years worth of demographic data scheduled to be released in July of this year. For orthodontic practice owners the information in the census is probably worth taking a look at as we navigate future growth in a changing industry. What will the census reveal?

The new census data will show us that our nation is experiencing stagnate growth, with an aging population and a declining birth rate. With fewer births, more deaths, and uneven immigration, 2010-2020 was the smallest decade of growth in U.S. history including the Great Depression of the 1930s. Let's look at what factors have contributed to the slow growth rate in the U.S. population:

Declining Fertility Rates, More Deaths

Unfortunately, the past decade reveals a nation with unprecedented growth stagnation and a steep decline in the under-18 population. As our nation continues to age and baby boomers reach retirement, the gap between births and deaths narrowed with the number of births outnumbering deaths nationwide by fewer than 1 million for the first time in decades. Between 2010 and 2019, our millennial generation aged into adulthood, and the census projections indicate that our 65-and-over population will have a higher growth rate than our youth in the next decade. If any of you have listened to my lectures in the past you have heard me reference this as the "graying of America." The newly released data shows that thirty states saw decade-wide population losses in their youth led by California which lost more than 400,000. However, Texas gained more than 500,000 young people. We also saw Vermont, Maine, West Virginia, and New Hampshire have more deaths than births last year.

Immigration

Our population growth not only comes from natural births but also from foreign immigration. The estimated number of people moving to the U.S. annually from other parts of the world has steadily declined in the last four years. In 2016, an estimated 1,046,709 people moved to the United States from abroad. In 2019 that number fell to 595,000

due to the federal restrictions.

Our states also experience population growth and loss by "domestic immigration" or "out-migration". This is when residents move from one state to another. In the past decade, the Northeast lost 2.5 million residents who moved to other regions in the U.S., led by New York which lost more than 1.3 million residents. The second largest exodus of residents due to out-migration is the Midwest, with more than 1.6 million people relocating to other states. Of those 1.6 million, more than 865,000 residents left Illinois. California ranked third in out-migration losing more than 912,000 residents, but gained over 1 million foreign immigrants from abroad. Why did California, New York, and Illinois experience the biggest domestic out-migration shift in the nation? Demographers suggest that we saw this population shift due to the states' high tax structure and unaffordable housing. Many of these residents relocated to other parts of the country that offered a better economy with lower taxes and affordable homes.

On the flip side, other states benefited greatly as residents crossed state lines. Texas gained over 1.1 million domestically and another 818,000 coming from abroad since 2010. Florida also saw tremendous growth with 1.2 million residents moving in from other states. Five other states grew by 15% including Utah, Idaho, Nevada, Colorado, and Arizona. The data also shows that Oregon,

Census continued on page 15

About the Author



Shannon Patterson, Partner, CPR, CMSR is the Director of Practice Opportunities and a Placement Consultant at Bentson Copple & Associates. Shannon is a recruitment leader in the orthodontic industry specializing in placement and retention of doctors.

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CHECK YOUR BLIND SPOTS: TRACKING ROI IN INTERNET MARKETING

If the pandemic has taught us anything, it's that there is a tremendous value in the ability to quickly adapt to change. Over the course of the last year, we have witnessed first hand the countless number of significant modifications that businesses have had to embrace in order to survive in the age of a pandemic.

We watched as many restaurants were forced to get creative and design outdoor seating arrangements for their guests in the dead of winter. We watched as office buildings closed and companies built a sustainable infrastructure to give their employees the capability to work from home. We watched as dental, orthodontic, and medical offices closed their patient waiting rooms and enhanced their virtual consultation capabilities. All of which were critical elements for these businesses to simply survive the new normal. But what if that isn't enough? No one starts a business to simply survive – the goal is to thrive!

How? With fewer sources of entertainment available, we have also seen screen time skyrocket to record levels around the world. Everyone is on their phone. One expert estimates that screen time has increased more than 50% from a year ago. As a parent, this is an alarming number, but as an expert in online advertising, it's a number that doesn't just invite you to jump onto the bandwagon, it practically SCREAMS it! If you are not seen online, then you are not seen at all. Period.

This is your chance to adapt. To react. To thrive!

One of the most common questions I get from orthodontic clients is, "How do I know that the money I spend on digital advertising is working?"

This is a completely fair question, and in a time where money is tight and every dollar counts, you want to be able to track ROI so that you can see what is and isn't working.

The most effective way to track online ROI is to use dedicated landing pages and contact forms for every online advertising campaign. It might take longer to set up, but having clean data to analyze and tweak your campaigns makes it worth the extra effort. If you're just running a bunch of ads and pointing them all to your home page, or

a generic request an appointment page on your website, then you can't drill down into what's working and what isn't.

Online Leads are Only as Good as the Staff Converting Them

One of the most confusing parts of calculating Internet ROI is conversions. For an Internet marketer, a "conversion" might simply be someone clicking an ad and submitting an online contact form. Meanwhile, for a treatment coordinator, a "conversion" is a new patient starting treatment.

We know that your digital advertising agency is not performing the consultations. Your office staff must be up to the challenge of reaching out to leads in a timely manner, scheduling appointments, and converting new patients.

The best digital advertising programs use dedicated online forms and landing pages to show which leads came from which campaigns. By comparing these leads to the names of new patient starts in your practice management system, you have a clearer picture of digital advertising ROI.

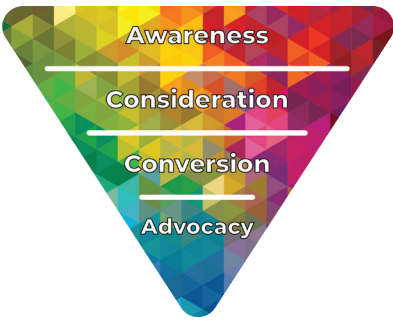
The Importance of Understanding Digital Marketing ROI

As a rule of thumb, bad advertising will give you bad results (rocket science, I know). Too many times, practices will pour a chunk of money into a digital advertising campaign, with little or no strategy, and wonder why it didn't work, only to pull the plug on the entire operation a few months later with minimal results. Or worse yet, continue throwing away marketing dollars month after month with the blind hope that something sticks and converts into a new patient through sheer luck.

Doesn't sound great, does it?

Instead, I suggest you start with a targeted digital marketing campaign defining your objectives, as this is the only way to accurately turn around and measure its success. While the ultimate goal is always to generate more new patient starts, that shouldn't always be the only metric of success.

What are you trying to accomplish here? Build brand awareness and establish your practice as a familiar name in your community? Direct new patients to contact your office to schedule a complimentary exam? Grow your practice in a certain age demographic, such as more teen or adult Invisalign patients? Being able to honestly answer these questions will be critical to your overall success.



You may have heard of the good ol' fashioned marketing funnel before, but if you have not taken the time to understand it, now is the time. And while the idea of the funnel may not be ground

breaking, the digital tactics deployed in order to successfully market in a world with skyrocketing screen time is.

Depending on your marketing objectives, the goal of your marketing campaign is to place potential customers into different stages of the marketing funnel. Now, while it is easy to simply want every potential customer to arrive at the end of the funnel and immediately convert into a new case start, the process doesn't always work like that. Think about how much research you would personally want to do before spending \$4-6,000 on braces or aligners for yourself or a family member. You would want to know the location of the office, financing options, insurance coverage, and all about the orthodontist and team. Oh and of course don't forget to check the Google reviews! Marketing, if done properly, has the power to not only assist with these questions, but completely drive the entire narrative and make a patient feel comfortable before they even step in the door.

Think of a sales funnel as the journey that your patient will go through in order to purchase your expertise and services. The closer your potential patient is to the top of the funnel, the less likely they are to buy. It is then the job of your campaign to help move the patient down the funnel, and into a conversion (or a start). If you really did a great job, that patient is now an advocate for your practice by

promoting your services to their own family and friends. This is not achieved by simply throwing money mindlessly into Facebook and/or Google ads hoping for the best. A highly crafted and targeted marketing campaign, if done correctly, is a surefire bet.

Ten Tips to Take Advantage of Consumer's Increased Screen Time

1. Identify your marketing objectives
2. Design a digital marketing campaign customized to these objectives
3. Carefully target your desired audience (then refine over time)
4. Present yourself as a leading expert in the area with a modern, up-to-date website
5. Customize your content (hire a photographer)
6. Create a unique landing page with high-performing conversion tactics on the back end
7. Evaluate ad performance regularly and make adjustments
8. Re-market to all website visitors with re-targeting ads
9. Track all conversions and improve your target audience
10. Start the process over again with your new leads and build "look-alike" audiences

Now, when I am asked the question: "How do I know that the money I spend on digital advertising is working?", you already have a preview of my answer!

Internet Marketing *continued on page 14*

About the Author



Mary Kay Miller is the founder of Orthopreneur, Internet Marketing Solutions. In January 2021, Orthopreneur merged into Kaleidoscope, offering orthodontic practices the ability to have all their online marketing needs taken care of under one umbrella with the Kaleidoscope 2.0 One Stop Shop.

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INSIDE ORTHO2

Information about the people of Ortho2 and the resources available to you as a member

FREE WEBINARS

We offer you free, online webinars each month throughout the year on various topics. It's a great solution for training new users, refreshing experienced users, or learning about new features. Webinars are available online at www.ortho2.com > Our Company > Ortho2 Webinars. Find the topic for the month and click the link to view the webinar at your convenience.

Upcoming Webinar Topics

EDGE CLOUD

April – Edge Cloud: Edge Cloud's Integration with Invisalign

Use the Invisalign integration to connect your Edge Cloud patient records with their corresponding record on Invisalign's website. Once connected, you can view the patient's Invisalign details and open a patient's Invisalign record directly from Edge Cloud. In this webinar, we'll walk you through how to set up your integration with Invisalign, and how to use it once it's set up.

ViewPoint

May – ViewPoint: Patient Correspondence History

The patient correspondence history includes all mail merge documents and ViewPoint financial forms you have generated for the patient and any associated responsible

parties, as well as additional documents you have captured or scanned directly into the history. This webinar will teach you all the ins and outs of patient correspondence history including scanning and capturing correspondence, and efficiencies such as creating file names.

EDGE CLOUD

June – Edge Cloud: Procedure Groups and Chains

Use the Procedure Groups and Chains editor to set up appointment procedures that should be scheduled either on the same day (procedure chains), or within a certain time frame of each other (procedure groups). We will walk you through setting up these procedures in the editor and how they function within the Treatment Chart and Needs Appointment List.

ON A PERSONAL NOTE

Congratulations to **Brooke Hawke**, Ortho2 Multi-media Marketing Coordinator, and her husband Tyler on the birth of their son Theodore Lucas! Theo was born on November 5, 2020. He weighed 9 pounds, 15.5 ounces and was 22.5 inches long. Welcome to the world, Theo!

Congratulations also goes out to **Izzy Austin**, Software Support Representative and Trainer, and his partner Eboni Brown on the birth of their daughter Amala Louise! Amala was born on February 6, at 11:20 A.M. She was 20 inches long and 7 pounds, 6 ounces. Help us in congratulating Izzy and Eboni!



Theo Lucas

AVAILABLE FROM ORTHO2

Contact an Ortho2 Regional Manager at sales@ortho2.com or 800.678.4644 for details on any of these products and services.

EDGE CLOUD

Our cloud-based management system.

Your Edge Cloud System Can Include:

(Scheduler, Electronic Insurance, and Edge Imaging always included)

- Additional Edge Cloud User Licenses
- Edge Specialist (pediatric dentistry module)
- Edge Proposal (patient-facing financial slider)
- Edge Animations (patient education and case presentation)
- Edge Portal Premium (online account access for patients/parents/professionals)
- Edge Reminders (automated appointment reminders)
- Treatment Hub (electronic charting)
- Patient Tracker (patient sign-in and operatory display)
- Premier Imaging (ceph and morphing)
- HR Manager (securely store employee information)
- Third Party Product Integrations

ViewPoint™

Our local server management system.

ViewPoint Software Modules

- Additional ViewPoint User Licenses
- Edge Imaging for ViewPoint (enhanced imaging functions)
- Edge Animations for ViewPoint
- Edge Reminders for ViewPoint
- Premier Imaging (ceph and morphing)
- Treatment Chart (electronic charting)
- On-Deck Appointment Control (patient sign-in and operatory display)
- HR Manager (securely store employee information)
- VP WebAccess (online account access for patients/parents)
- VP Glance (mobile access to your ViewPoint data)
- Electronic Insurance
- Grid Scheduler
- Third Party Product Integrations
- DataMove Utility (transfer ViewPoint data from location to location)

INVISIT

Virtual Appointment & Consult Solution

- Generate new patients with virtual consults
- Virtually monitor ongoing treatment and retention
- Communicate with patients through two-way text messaging or email
- Customize patient questionnaires
- Configure your management dashboard to fit your needs
- Integrates with Edge Cloud's Treatment Hub to quickly review submitted material
- Import submitted photos into Edge Cloud
- No app to download for patients
- Sign up at www.getinvisit.com

Ortho2 Services

More Than Just Software

- On-Site Training and Refresher Sessions
- Web-Based Training and Refresher Sessions
- Credit Card Transaction Processing
- Edge Cloud (off-site, secure data hosting)
- VP Backup Online Storage
- Data Split (split Edge Cloud/ViewPoint databases)
- Data Merge (combine Edge Cloud/Viewpoint databases)
- Data Conversion (put non-Ortho2 data into Ortho2 file format)
- Image Conversion (convert your images to Edge Imaging)
- Custom Reports
- Custom Online Forms
- Custom Premier Imaging Analyses

Equipment & Networking (For both Edge Cloud and ViewPoint systems)

- Computers, Printers, and Other System Components
- On-Site Installation and Configuration



INSIDE ORTHO2

Information about the people of Ortho2 and the resources available to you as a member

MEET THE TEAM – SOFTWARE SUPPORT

Any time you have a question about Edge Cloud or ViewPoint, there are many specialists available to assist you. The Software Support Team takes your calls to answer your questions, assists in enhancing your software, and trains new offices. This quarter features Chloe Enos, Michaela Henke, and Ethan Hixson.

What do you do here at Ortho2?

CE: I answer questions, troubleshoot issues, and help customers navigate the software.

MH: Learn and teach about computers and Ortho2 programs.

EH: I solve customer issues as fast and friendly as possible.



Chloe Enos
Vacation destination: Japan
Three people I would like to have dinner with: My uncle, Dina Rodriguez, Rebecca Sugar
My role model: My mother
I can't go a day without: My birds, I love them so much
What are you listening to right

now? BTS

Favorites

Team: Whichever team is winning?
Software Program: CLIP Studio Paint
Movie: *Howl's Moving Castle*
Book: *Dragon Rider*
Phone App: Twitter



Michaela Henke
Vacation destination: Camping in Hawaii
Three people I would like to have dinner with: My paternal grandparents and Keith David
My role model: My parents
I can't go a day without: Snuggling my bird, River

What do you want our users to know about what you do?

CE: Both Edge Cloud and ViewPoint are fairly large and complicated systems so it's perfectly okay to not know how everything works.

MH: A sense of humor is greatly appreciated. We take our job seriously, but a little humor can go a long way.

EH: Surprisingly, we learn the most from our users.



Ethan Hixson
Vacation destination: Anywhere with clear, blue water
Three people I would like to have dinner with: Neil deGrasse Tyson, Stephen Hawking, and Alexander Hamilton
My role model: Jim Carrey
I can't go a day without: Caffeine

What are you listening to right now? Put Your Records On by Ritt Momney

Favorites

Team: Tennessee Volunteers
Software Program: Spotify
Movie: *Interstellar*
Book: *Eragon*
Phone App: Spotify

What are you listening to right now? Nightjar by Cosmo Sheldrake
Favorites
Team: Iowa State University
Software Program: CLIP Studio Paint
Movie: Too many to choose just one
Book: I don't read much, but I do like *Eragon* by Christopher Paolini
Phone App: Discord

CAREER MILESTONES AND DEVELOPMENT

Ethan Hixson joined the Software Support Team on December 8, 2020. Ethan has an Associates Degree from Des Moines Area Community College, and gained technical and customer service experience through various jobs before joining Ortho2. Welcome to Ortho2, Ethan!

Chad Kellner accepted the role of Vice President of Development on December 28, 2020. Chad is not a new face at Ortho2 – he has been with us for nearly 17 years, and was most recently the Director of Development. Congratulations, Chad!

The Product Development Team gained two new employees, who both started on January 4. Please help us welcome:

Spencer Herzberg accepted the role of Senior Software Architect. He has been working as a senior level consultant for a number of employers including Ortho2. We are excited to have Spencer with us full-time.

David Stanley joined the team as a Senior Software Engineer. David has more than 15 years of senior level development experience. Most recently, he worked as a Senior Software Engineer for Berkley Technology Services.

Marla Miller, Software Support Representative and Trainer, retired on February 12, after 25 years of service with Ortho2. Marla began working with Ortho2 supporting OneTouch. She remained on the Support Team for most of her career, and was our Production Coordinator during the transition from OneTouch to ViewPoint. Marla said she is looking forward to volunteering her time with ACTORS and Kiwanis, and not having to wake up to an alarm clock! Thank you for all of your years of service, and enjoy retirement, Marla!

ORTHO2 ANNIVERSARIES

Congratulations to these Ortho2 staff members who celebrated anniversaries during the first quarter of 2021.

Thirty-Nine Years
Dan Sargent

Nineteen Years
Danetta Hiatt
Amy Schmidt

Nine Years
Mark Hoffmann
Joe Lynch

Thirty-One Years
Jo Jacobson

Seventeen Years
Michael DiSalvo
Chad Kellner
Tony Kooima

Seven Years
Lori Backous
Linda Cooley
David Hohbach
Amia Sult

Thirty Years
Diane Lyon

Twenty-Three Years
Coreen Magnuson
Mike Vest

Fifteen Years
Chris Bennett

Three Years
Joshua Tolsdorf
Ari Vasquez

Twenty-Two Years
Doug Olsan

Twelve Years
Jim Powell

Two Years
Joe Randazzo

Twenty Years
Joe Levenhagen

Ten Years
Mike Gude

OrthoScience continued from page 4

event. For example, many Qlark doctors will be lecturing at the AAO this year, and with the Qlark app, their lectures now have a new depth. Audience members can simply scan the screen and get instant access to the case reports being presented. It is pretty magical!

Long story short, we think our technology helps doctors

learn from each other with more depth and less dependence on physical proximity. As always, we plan to support everyone attending the AAO the best way we know how, by supplying continuous digital connectivity. Therefore, it is safe to say that we will be everywhere at the AAO this year in digital form. I'd recommend downloading the app now. ☺

Internet Marketing continued from page 9

If any of this feels overwhelming, you are not alone. Orthodontists are experts in creating beautiful smiles, and oftentimes don't have time or expertise to dive into the

different nuances of online marketing. If you think your practice would benefit from some expert help, there are resources that can help. ☺

OSHA continued from page 5

- contaminated sharps, handling laundry, and cleaning contaminated surfaces and items.
- Provide personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks.** Employers must provide PPE to all exposed employees at no cost to the employee.
- Make available hepatitis B vaccinations to all workers with occupational exposure.** This vaccination must be offered after the worker has received the required bloodborne pathogens training and within 10 days of initial assignment.
- Make available post-exposure evaluation and follow-up to any exposed employee who experiences an exposure incident.** An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or contact with blood or other potentially infectious materials. This evaluation and follow-up must be at no cost to the employee and includes documenting the route(s) of exposure and the circumstances under which the exposure incident occurred.
- Use labels and signs to communicate hazards.** Warning labels must be affixed to containers of regulated waste, containers of contaminated reusable sharps, and bags or containers of contaminated laundry.

- Provide information and training to workers.** Employers must ensure that their employees receive regular training that covers all elements of the standard including information on bloodborne pathogens and diseases, methods used to control occupational exposure, hepatitis B vaccine, medical evaluation, and post-exposure follow-up procedures. Employers must offer this training on initial assignment, at least annually thereafter, and when new or modified tasks or procedures affect an employee's occupational exposure.
- Maintain worker medical and training records.** The employer also must maintain a sharps injury log.

Plan of Action

Your first step is to commit to complying with the current CDC and OSHA regulations. Next, choose which of your staff members should be involved in implementation. Determine if you would like to take on this task by yourself or enlist the assistance of an outside company. To help you determine your level of compliance there are two checklists under the downloads tab on my website – one for CDC infection control compliance and the second for OSHA compliance.

Once you have achieved compliance, not only will the burden of worry be removed, but you will also have created a safer workplace for all. ☺

Team Accountability continued from page 6

The following statistics may be incorporated into the monthly progress report meeting:

- Overdue insurance and patient accounts
- New patient contracts and case acceptance conversion rate
- Collection and production numbers
- Tracking of new patients calls (number referred by doctors, patients, social media ads, etc.)
- Patient-to-patient referrals by name and volume
- Professional referrals (Include number of patients referred per doctor)

- Current initiative progress (as an example: Continuing Education DDS event meeting checklist)

Thriving practices in today's environment all share common elements in their practice growth plan: a vision of the desired patient flow, determining the target audience, a variety of selected growth strategies, implementation of projects, and tracking of referral strategy efforts. In speaking with dozens of doctors, one point is very clear – the old way of creating growth is no longer working. Business as usual does not create the desired results! ☺

Census continued from page 7

Washington, North Carolina, South Carolina, Georgia, and North Dakota grew by 10%. States that experienced moderate growth included Virginia, Tennessee, Oklahoma, South Dakota, Minnesota, Nebraska, Montana, and Massachusetts. West Virginia, Illinois, Connecticut, and Vermont showed absolute population losses over the decade. West Virginia exhibited population losses for seven years in a row, while Illinois and Connecticut did so for six years, and New York for four years.

What do These Demographic Trends and New Data Show Us?

It certainly indicates that we have an aging workforce. Perhaps more impactful is the shifts in state populations that will likely have consequences when the U.S. congressional districts reappoint seats based on the new census data. After all, the constitutionally mandated purpose of the decennial census is to apportion members of the U.S. House of Representatives in each state based on population. Right now, the projected redistribution of our population indicates that Texas could gain three seats and Florida could gain two. Arizona, Colorado, Oregon, Montana, and both Carolinas could gain one congressional seat. A whopping ten states are projected to lose a seat including; Minnesota, Illinois, Michigan, Ohio, Pennsylvania, New York, Rhode Island, West Virginia, Alabama, and most notably California which could lose a congressional seat for the first time in history.

It also indicates that, over the next decade, the two factors that contributed to our nation's slow growth rate - low birth rates and increased deaths - will continue as the population ages. As baby boomers continue to age into retirement, our nation will depend on the youth populations to increase, which will most likely come from immigrants and their children. The census bureau projects that after 2030, immigration will account for more than half of our nation's population growth. This means as we head into the next decade, immigration is something we should all pay attention to because it will be a vital contributor to our nation's economic health. As our nation continues to age and our population growth stagnates, the 2020s will become a crucial period for all of us to understand the role of immigrants and how they fit into our society and workforce.

As an orthodontist it is important to understand and pay attention to the changing patient population around your practice. For example, if your target market is based on adolescents, watch the population shifts in your elementary and middle schools. If your target market is based on income and jobs in the area be aware of company growth and/or relocation status. Or, if you experience a population boom from immigration, understand those new residents' ethnic background. As a practice owner understanding the population shifts and demographic character changes in your community is extremely beneficial if not crucial as it allows your practice to make adjustments in marketing for future patient acquisition. ☺



ORTHO2

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ORTHO2

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