

Quarterly Newsletter

July 2026
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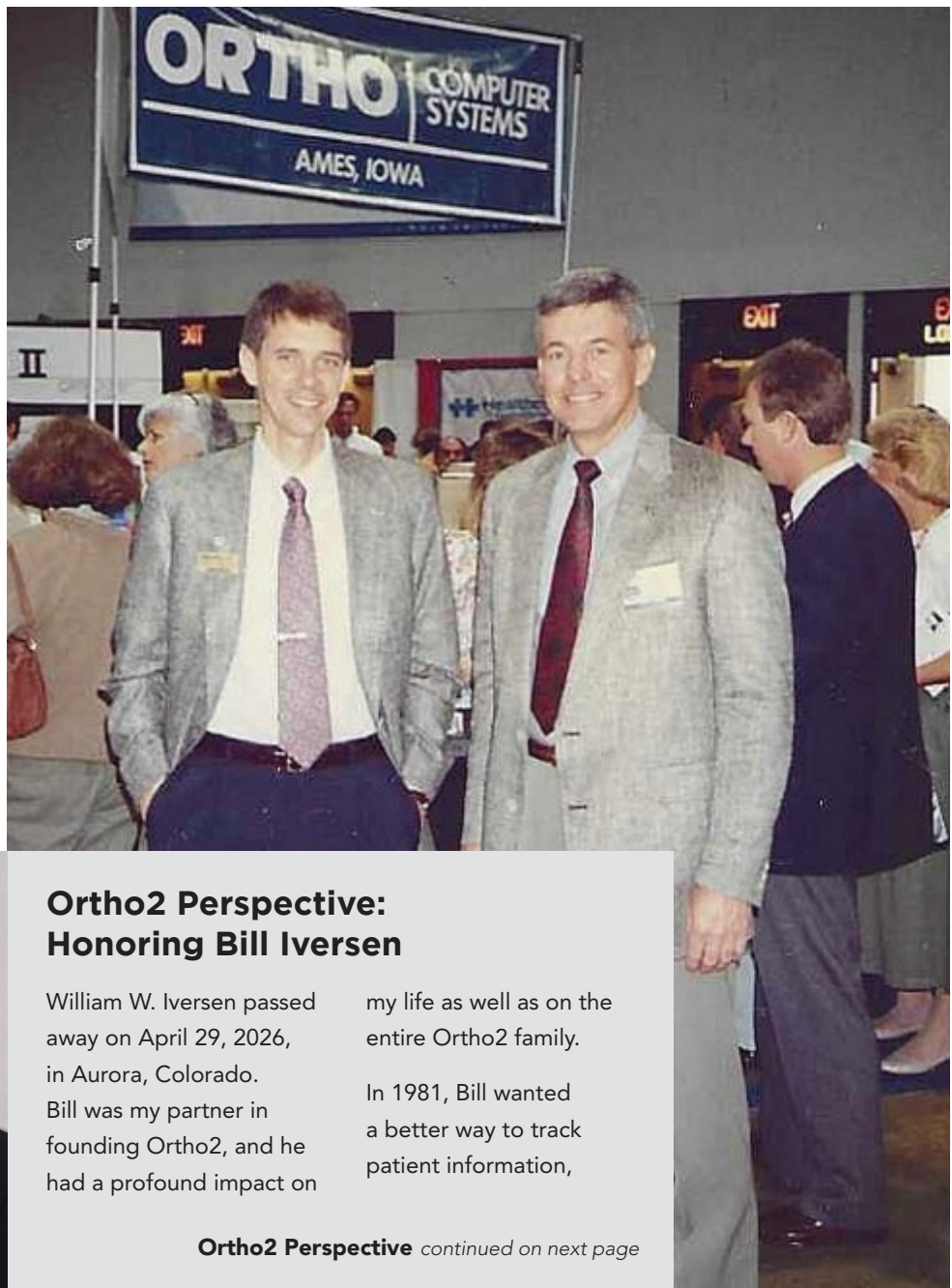
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Ortho2 Perspective: Honoring Bill Iversen

William W. Iversen passed away on April 29, 2026, in Aurora, Colorado. Bill was my partner in founding Ortho2, and he had a profound impact on

my life as well as on the entire Ortho2 family.

In 1981, Bill wanted a better way to track patient information,

Ortho2 Perspective continued on next page

Ortho2 Perspective *continued from previous page*

accounts receivable, and treatment criteria. With his input, I programmed a highly customized system for his office using a Wang minicomputer.

A few months later, Bill suggested that we could offer the system to other orthodontists. It was a great idea with a profound impact. I developed a more generalized version for the newly emerging personal computer market, and we sold our first system in December 1982.

In 1986, Bill moved to Colorado and sold much of his company interest to Bob Scholz, Larry Stone, and Sue Matlof. Each of these individuals impacted the company's ongoing success, but Bill's role remains an essential part of our story.

Here are just a few memories of Bill from the early years:

- One of the first times I was in his office, he said he needed to make a quick call. After dialing, he spoke a few words into the phone, then shouted, "NO!" and hung up. Startled, I asked him what had happened. "She asked if she could put me on hold," he said. Bill was not always a patient man.

- On a return flight after an exhausting meeting where we had exhibited our early system, the familiar "bong, bong" came over the speakers. Without hesitation, and for reasons known only to him, Bill loudly announced, "Everybody dance!" We laughed and laughed. To this day, whenever I hear those sounds on a flight, I think of Bill.
- One evening, while grilling a meal for us to enjoy, I noticed him sprinkling something on the burgers. It was garlic salt, it was wonderful, and I've used it ever since.
- An avid golfer, Bill was once asked how often he played. His answer: "I try to limit it to once a day." Bill was an excellent and enthusiastic golfer.

I will always be grateful for Bill's contributions to Ortho2 and for the impact he had on the course of my life. I am deeply saddened to say this final goodbye. ☺

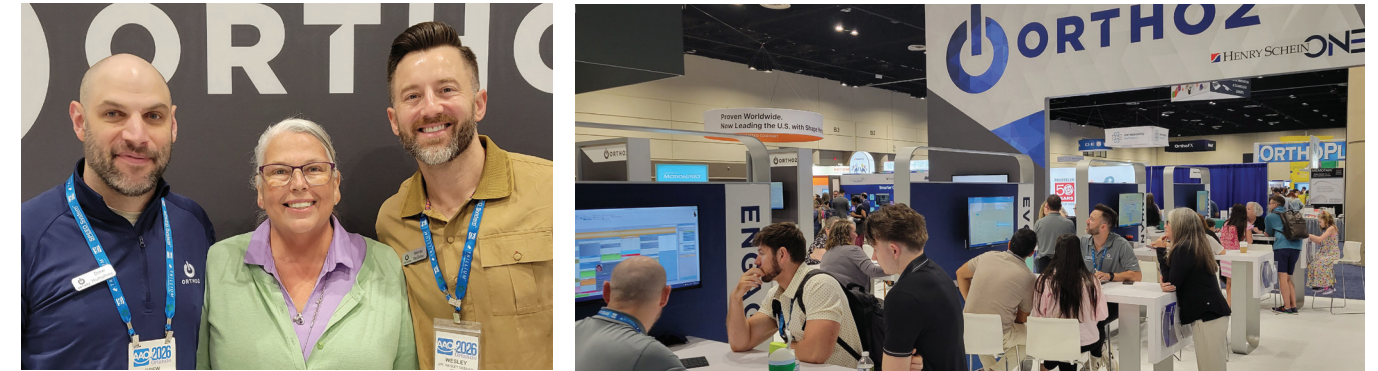


Dan Sargent, Ortho2 Senior Advisor

2026 AAO Recap

Thank you to everyone who stopped by our booth at the AAO! We would like to thank the following team members who worked hard in the Ortho2 booth at the AAO and contributed to our success!

Diane Julius – Feldman Orthodontics
Jodi Miller – Quintero Orthodontics



Visit Us at These Fall Meetings

Canadian Association of Orthodontists
Western Orthodontic Conference
Southern Society of Orthodontists and
Midwestern Society of Orthodontists
Mother of Pearls Conference
Northeastern Society of Orthodontists

September 25–26, 2026
October 2-4, 2026
October 15–17, 2026
November 6-7, 2026
November 6-7, 2026

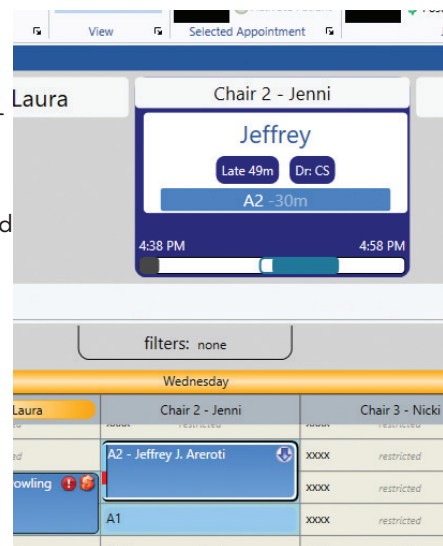


Edge Cloud 8.0 Feature Review

Edge Cloud 8.0 has been released to all customers! This article will highlight and explain some of the more common features in the update. View the full release notes at help.ortho2.com > Release Notes.

Patient Tracker and Light Bar

We heard from many users that they wanted more information in the Light Bar. With the 8.0 update, the Light Bar now shows the time the appointment will take based on its length and the time the patient was seated. For example, if an hour-long appointment was scheduled and a patient was seated eight minutes late, you will see this as two times at the bottom of the appointment. This information supplements the start and end times seen on the Scheduler.



You can customize some components of the Light Bar, including:

- Picking a chair (which is required for Doctor is Needed shortcuts)
- Changing the information style and selected office (which is required for new templates starting with Edge Cloud 8.0)
- The header content
- How long until Waiting moves over to the next color
- The timer counting up from the start instead of down to the end

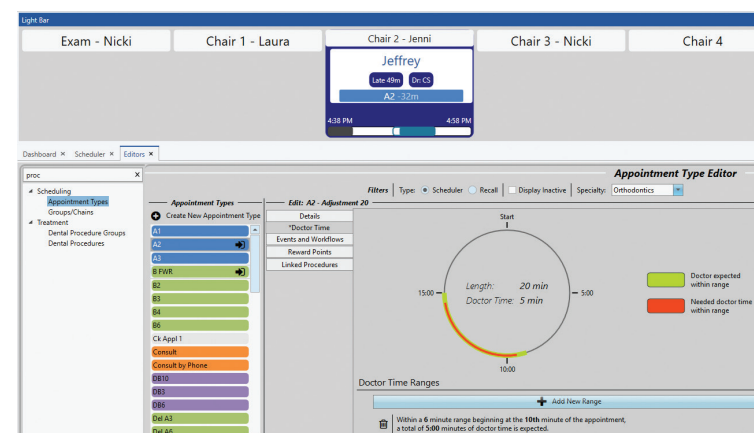
- Toggling information like the patient's name, appointment information, and timing-related information

To change these settings, click the wrench icon in the top right corner of the Light Bar. Note that these settings are machine-specific. Once you have chosen your settings, be sure to refresh the Light Bar by clicking the refresh icon under the wrench icon.

Along with these updates to the Light Bar, we have heard your concerns about the reduced visibility that came with the update. Our team is actively working on a new version of the Light Bar that will deliver both the expanded data points and the improved visibility you are asking for.

Doctor Time

Doctor time now supports partial minutes, allowing for more precise scheduling and time allocation. This can be set up in the redesigned Procedure editor. Simply define when the doctor is expected to be chairside and how long they are needed. These definitions show up in the Light Bar as a range and a solid color to visually show you when the doctor is expected chairside.



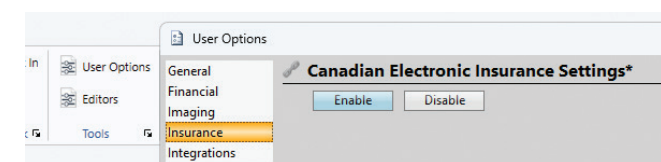
Global Payments Integration

When creating a payment on file with Global Payments, you can now enter the CVV, address line, and postal code. These enhancements help improve transaction security, reduce the risk of fraudulent activity, can contribute to higher approval

rates, and help lower fees.

Canadian Electronic Insurance

Canadian users can now submit electronic insurance through CDANet/ITRANS. To get started, contact the Implementation Team at 800.809.0277 or implementation@ortho2.com. After onboarding and configuration with our Implementation Team, you will see a new User Option to enable Canadian electronic insurance per machine: Home > User Options > Insurance. From there, if the configuration of CDANet and the appropriate bridge on that computer are set up, claims can be submitted. Submission errors report back to Edge Cloud, and can include things like if the company does not support the code per ITRANS, or if identifying information required for submission is missing, or if some configuration in Edge Cloud needs correcting.



Invisalign/ClinCheck Integration

The integration with Invisalign has been overhauled, with the main change being how future updates will occur. Any future updates to either Invisalign or Chrome will be able to be made behind the scenes and won't require an update on your end.

If you are still having issues accessing Invisalign after updating to 8.0, check some of these common items:

- Update your password to be simpler with fewer special characters

- Ensure the credentials have "Doctor Login" level access to Invisalign
- Test possible credential issues with the Doctor Login site for Invisalign, then have a software administrator input the credentials under Home > Editors > System Integrations > Invisalign
 - For multi-practice databases, input the credentials under Home > User Options > Integrations > Invisalign

Call the Software Support Team if these steps don't resolve the issue.

Edge Mobile

Edge Mobile is back in both the Apple App and Google Play stores! The Edge Mobile app is a simple and great way to get a quick look at your patients, professionals, appointments, stacks, and other chart metrics at a glance from your phone. ☺





Joe Randazzo

Joe Randazzo is an Ortho2 Advanced Support Tech and Trainer with a background in software engineering and a healthy-ish obsession with technology. While hands are off the keyboard, he frequents karaoke venues, yaps about his electric compact car, and performs culinary crimes currently featuring Vegemite and textured vegetable protein.

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How Orthodontists Can Maximize Productivity During Downtime

As summer approaches, some orthodontic practices experience a noticeable slowdown in patient visits. Families take vacations, children are out of school, and the balance of everyday life shifts, often resulting in lighter appointment schedules for orthodontists. While the summer months may present a challenge for maintaining consistent patient flow, they also provide a unique opportunity for orthodontic teams to address pending reports, refine their processes, and prepare for the busy months ahead.

Understanding the Slowdown

The summer months are traditionally a quieter time for orthodontists. With many families focused on travel and outdoor activities, routine orthodontic appointments often take a back seat. However, this seasonal lull does not have to equate to lost productivity. Instead, it offers a chance for orthodontists and their team to engage in administrative tasks that can enhance practice efficiency and patient care.

Maximizing Downtime Working With Key Reports

One of the most productive ways to utilize slower months is to tackle the backlog of pending reports. Orthodontic practices regularly generate reports such as Will Call Back or Pending reports, OBS reports, and Recall reports. Though these documents may seem tedious, they are integral to the smooth operation of a practice.

- 1. Will Call Back or Pending Reports:** These reports track patients who have expressed interest in making appointments but have not yet returned for an actual visit. Summer is a perfect time to reach out to these patients. The relaxed pace allows orthodontists to personally connect with potential clients, reminding them of the benefits of starting treatment. A friendly follow-up can reinvigorate interest and ultimately bring more patients into the office.
- 2. Recall Reports:** Keeping track of patients who are due for check-ups is essential for maintaining ongoing treatment plans. With fewer appointments in the schedule, orthodontists can focus on strategizing how to bring these patients

Productivity *continued on page 11*



Cathy Jugovic

Cathy is meticulous, detail-oriented, and she will educate you on how to run your business; and yes, it is a business. She brings her legendary skills such as front desk management, accounts receivables, collections, insurance billing, and treatment coordination. She offers detailed reports meant to steer any practice in the right direction by coaching doctors, front desk members, office managers, financial coordinators, and treatment coordinators on how to run and analyze weekly and monthly reports.

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The Hidden Cost of Chasing ROAS in Orthodontics

There's a pattern I see play out every single year in orthodontic marketing. A practice hires a digital agency to build their website and generate growth through Google Ads, Meta campaigns, special-offer landing pages, and limited-time promotions. At first, the results can be exciting. Leads increase, phones ring, consult numbers go up, and the ROAS—Return on Ad Spend—looks like a real win.

Then it just stops working.

The cost per lead rises. Lead quality becomes less consistent. Conversion gets harder. And the practice finds itself spending more money trying to recreate results that once came easily.

When this happens, it's easy to assume the ads stopped working or the strategy simply needs adjusting. But in many cases, the issue runs deeper.

ROAS is useful for measuring campaign performance, comparing media effectiveness, and tracking response. But ROAS has limitations, especially when it becomes the primary lens through which a practice evaluates marketing. ROAS measures immediate response. It does not measure trust, reputation, brand strength, patient experience, or long-term preference in the marketplace.

And that distinction matters.

Think of it this way...a successful going-out-of-business sale works because the business has already accumulated value in the market. Over time, it has built awareness, credibility, reputation, and customer trust. The sale creates urgency around that existing value, and people respond. But the sale works precisely because the brand has equity to spend.

That same dynamic can happen in orthodontic advertising.

Direct-response ads—or what I like to call urgency ads—draw against the stored value of the brand. When used occasionally, they can be incredibly effective. They create excitement and give patients a reason to act now instead of later. But when urgency becomes the ongoing strategy, when the market is constantly presented with offers, promotions, or deadlines, it can erode the very brand value that made the ads work in the first place.

ROAS *continued on page 10*



Jeff Behan

Jeff Behan is a consumer marketing specialist, consultant, and accomplished filmmaker. He is a fun and relevant speaker whose subject matter focuses on internal/external communication, connecting with existing and prospective patients, referral-building, and practice branding. He is the principal member of VisionTrust Communications, a company known for custom marketing solutions that serves over 1,000 orthodontic practices around the world. Jeff is also Co-Founder and Creative Director of Orthodontic Revolution, and Co-Founder and CEO of VisionTrust International.

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How Federal Loan Caps Will Reshape the Orthodontic Pipeline

On July 4, 2025, the One Big Beautiful Bill Act was signed into law. Among the provisions that received significantly less coverage than the headline tax measures was a fundamental restructuring of federal graduate and professional student lending, a restructuring that becomes effective July 1, 2026, and that will materially reshape the economics of the orthodontic pipeline for the next decade.

For an industry already navigating PE-backed consolidation, private credit stress, and generational shifts in practice ownership, this is a headwind that hasn't been adequately priced into anyone's strategic planning.

What the OBBBA actually does and the three provisions that matter for our industry:

First, the Graduate PLUS loan program will be eliminated for new borrowers starting July 1, 2026. For more than a decade, Graduate PLUS has been the financing mechanism of last resort for dental and medical students, allowing borrowers to cover up to the full cost of attendance for graduate and professional programs. After July 1 of this year, that door closes for new entrants.

Second, new aggregate borrowing caps apply to graduate and professional students who still qualify for federal lending. For students in designated "professional programs" like dentistry, medicine, and veterinary medicine, the annual direct unsubsidized loan limit rises to \$50,000. The catch is the lifetime aggregate, which is fixed at \$200,000.

Third, a new income-driven repayment plan replaces the previous menu of options. The Repayment Assistance Plan (RAP) will eliminate PAYE, SAVE, ICR, and other existing income-driven plans for new loans disbursed after July 1, 2026. RAP runs on a 30-year term with payments ranging

from 1% to 10% of adjusted gross income, depending on income level.

For high-debt borrowers, which describes virtually every dental specialty graduate, the new standard repayment plan produces unaffordable monthly payments, making RAP effectively the only practical option. The plan does include borrower-favorable provisions: negative amortization is eliminated (unpaid interest is subsidized rather than added to principal), and married borrowers filing separately can exclude spousal income from the payment calculation.

But the 30-year term is significantly longer than the previous IDR plans, meaning a 28-year-old orthodontist beginning repayment in 2029 will be making payments until age 58.

The Squeeze on Current Residents

Most orthodontic residency programs run 24 to 36 months. Residents who began their programs in 2024 should be grandfathered into the Grad PLUS legacy provisions for the remainder of their residency. Residents starting in July 2026, however, will not have Grad PLUS access at all, and the \$50,000 annual cap, with a \$200,000 lifetime aggregate, will not come close to financing the full cost of an orthodontic residency on top of pre-existing dental school debt.

For perspective, the average dental school graduate debt currently sits at around \$312,000. The American Association of Orthodontists reports that the average orthodontic resident graduates with approximately \$567,000 in total student loan debt, which is among the highest debt loads in healthcare. The \$200,000 lifetime professional cap covers roughly 35% of typical orthodontic graduate debt. For residents already mid-program, the legacy provisions create real complexity.

The AAO has been advocating aggressively in Washington on this issue, but the legislation is law. The practical question now is how our orthodontic profession adapts.

The Pipeline Impact: Fewer Residents, Different Residents

Dental students considering orthodontic residency face a deceptively simple math problem. The cost differential between general dentistry and orthodontic specialization is significant, with three additional years of expensive education, often financed at high interest rates, with typically no income during training. Historically, Grad PLUS made that math workable, because students could borrow the full cost of attendance and amortize repayment against the higher specialty earning potential post-graduation.

Under the new framework, that arithmetic shifts. A dental student facing a \$200,000 federal lifetime cap, who has already borrowed against that cap for dental school, has effectively no federal borrowing capacity remaining for residency. The gap, which can easily exceed \$200,000 to \$300,000 for three years of orthodontic training, including living costs, has to come from private lenders or from family resources. Compounding the problem is that many of our orthodontic programs are located in high-cost-of-living areas.

This creates two predictable patterns. First, residency pursuit will skew toward students whose families can finance the gap that federal lending no longer fills. Specialty access, which federal lending has democratized for first-generation professionals and students from lower-income backgrounds, will narrow back towards the demographic that can self-finance.

Second, total residency applications will decline meaningfully, particularly among students who would have been at the financial margin under the old system. Fewer

residents will mean fewer new orthodontists entering practice in 2029 and beyond, which is exactly when the demographic wave of "Boomer Orthodontist" retirement will peak.

This shortage will interact with the PE consolidation dynamics already reshaping the industry. With fewer specialists available, DSO and OSO platforms will face increasing pressure on associate recruitment and retention. The compensation packages required to attract and retain specialists will rise. The economics of associate-to-partnership pathways will tighten. The buy-in math that is already strained in a soft consumer environment will become even more challenging.

“The associate market will contract as fewer new orthodontists enter the profession each year and as residency pursuit declines. The orthodontists who graduate will carry significant student debt loads that constrain their ability to absorb practice acquisition debt on top.”

The Private Lender Vacuum

The private student loan market is not a substitute for federal lending; it is a fundamentally different product. Private loans are credit-underwritten and almost always require a co-signer for residents without independent income. Interest rates are typically variable and several hundred basis points above federal rates. And the borrower protections that have made high-debt professional financing

Pipeline continued on page 12



Shannon Patterson

Shannon Patterson, CPR, CMSR, Certified Kolbe Consultant, is a Partner with Bentson Copple Patterson & Associates and is a leading consultant in the orthodontic industry. She specializes in doctor placement and doctor retention with orthodontic practices throughout the United States.

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bcp-advisors.com

Over time, people stop responding to the practice itself and begin responding only to the offer. The relationship shifts. Instead of “*This is the orthodontic office I trust,*” the mindset becomes, “*Let me know when they run the next special.*”

That’s an expensive shift because eventually the offer starts carrying the weight the brand used to carry.

This is why some orthodontic ad campaigns perform exceptionally well in the first year and then become increasingly difficult to sustain. It isn’t that the ads got worse. It’s that the brand underneath them has been weakened by over-reliance on urgency-based marketing.

To be clear, I’m not against promotional advertising. We use it ourselves. In fact, I think it can be highly effective when used strategically. A summer campaign, an end-of-year insurance push, or a seasonal treatment-start promotion can create urgency and help move people to action. But in our view, that kind of advertising should be used sparingly, three or four times a year, as part of a broader strategy, not as the strategy itself.

My take has always been simple: **brand and relationship marketing first. Urgency advertising used sparingly.** It’s the same approach used by luxury brands such as Mercedes-Benz and Lexus. They don’t avoid discounts or special incentives, but they do limit those promotional events to a handful of seasonal campaigns each year, carefully avoiding

anything that might dilute the long-term value of the brand.

Sustainable orthodontic growth is built through reputation, referrals, community presence, and patient experience. It’s built through strong relationships with referring dentists, a memorable brand, a team culture patients want to talk about, and a consistent presence in the community. It’s built by becoming known before someone is ready to schedule, so that when the time comes, your practice is already the obvious choice.

When that foundation is in place, urgency advertising actually becomes more effective. It acts as an accelerator rather than a crutch. It supports momentum rather than creating temporary spikes that are difficult to maintain.

ROAS matters. Leads matter. Consults matter. Starts matter.

But the better question for any practice evaluating its marketing may be this:

Is what we are building sustainable over time?

Because the healthiest practices are not built on urgency. They’re built on brand. They’re built on relationships. And they’re built on becoming the practice people think of first and recommend without being asked.

That kind of growth takes a little longer to build. But it helps you actually build something that lasts. ◊



Free Cutting Edge Webinar Series

The Cutting Edge Webinar Series features industry-leading consultants and doctors presenting on their expertise in the field. These webinars are free and for anyone - from resident to experienced doctors and staff.



Scan the QR code for a full calendar of webinars and recordings. Webinar recordings can be found at the bottom of the page and will be available for three months after the webinar takes place.

back into the office. Sending personalized reminder letters or making phone calls to reconnect with patients is a productive way to ensure that the practice remains engaged with its client base.

Streamlining Administrative Processes

In addition to addressing these reports, summer downtime is a prime opportunity for orthodontists to streamline their administrative processes. This could include updating software systems, revising patient intake forms, or conducting team training aimed at enhancing patient communication. By investing time in improving internal systems, practices can create a more efficient workflow, ultimately benefiting patient care during busier months.

Moreover, orthodontists can encourage team members to participate in continuous education. Attending webinars or local conferences focused

on the latest advancements in orthodontics will empower the team with fresh knowledge and cutting-edge techniques, enhancing service delivery when patient visits increase again.

Implementing Marketing Strategies

The slow summer months can also serve as a prime time for orthodontic practices to refine their marketing strategies. By developing targeted campaigns that emphasize the benefits of beginning orthodontic treatment over the summer, practices can work to fill their appointments in advance. Promotions for family packages or summer specials can entice parents to bring their children in for consultations, ultimately resulting in an uptick in patient numbers.

Social media platforms can play a crucial role during this period as well. Posts showcasing smile transformations, patient testimonials, and educational content about

orthodontic benefits can engage existing patients while attracting new ones. A well-curated online presence keeps the practice visible and relevant, fostering a sense of community that can translate to real-world visits.

While it’s common for some orthodontic practices to experience slower months during the summer, it’s essential to view this period as an opportunity rather than a setback. By focusing on pending reports, streamlining administrative processes, and implementing proactive marketing strategies, orthodontists can not only maximize their productivity but also position their practices for success in the months ahead. Embracing this downtime can lead to improved patient care, heightened team morale, and a stronger foundation for future growth. So, as summer rolls in, let’s take a moment to prepare for the upcoming challenges, ensuring that our practices thrive year-round. ◊



manageable, like income-driven repayment and deferment and forbearance flexibility, will not exist in the private market in any meaningful form.

The market that fills the gap will attract two categories of lenders. The first is established players like Sallie Mae, SoFi, Earnest, and bank-affiliated student lenders who will expand professional student offerings to capture the demand.

The second is more concerning: specialty and subprime lenders who target professional students with high-interest products and aggressive collection practices, betting on the high earning potential of dentists and specialists to make the credit risk pencil out.

Dental and orthodontic residents are particularly attractive targets for predatory lending precisely because of their expected post-graduation earnings. The AAO and ADA need to be vocal in protecting students from these arrangements, but the regulatory environment for private student lending has historically been weak, and the financial pressure on residents starting in 2026 will be intense.

What This Means for the Industry

For orthodontic practice owners, three implications deserve strategic planning attention.

First, the associate market will tighten. Practices that depend on a reliable supply of associate orthodontists for growth, transitions, or partnership pathways should expect more competition and higher compensation requirements over the next five to ten years. Recruitment timelines need to extend, and offer structures need to sharpen.

Second, the financial pressure on early-career orthodontists will be more intense than at any point in the last three decades. Practice transition pathways that assume rapid associate-to-partner buy-ins need to be re-modeled. Younger orthodontists will be more reluctant to take on practice acquisition debt on top of historic student debt,

and the partnership math has to give them a credible path forward.

Third, the AAO's advocacy work on this issue matters more than it has ever mattered. State-level loan repayment programs, federal interest deferral during residency, and broader specialty financing reforms are not abstract policy debates; they are the difference between a healthy orthodontic specialty in 2035 and a profession increasingly accessible only to those with family means.

The OBBBA is now law. The question facing the orthodontic profession is whether we adapt thoughtfully or watch our pipeline narrow.

The Transition Planning Dimension

If you own an orthodontic practice, the OBBBA's student loan changes don't affect you directly. They affect the people you need to hire, partner with, and eventually sell to, which means the disruption will show up in your transition economics, not your operating economics, and it shows up on a timeline most practice owners haven't planned for.

The associate market will contract as fewer new orthodontists enter the profession each year and as residency pursuit declines. The orthodontists who graduate will carry significant student debt loads that constrain their ability to absorb practice acquisition debt on top.

Practices that adapt their transition planning to the new associate financing environment will have options. Practices that don't will find themselves selling to whoever shows up with capital, on terms shaped more by the buyer's leverage than the seller's preference.

The next decade of orthodontic practice transitions will be more competitive on the buyer side than any decade in recent memory. The practice owners who win are going to be the ones who start planning while they still have time to be strategic. ◊

Take Edge Cloud Anywhere With Edge Mobile

How to Get Edge Mobile:

Install Edge Mobile from the Play Store or iOS App Store. Once downloaded, enter your Customer Identifier in Edge Mobile settings. To find this number, in Edge Cloud click on the File Button, then click About. Next to the Customer Identifier is an Envelope icon. If you have Outlook installed, click the envelope next to the Customer Identifier to email the Customer Identifier to an email account your mobile device can access. We recommend using copy and paste to email the Customer Identifier to yourself if you do not have Outlook installed.

Exit Edge Mobile settings by clicking the back button in the top left corner. Then, log in with your Edge Cloud operator email and password. Your Edge Cloud operator record must have this email address associated with it, and you must use a password that is not blank.



Referral Rewards

You can earn a \$500 credit for each referral that results in an Ortho2 system purchase within six months. You can apply the credit toward any current or future charge or purchase — it never expires. We frequently hear from doctors that they wish we had contacted them before they purchased their current system. We wish we had too, but we didn't know they were looking. You can help us help your colleagues by letting us know when they are considering a change in systems. Enter referrals online at www.ortho2.com > Our Company > Referral Rewards, or call 800.678.4644.



Chat Support

Do you need to call in to our Support Team for a question, but it's difficult to wait on hold, even for a few minutes? Ortho2 has you covered! Use our chat support to get in contact with us. When you use the chat support feature, you will be added to the same queue as phone calls. You can choose to chat with the Software Support, New Customer Care, or Network Engineering Teams.

In Edge Cloud, you can find links to chat support through the Help menu. In ViewPoint, click the Help button in the bottom right of the Daily Activities menu.



Retraining

Have you hired new staff since your original software training? Have you had staff members take on new responsibilities? Do you feel you might not be taking advantage of the enhancements that have been added over the years?

Ortho2 offers many options for refreshing your knowledge of old features and informing you of new features, but do you want to be able to set your own agenda to meet the specific needs of your practice?

A retraining — either in your office or over the Internet — addresses all these issues. To learn more and to schedule one for your practice, contact your Ortho2 Regional Manager today at 800.678.4644 or sales@ortho2.com.

Help Us Help You

Please be prepared to provide your customer number, practice name, and office location when you call our support teams for assistance. You can find your customer number in Edge Cloud by clicking File > About. If you use ViewPoint, you will find your customer number by clicking the Help menu and choosing About. Please be sure to provide this information—and repeat your phone number—when leaving a phone message requesting support.

Service Excellence



We invite you to recognize Ortho2 employees by submitting an Extra Mile form. The form is available online from the Contact Us page of our website. Our goal is to uphold our tradition of excellence in customer service, and with our Extra Mile program, you can let our employees know when you appreciate their extra effort. We encourage you to submit an Extra Mile form whenever an Ortho2 employee goes the extra mile for you. The recognition is valued by the recipient and is acknowledged by our management team. We continue to look for better ways to serve you. Thank you for helping us recognize excellence.

Contact Support

By Phone: 800.346.4504

By Email: ortho2support@ortho2.com

And Don't Forget Our Website:
support.ortho2.com

Available 7:00 A.M. – 7:00 P.M. Central Time, Monday – Friday

Response time is usually the same day or at most within 24 hours.

Our website gives you 24/7 access to our knowledge base, FAQs, white papers, visual help videos, and more.

Celebrating Ortho2 Anniversaries

Congratulations to these Ortho2 team members who celebrated anniversaries during the second quarter of 2026.

Thirty-Six Years

Ken Hoffmeier
Craig Scholz

Thirty-Four Years

Kim Barker

Thirty-One Years

Clarence Bryan

Twenty-Five Years

Ron Benifiel
Cathie Morton

Twenty-Four Years

Barb Williams

Twenty-Two Years

Micky Augustin

Twenty Years

Lindsey Spieker

Fifteen Years

Sean Gildersleeve
Michelle Haupt
Jess Huennekens

Fourteen Years

Elizabeth Nordeen

Twelve Years

Michael Lasley
Gabrielle Schaaf

Ten Years

Brooke Hawke

Nine Years

Joe Skluzacek

Eight Years

Isaiah Austin
Sam Rubenstein

Six Years

Larry St. John

Five Years

Nicole Cook

Four Years

John Diercks
Amanda Moore

Three Years

Aaron Sader

Two Years

Charla Webb



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ORTHO2
EMPOWERING PRACTICES
Newsletter

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