

Dentistry in Michigan

3,125 Dentists in State

27 Supply Houses

352 Registered Dental Hygienists

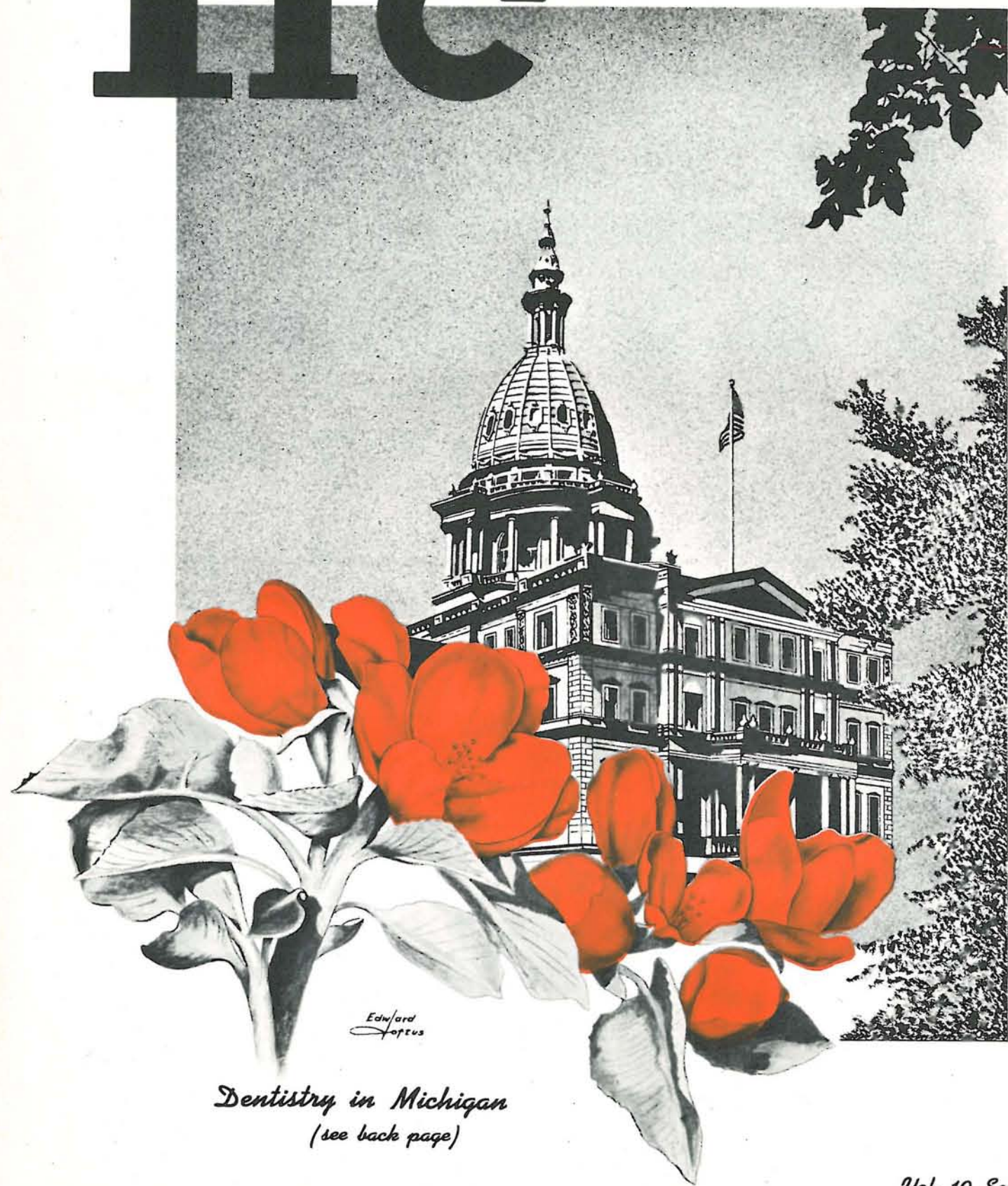
283 Dental Laboratories

2 Accredited Colleges
School of Dentistry—University of Detroit
School of Dentistry—University of Michigan

Symbol of the Wolverine State . . . the Apple Blossom

Tic

February 1951 25c



Edward Jopeus

Dentistry in Michigan
(see back page)

How to Handle the Appointment-Breaker

By C. COLBURN HARDY

FEW THINGS are more irritating—and costly—than the patient who fails to keep his appointment. The records of one county dental society show that the appointment-breakers make up one of every six patients—about 15 per cent. Here are some ideas which have been used to cut this total to less than 5 per cent in the offices where the program was conscientiously carried out.

The first attempts to remedy the situation were verbal. The dentist would say, "All right; I'll put you down for Wednesday at 4 p.m. But please let me know if, for any reason, you can't come. I'm reserving that time exclusively for you."

That little admonition worked fairly well. While not offensive, it did prick the consciences of those who were careless about appointments. One dentist added this phrase for more difficult cases: "I have another patient who generally wants that hour, but as you have asked for it first, I'll have to put him off." Another dentist found this approach successful: "I usually go to the clinic on Wednesday afternoons, but if that's the only convenient time for you, I'll see you then."

This brought the no-show ratio down to under 10 per cent, still high enough to be troublesome. One dentist then had his printer run off some small, inexpensive appointment cards. They read: "Mr. has an appointment with Dr. on day at (a.m. or p.m.)." Then followed the office address and telephone number with, in bold face italics: "Please telephone at least 24 hours in advance if unable to keep this appointment."

If the next appointment was made in the office, the dentist took an extra minute to fill out this card personally. If the appointment was made by telephone, the card was mailed to the patient. This had a double value: it made certain that the office had the correct home address, and the mailed card served both as a reminder and a confirmation.

This idea worked best of all. It cut delinquencies almost in half. And the cards indicated to

the patient that his dentist took his appointment schedule seriously.

One dentist carried this a step further. He added a small stub, attached to the appointment card. On this stub was space for the name of the patient, the date and time of the appointment, and symbols to show whether the appointment was kept, postponed, broken, or canceled. Then, when the card was made out, the stub was torn off and filed.

The stub "worked wonders." During the first week, one patient telegraphed from a city one hundred miles away. Later he explained, "I remembered how you filled out that stub and filed it in the box. I figured that you really meant it when you said that you had reserved that time exclusively for me. That made me want to be just as businesslike about the cancellation."

In talking over these ideas, someone always suggests that habitual offenders be charged for the broken, uncanceled appointments. But this has dangers of course; it would probably create ill-will and, more to the point, the fee would be difficult, if not impossible, to collect.

Actually, if the patient fails to keep his appointment, there is little the dentist can do. Often, however, the patient will call, somewhat sheepishly, for another appointment. When he does, it is always possible to say something like this: "We did have an appointment two weeks ago. I kept that time open for you. This time, won't you be sure to let me know if you can't come?"

Of course, it sometimes happens that the patient has stopped coming because he is not satisfied and was uneasy about saying so. Even if his reasons hurt your ego, it is usually worth knowing, and noting.

There's no way to assure 100 per cent appointments, but these suggestions have proven successful in reducing the number of appointment-breakers from one out of six to less than one out of thirty. Like most effective programs, they require a little planning and a lot of persistence.

TIC

for Dentists,
Dental Assistants
and Dental Hygienists

Published monthly by TICONIUM
413 North Pearl St., Albany 1, N. Y.

Annual Subscription, \$2.50
Editor, JOSEPH STRACK

February 1951 — Vol. X, No. 2

I FAVOR FITTER FEES

Every dentist will want to read
this hard-hitting article 1

DIANETICS DOES IT, DOCTOR

A dentist looks at the new mental-
hygiene philosophy and reports
some startling impressions 4

DENTISTRY IN THE PRESS

Beauties and a chimpanzee, a
baby, a G.I. from Korea, a
trophy, and a "new dental tool"
are reported by the newspapers 6

Rx FOR LIVING

"Thousands of New York City
children wouldn't miss a lecture
on oral hygiene for ice cream, a
baseball game, or the movies."
The story behind this strange
phenomenon is magic — and the
magician is a dentist 8

MAKE YOUR TIME MORE PRODUCTIVE

Six procedures through which you
can increase your income 12

THE WAY I SEE IT

A dental assistant interprets the
significance of her job 14

HOW TO HANDLE THE APPOINTMENT-BREAKER

A method that reduced the per-
centage of "breakers" from 15
to 5 per cent 16

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Printed in U.S.A. by
New England Printing and
Lithographing Company, Inc.

Cover, Edward Loftus

I Favor Fitter Fees

By C. W. GARLEB, D.D.S.

LET'S HANG Dental Fees out on the line for another airing. After all, we are in this profession not only to make people healthier, happier and "easier to look at," but to make a living for ourselves, too — without breaking our fool necks to do it.

Here are some highlights on the subject that will interest many dentists, we hope. But we shall go back only forty years, for it was since then that most of the Big Stuff in dentistry budded and grew.

Achievements of Dentists

For example, inlays, conductive anesthesia, dental X-rays, and good removable bridges were not being used extensively in those days. Plastic dentures and porcelain jacket crowns were created later, and after that plastic teeth and plastic crowns and the new resin base materials which are processed under pressure. Then came sodium fluoride treatments and the fluorination of drinking water for reducing decay in children's teeth. And now plastic fillings. Other improvements along the way were made in cements, silicates, instruments, techniques, and so on.

Now the question arises, are our fees adequate to match all of these important advancements and improvements? Before answering this query, let us comment further.

Technician, Artist, Diplomat, Sculptor

In these times a good dentist is a skilled technician, a fine artist, a diplomat, and somewhat of a sculptor. A photographer can produce a portrait and touch it up to make the subject look handsomer in the picture than in real life. A good dentist can do much better. He can "lift" a homely, snaggle-toothed, wrinkly, old face to make the patient look a charming forty-five years of age instead of fifty-five, and the improvement in appearance will be marvellous, "in person," and not painted on.

It is amazing, almost unbelievable, what changes for the better can be achieved by good prosthodontia, mouth surgery, and other phases of dentistry.

Forty years ago dentists were artists in lesser measure than today. The ugly, white, unnatural-looking teeth set in vulcanite, like straight rows of corn on the ear, made their wearers look like grinning skeletons. We see some of these relics even today. It was easy to set teeth inartistically in even rows like tombstones in a soldiers' cemetery. Dentists knew little or nothing of duplications. Artistic and anatomical arrangements and various hues to become each patient were seldom bothered with. Then, unbecoming white teeth were usually provided for all ages. Today, using modern natural hues and the correct arrangements of the proper teeth to suit each individual, dentists can actually improve greatly on Mother Nature.

Praise, Applause, and — Fees

Young dentists, and all dentists who have kept pace with dentistry's progress for the past forty years, deserve vastly more praise and

applause from the public than they are getting. And the fees we get do not make sense. For example, in 1941 the dog and veterinary bill of the American people was twenty million dollars more than its dental bill. Thus, for that year anyway, we can truthfully say that Dental Fees went to the dogs.

The dentist who is graduated today was not admitted to dental school on soap wrappers. He needed a four-year high school diploma to become a pre-dental student, which required an additional two years, and then four more years of study and training before he earned his D.D.S. During these hectic, expansive, ten years, his parents often had to scratch like a spoiled hen to keep him in college. And that's not all. After that he had to "set on the nest" for several more years to "hatch enough business" to pay his debts and to keep him out of the red.

It requires more years of study to become a dentist than it does to become President of the United States.

Are dentists receiving fair pay for this special knowledge and service?

No answer yet. Why, we're only warming up. Not "singing the blues," just umpiring the game.

Work Without Pay

Dentists render services for which they are never paid—charity, credit, makeovers. They rarely get time-and-a-half or double-time for working after five, or on Saturday afternoons, or Sundays, or on emergency cases after midnight. They do not get two weeks off with pay, nor are they paid whenever illness besets them, as many other workers are. Dentists are never paid for stalling. Dental conventions which they attend for professional improvement, study club activities, and post-graduate work cost them plenty.

They are supposed to donate liberally to churches and other charities, and do; but they cannot afford it, because their fees are too low. Yet they cannot afford not to do so, because the money usually comes back to them. Call it advertising, public relations, whatever you will. Dentists, and their families, are expected to wear more expensive clothes than the "run-'o-the-mill," for they are professional people.

And they should be financially able to pay a dental nurse a satisfactory salary so that she can afford to dress neatly and to smile pleasantly, for she represents a professional man (or woman).

"Loads of Responsibility"

On top of that, a great deal of precision work



is involved in dentistry, which is arduous and requires more than average talent and concentration. In this category we place the difficult removal of some impactions, root canal technique, fitting good inlay abutments to bridges to stay put, and many others. Much skill is necessary to construct those intricate metal appliances with many clasps, rests, grooves, and fittings that look like water spiders and fit like magic.

Artificial dentures call for science and art in selecting the proper sizes, hues, and shapes of teeth and in arranging the set-ups to match each type of person. And it takes nice selecting to harmonize the natural with artificial teeth, whether on partials, bridges, or single teeth.

Patience and diplomacy are essential to do dentistry for some children; for physical and mental wrecks; cry babies, young and old; and the problem mother who insists on coming into the operatory with her Freddie to "see that he is treated right," is always a tough, embarrassing assignment. It is only because we belong to a determined, level-headed group that more of us do not "crack" under such nerve-exhausting strains.

We work on living human beings. We must not slip, ever. We cannot split a board, so to speak, and throw it aside for another; or untwist a bolt; or drop more mortar on the ground than goes between the brick; or get sore and beat the daylight out of a pig that has broken out of its pen and does not choose to go back in. Dentists' hands carry loads of responsibility and must be under complete, intelligent control at all times.

any other dental office, yet I had more offers for work than I could possibly hope to fill and nothing was said about a probationership. I accepted one of them, received a very satisfactory salary, and was placed on a commission basis, at my employer's suggestion, within two months. I remained with him for the duration and then returned to my former boss, where I still am and probably will remain until I am eligible for social security—or he for another war, God forbid. And we aren't an isolated case, as most of my readers will agree.

Maybe I do have a career that is euphemistic. Golly, I never gave that much thought, but I'd certainly like to know of another that is more challenging! As far as something more creditable goes, my friends call me before they call in the family physician. So maybe they are hoping to save five bucks; I still couldn't ask for anything more creditable! As for being financially secure—who is? My doctor doesn't even have social security to look forward to, and certainly no assurance that his hands, not to mention his legs and back, are going to hold out until he is financially secure. Of course, maybe someone will discover that chickens can be raised on that desert land he's invested a thousand bucks in, or his few shares of Hollywood Park (if it's ever rebuilt) will pay dividends like Santa Anita someday; but until that time we are both in the same boat.

My advice to ex-dental assistants who would like to get back into this deplorable profession which I love, or to any girl who might be contemplating a start, is this:

First of all find the type of employer you can respect even more than yourself, and then start working on yourself until you gain a similar respect from him. You'll know when that day comes. He'll look at you and say, "What would you do if you were in my place?", or he'll proudly introduce you to some colleague as "my right arm."

Approach to the Job

To get there takes something like this. Learn what the accepted code of ethics is, memorize it before you memorize the names of the instruments in the cabinet drawers, and then never forget it. If memorizing doesn't come easily to you, then a simple slogan like "Keep your mouth shut at the right time" isn't too hard to remember. Inspire your doctor's confidence in his selection of a glorified office maid, hostess, social secretary or whatever else we might be called, by being in good taste always and by making him

proud of you. Find out what he is talking about, so you can talk intelligently with him. Nothing will please him more than your interest in the technical side of dentistry. If you are one of those persons who hate to ask questions, his books are always there. Think of his office as your own, conservatively of course. After all, the function of his practice is your bread and butter and should be your pride and joy. You will find that he is just as generous with his praise as he is with his criticism. If you have an axe to grind, grind it with him, not with one of the girls from another office—or by raking him over the coals in a dental publication. Surely he deserves better than that! Maybe he has a few complaints of his own, and between the two of you a good helpful debate will ensue.

And if the day ever comes when you can honestly feel that you should be recognized as his professional counterpart, or that you know as much, don't spend the rest of your life brooding about it. Go to school for six years, get your D.D.S. degree, and then sit back and starve for the next ten years the way he did.

Personally, I think I am a lot luckier than my boss. My beginning was easier. I knew what to expect—he still doesn't. And besides, look at what he's given me. Half of my life was spent in searching for things to place upon pedestals and the other half in trying to hold them up there until I came here where I am now. It's just about the only thing I've ever found that stays there without my help. To me that's more important than anything else.



The Way I See It

By MARGARET ANDERSON, D.A.

NOT SO long ago I picked up a dental publication and read an article written by a very bitter ex-dental assistant who lashed out at dentists for failing to appreciate the true worth of the girls they have employed. The writer stated that there is a great shortage of desirable dental assistants because there is no incentive for any girl to want to become associated with a profession where the term career is only euphemistic, where there is no future save that of constant probationership, no challenge, no credit, no security and, finally, no recognition. After reading the article I couldn't help but hope that she has become one of the factory employees whose work-a-day life she considers to be so much more glamorous than that of a D.A. I hope she is happy.

This is a common tale; one which I have heard often at conventions, at meetings, and in coffee shops. Why is it that the disgruntled are always heard from and never the satisfied? And why don't the disgruntled spend the time they devote to grumbling in bettering themselves and stop expecting their employers to do for them what they, apparently, can't do for themselves?

Dignity of the Job

I have been a dental assistant for almost eleven years, and the profession's sole attraction for me has been the one word *Dignity*. My employer was a busy one who, though more than helpful in teaching me the fundamentals of my duties, did not have the time to teach me the finer points of assisting and other things one must know. My inner sense of responsibility and quest for knowledge taught me that and was added to by the numerous text books lying around the office begging to be taken home and poured over.

I didn't promise myself that I would become an ace assistant if my doctor would make me one; I promised myself that I would become an ace assistant because *that* was the goal I had set for myself.

Loyalty to the Job

I didn't cast my eyes about at the same time for a job which might be considered "softer," or

better paying, or with more advantages; not even during the war, when waitresses earned something like one hundred dollars a week and tired looking girls, with overdeveloped biceps and insides jarred loose, cashed in defense-plant checks which left me gasping. I wanted to become a dental assistant because *that* was the career I chose. It's not always an easy one, and my advice to girls who are seeking a short rest period in the middle of the morning or afternoon, or an uninterrupted lunch hour, or a leisurely stroll to the five-fifteen bus every evening, is to stay away from us! We know no such thing as an even schedule.

We have a dental assistants' association in Los Angeles. I am not a member simply because I have another avocation outside the office which takes up all of my spare time. But I understand that it is recognized and greatly admired by the A.D.A. At a recent annual meeting of the Southern California State Dental Association it was the D.A.A.'s clinics which drew the biggest crowds and the most comments. The comments were most complimentary and made me wish to heaven that I had more time!

If there is a shortage of assistants here I am not aware of it. On an average of twice a week I pick up the telephone to hear a feminine voice on the other end inquire, "Are you in need of an assistant?" I whisper, "No," and hurry into the lab to clean out that drawer I meant to get to last week. Every month or so we receive a bulletin from a registry for D.A.'s. After reading it over, I always wonder why it is that another girl can learn more in two years than I've been able to learn in ten; and I wonder who listed the qualifications, the registrar or the assistants.

I have never heard of any girl apprenticing herself for any great length of time. Out here it seems that if they work one week in a dental office or laboratory, or just "sit" while both the doctor and the assistant are on vacation, they know as much as the dentist or the truly experienced girl.

Rewards of the Job

My doctor went into the service after putting up with me for five years. I had never worked in

Trials and Tribulations

All of our patients are not angels. Some of them can be exceedingly annoying. For example, there are those who purse their lips and expect us to do good dentistry through a little hole; those who keep their hands cocked, ready to grab our instruments or our hands at any instant; those who want guarantees: those who 'phone to ask what we charge to yank one; those who know more about their teeth than we do and insist on telling us how their teeth differ from other people's: those who "don't like that grinding" (which is most of our patients); those who say "I can't wear them teeth," when they mean they don't want to learn; those who refer to our operatories as "torture chambers" and think it's funny; and those — well, you know many more.

It is no wonder that dental students and dentists drop from the ranks by the thousands every year. Dentistry is not easy. People want to be paid for what they deliver, and dentists are no exception. We are entitled to more pay for the responsibilities involved and for the worries and the patience and the near miracles patients expect us to perform and which we do perform. Dentistry holds a poor financial future for value received, therefore many practitioners enter other fields.

If I had not always liked dentistry so much, I would have dropped out myself thirty-five years ago. But I like it better than farming, teaching school, selling hardware and lumber, factory work, waiting on tables, cooking, working in a general store, or hiring out — all of which I have done. I like dentistry in spite of the meager remuneration — and it is meager, considering the technical services rendered and all the other "dental calisthenics" (I hope you know what I mean) necessary to put our finished work into the human mouth ready for use.

And if any of us have qualms about charging the so-called poor higher fees for dentistry, we need a trip to Las Vegas, or Reno, to see how the "poor" make the dollars fly there. As we know, billions of dollars are wasted every year by the general public. But thank heaven that every dentist has at least an occasional "poor" patient with sufficient will power to save enough money to have his teeth repaired and enough horse sense to put dentistry before unnecessary expenditures and sometimes even before other necessary purchases.

Low or average dental fees are never an in-

centive to do the best work. It is reasonable to assume that 90 per cent of all dentistry would be better if it were better paid for.

I have pointed out why dental fees should be boosted. But there should be no exorbitant fees. Low fees are a menace and unfair to dentists, unless they are for deserving charity.

But there is a problem we will have to face before we raise our fees. We must go on a needed knowledge-dispensing spree, which must stay a nose ahead of dental fees. This spree must convince the public that dentistry is vitally necessary to improve health, appearance, happiness, comfort, morale, whatnot.

Since most of our patients are unwilling to admit that dental fees should be higher, and will make little or no effort to understand why, this task can be accomplished only if each of us does his part.

Meanwhile, though, we must remember that Socialized Medicine is still an "un-dead" snake. A reptile, I was told when I was a kid on the farm, would not actually die until the sun went down. And the sun has not gone down yet on Socialized Medicine. So let's go easy, boys. But keep going. UP!



Dianetics Does It, Doctor

By JOSEPH MURRAY, D.D.S.

IF HUBBARD can do it, why can't you? It's all a matter of engrams. So, the next time a patient walks into your office with a belligerent air and remarks, "Look how thin you made this clasp on my bridge, Doctor! The one that broke was much heavier, and it was gold, too!"—you can take him back on the time track and "bleed" him dry of his persecution complex.

In case this sounds like Greek—it is. For the word *dianetics* is derived from the Greek word *dianoia*, meaning thought.

It all began when a thirty-nine-year-old civil engineer, mathematician, philosopher, and science-fiction writer by the name of L. Ron Hubbard decided that people could obtain maximum mental health by going back to various periods of their lives and re-experiencing the gremlin that caused their grief.

It is amazing how some patients can return to the moment of birth, and in many instances to their pre-natal state, "run off," reduce, or erase the source of aberration. At least that's what The Hubbard Dianetic Research Foundation claims.

How It Works

The individual undergoing this process sits or lies in a quiet room accompanied by a friend or professional therapist who acts as auditor. While the patient goes into a reverie or day-dream, the auditor directs the attention of the patient to the patient's self and then begins to place him in various periods of his life merely by telling the patient to go there rather than to remember.

All therapy is done, not by remembering or associating, but by travel on the time track, which begins with life and ends with death.

The first engram of all—the "basic-basic"—is the most important of all, and must be gotten rid of by anyone hoping to become a "clear," an individual with optimum mental health. Those undergoing therapy are called "pre-clears." A "re-release" is a person freed from his major anxieties and illnesses.

Dianetics in Dentistry

Recently, I read of a man who bit the finger of his dentist when the latter was foolhardy

enough to keep it in the patient's mouth while quoting a fee. Now, if the patient were properly audited, the dentist would have discovered that the former was weaned too early—and therefore had need to bite the first object that was placed into his mouth.

Let's take the patient who is always in a hurry; who cannot wait even a few minutes before being ushered into the operating room. The chances are that Dianetics will disclose he couldn't wait to be born. Close questioning will probably bring out the fact that he was delivered in a taxicab by a policeman.

And how about the chronic complainer, the one who is always saying, "That filling you put in three years ago, fell out, Doctor"? Most likely the fellow was a celiac baby—and couldn't hold things nohow. Besides, one can get "fed up" even on banana splits.

And for the patient who drops in and says, "This isn't a regular visit, Doctor; just take a look," your best answer is: "I'm looking, Mr. Brown, but I can't see a thing. Perhaps you had an overdose of engrams with your coffee for breakfast."



"I WANT THEM ALL SHARPENED."

Keep Informed

Fourth, by the constant improvement of his operating skill and by keeping abreast of the latest techniques which may speed up his operating time. One dentist does this by setting aside one night a week for the purpose of study—the reading of various books and journals on the latest dental techniques. He also makes it a point to attend the state convention each year so that he may observe the many clinics presented there.

Avoid Free Dentistry

Fifth, by refusing to make free, superficial examinations. Most of us have been guilty of this at one time or another. Here's how it usually happens: The patient drops in and asks you to check his teeth. You do, and find nothing wrong, not even the need for a "prophy." When you tell the patient this he thanks you and walks out—and chances are good that you did not charge him. Yet you have used up ten or fifteen minutes of your time. Your assistant must go to the books and list the time as nonproductive. And what of the patient? You and I know that, through this superficial examination, he really has not benefited. X-rays should have been made, other procedures followed which were necessary to give a complete, thorough examination, and a charge made for these services. In this manner both the patient and dentist benefit.

In addition to free examinations, some dentists give free dentistry in other ways, such as denture adjustments, the polishing of fillings, and post-operative treatments, to name a few. A dentist remarked to me that a denture patient had returned twelve times for free adjustments, and if he had to spend more time on her case he would lose money on it. It seems that every time she came she took up almost thirty minutes of his time. Now, why should he be expected to give her this time? His mistake was in not preparing her for the adjustments in advance, telling her that after the third adjustment a fee would have to be charged for each visit. Then she probably would not have returned so often. I believe that the dentist should also receive a fee for post-operative treatments and for the polishing of amalgams and other fillings, as they use up his time. Otherwise that time will have to be listed in his books as nonproductive.

Educate the Patient

Sixth, by educating the patient to dentistry.

The patient is taught the value of dentistry, learns to value his teeth, and is more cooperative in caring for them. Regular visits mean less trouble and expense for the patient, and the teeth are more easily cared for *in less time* by the dentist. For instance, several years ago a friend of mine started practice in a small town which formerly had no dentist. It seemed then as though every patient who came to him had cavities in every tooth because the teeth had been neglected, and he spent a lot of time getting each mouth in shape. But once this was done, the problem of caring for their teeth became less. Because the teeth were now in good shape the time required to treat each patient was also less. Through constant effort he made his patients dental-conscious, convinced them of the necessity of caring regularly for their teeth.

The cost of running an office is constant, and that cost today is high. Therefore, we must utilize our time while in the office in the hope of combating that constant cost. By applying the six foregoing measures, I am certain that you can make your time more productive.

Children's Dental Health Day



The third annual National Children's Dental Health Day will be observed on Monday, February 5, under the sponsorship of the American Dental Association and its state and district dental societies.

Parents, teachers, and civic leaders will join the nation's 75,000 dentists in staging programs directed toward focusing attention on the need for improved dental health for all children.

Make Your Time More Productive

By WILLIAM POINDEXTER, D.D.S.

WHAT is the meaning of productive time to you in your office, Doctor? Many of us believe it to be the time during which we are actually working on a patient. And this is true — only the definition doesn't go far enough.

Picture, if you will, a dentist completing a porcelain filling. He has mixed the porcelain, packed it into the cavity, and is now holding the celluloid strip in place while the filling material sets. He holds this strip for approximately ten minutes before finally removing it. What about that ten minutes? Was it productive time? Yes, if we apply the foregoing definition. But the negative is true if we extend the definition to read "Time during which we are actually working on a patient *and during which we are making a fee.*" Couldn't the assistant have held the strip while the filling material set, thus enabling the dentist to begin work on another patient in the next chair and eliminating ten minutes of "dead" time? There are many such instances each day where the dentist does nonproductive work, not realizing that he is losing income that he should be getting.

Use Good Equipment, Materials

By applying the following measures the dentist can make his time more productive. First, by using good equipment and materials. Much time is saved by having the proper instruments conveniently located so that no time is lost by the dentist or assistant in reaching them. Speaking of equipment, the trend today is toward two-chair and three-chair offices. Time is conserved, more patients are accommodated through using such arrangements. One dentist with a one-chair office told me that he makes quite a few dentures in his practice, but he is dissatisfied because so much of his time is taken up with denture adjustments for which he receives no fee. His patients wanting other work are kept waiting in the reception room. By adding another chair this dentist could eliminate some of this nonproductive time. By adding a third, employing a hygienist who could take care of some of the patients, he could eliminate more.

Employ Efficient Assistant

Second, by employing efficient assistants. A

smooth-working assistant may save the dentist a great deal of time each day not only at the chair but also in routine office matters such as answering the telephone, making appointments, and keeping books.

Regular Schedules

Third, by his appreciation of the value of time. He should make it a habit to be on time at the office each day, so that his patients aren't made to wait for him. He should be on a regular schedule, taking off the same afternoon each week to avoid losing time that occurs through mixing up appointments when the dentist does otherwise. He should try to stay in good health, of course, and get plenty of rest each night during the week so that he can work efficiently during the day. If he is tired or does not feel well, he will find himself stalling along with his work and dreading to see the next patient. Time lost in this manner is nonproductive. Some of us waste time seeing salesmen while patients are kept waiting. Sometimes this is necessary, but most of the time the dentist can leave a list of needed supplies with his assistant to be given to the salesman, who then will not have to interrupt the dentist at his work.



"PERHAPS, MR. BOTTOP, WE CAN ARRANGE YOUR NEXT APPOINTMENT TO COINCIDE WITH THE NEXT ISSUE!"

Now, when the unhappy patient comes in bearing those beautiful dentures wrapped in waxed paper, you can always say, "Sit down and relax, Mr. Smith. Go back to the day you were born. You chewed on your gums then, didn't you? You're chewing on your gums now. That's a vicious engram that makes you afraid to change."

Finally, we come to Mrs. Susy Q, the helpful hypochondriac, who blushes as she gushes, "Do you think it's the menopause that makes my mouth burn, Doctor?" You make her comfortable in the chair, then say, "Relax, Mrs. Q! Close your eyes and go back to the age of five!" "Ouch!" she yells as she remembers how her older brother had been curious to know if blood was thicker than water and jabbed her with mother's hatpin.

Tears begin to well in her eyes and, by now, Mrs. Q thinks it may be her hayfever.

"Gosh, I forgot to take that pyribenzamine," she cries, as she dashes out of the office.

\$25 an Hour

According to Hubbard, for \$25 an hour the miraculous "science" of Dianetics works wonders on the patient's morale, lightens his worries, and, perhaps, his bankroll.

For \$25 an hour any dentist would be willing to put a patient into a reverie. Some practitioners would probably go into a coma for lots less. But, no matter how "clear" the patient may become, the doctor will invariably wind up in the doghouse.

Dianetics Vocabulary

ANALYTICAL MIND: The conscious, logical mind.

AUDITOR: Listener and computer who helps the pre-release or the pre-clear dig his engrams out of the reactive mind and switch them to the analytical mind, where they are stored as harmless memories.

BASIC: The first engram in a chain of engrams.

BASIC-BASIC: The daddy of all engrams; the first engram at conception.

CLEAR: (noun) What every dianetics fan hopes to be — an individual free of all engrams, virile, vital, and va-va-Voom!

DIANETICS: L. Ron Hubbard's creation; new "science" of the mind.

ENGRAM: Nasty little gremlin of the reactive mind; pain or mental stress, sustained while the analytical mind is asleep, and recorded in the reactive mind. Engrams are recorded from the moment of conception and pile up before and after birth; root of all mental and psychosomatic ills.

FILE CLERK: Mental monitor which hands up engrams for massacre.

PRE-CLEAR: A dianetic patient.

PRE-RELEASE: Also a dianetic patient.

REACTIVE MIND: Old-style subconscious, but always awake to store engrams.

RELEASE: (noun) An individual whom dianetics has raised to a 1951 normal by established standards.

REVERIE: Soothed state into which a patient is

put by his auditor; not to be confused with hypnosis, since the patient remains fully conscious.

RUN AN AUDIT: Have a go at fishing up engrams from a pre-clear's or a pre-release's reactive mind.

SOMATIC: A pain, often in the neck, caused by an engram.

SONIC: Recall a past sound by hearing with the mind's ear.

TIME TRACK: The span of an individual's experiences.



"I HOPE YOU'RE NOT THE TYPE THAT BEARS A GRUDGE."

Dentistry in

Recently Dentistry has been in the public press via beauties and a chimpanzee, a trophy winner, a G.I. from Korea, a baby born with a tooth, and the air-abrasive technique.

Wide World Photos, under the headline "New Dental Tool," released the picture below with this text:

A new method of preparing tooth cavities for filling has been invented by Dr. R. B. Black, of Corpus Christi, Texas. This photograph was made at Northwestern University's Dental School, Chicago Ill., where it was demonstrated. Using an air-propelled abrasive, the technique is claimed to reduce the need for pressure against the patient's tooth. It also reduces vibration, noise, and heat, according to the demonstrators. Dr. Black developed the new dental tool in his office laboratory. The air-cutter works on the principle of air-driven abrasive. But its



tiny—.018-inch opening—tungsten carbide nozzle permits the dentist to cut away on a tooth repair project with less annoyance to the patient. Here Dr. John J. Lenburg (left)



After the show is over, the audience examines the props

Ever since he was a youngster of nine, he has been interested in magic. At fourteen he was staging magic shows in children's clubs and in public schools. When he was attending the College of Dental and Oral Surgery in New York, from which institution he received his D.D.S. in 1917, his professors held onto their watches whenever young Pressman came within three feet of them.

In World Wars I and II he was busy entertaining servicemen, especially the wounded in military and naval hospitals. He has appeared before numerous other groups, primarily charitable agencies. Now he devotes every Friday, his "day off," to giving his unique oral hygiene lectures to children.

Dr. Pressman is president of the Knights of Magic, an association of amateur and professional magicians. He is not only an accomplished performer but an originator of many magical effects, the ultimate test of the first-rate magician.

Last spring he presented his magic health show at the New York State Dental Society's annual meeting, and gave a table clinic on the use of magic in a dental office.

"I certainly don't advocate turning dental offices into theatres to amuse child-patients," he says. "But there are many devices, tricks and stunts that any dentist could learn to soften the recalcitrant child, ease the tense child, and interest the average child. And all of us, at one time or another, have found ourselves in situations with children in which nothing but magic could help! Seriously, many dentists with large children's practices and many dentists interested in developing or maintaining their children's

practice believe that such simple and harmless magical effects can prove helpful. A number of dentists who have tried it, swear by it. I happen to be one of them."

The Pressman Family

The Pressman family tree seems to be loaded with talent. His father, Meichel Pressman, has performed some magic of his own. At the age of eighty-four, with only eight months' experience in painting, the elder Pressman has had a one-man art exhibit—and a successful one at that. Today he is a lion among the lions in the Woodstock, New York, art colony. Dr. Pressman's son Gabriel is a reporter and staff writer on the *New York World Telegram and Sun*, and a younger son is a medical student.

Mrs. Pressman is his indefatigable assistant in all of his magic shows, whether for the small fry or for big-time audiences. It would be a simple matter for the Pressmans to step over the line that separates the amateur from the professional, except:

"This world of magic is a world of release, of escape, for me. Yet, not complete escape. No man really seeks total escape into unreality. That, of course, is pathological. But achieving temporary freedom from the burdens of the daily practice of dentistry by taking on the lighter task of teaching good dental health through such an original means as legerdemain—this is, to me, an ideal way of combining one's vocation and avocation in a worthwhile piece of holidaying. I get as much fun out of it, believe me, as any kid in the audience. That, I think, is the biggest piece of magic of all."

Dr. Pressman preparing for a show





A *New York Times*' close-up of the master of magic and two of his enthusiastic, unrehearsed, little stooges

Dr. Pressman quickly gets across his message on the importance of milk in the diet for sound teeth, refers to the siphoning act, and concludes: "But it's so much easier just to drink the milk."

"Stop Eating So Much Candy"

Another favorite act features Candy the Sugar Kid, a papier maché creation—the horrible example, with decayed, blackened teeth. The theme is "Avoid Eating Too Much Candy." While pouring sugar into the Kid's mouth, an empty paper bag, Dr. Pressman goes into his "spiel." He ends with the warning: "If Candy the Sugar Kid will not stop eating so much candy, his teeth will decay. They may have to be extracted, and they will come out every night like Grandma's." Dr. Pressman then takes a set of dentures from the empty bag, and places them on a table, where they click and chatter.

Dr. Pressman follows through on another important point: how money can be saved, as well as dental health, by not eating candy. Magically, coins are plucked from the air, from a little boy's hair, from the folds of a little girl's dress—from everywhere.

Brushing Teeth

Then there is Cleo, a fascinating skull wearing a colorful hat and a very toothy smile. Dr. Pressman demonstrates how teeth should be cleaned. He tries an ordinary toothbrush but it is too small for Cleo's piano-like oral cavity. So the dentist suddenly yanks a tremendous toothbrush out of his breast pocket. It is three feet long. With this, he demonstrates good brushing technique.

Introducing an act he calls "Aladdin's Lamp," Dr. Pressman says, "For my final lesson, I want to introduce Aladdin's Lamp to you. When Aladdin rubbed the lamp, the genii appeared and gave Aladdin anything that he wished for. I will now take the lamp apart and show you that all three parts are empty."

He then proceeds to take the lamp apart and to show the empty parts to the audience. "Now I rub the lamp while I make a wish," he continues. "Genii, I wish that the magic which I performed for these bright children will show them how to take care of their teeth and, by doing so, enjoy the magic of good health."

"Meat, Fish and Cheese"

Dr. Pressman then produces frankfurters from the heretofore empty lamp, while the youngsters howl with pleasure. "Genii reminds me that I have forgotten to talk about meat and fish and cheese, which children should have at least once a day," he says. Then he extracts from the lamp a number of white silk handkerchiefs, each of which bears a printed message. Together, these messages recapitulate the lessons developed through the whole magic show. The children read each slogan as it appears, thus summarizing for themselves their new health knowledge.

For his grand finale, Dr. Pressman produces a large handkerchief with a rabbit painted on it. He hands this to his assisting nurse, together with all the other handkerchiefs. She places all the handkerchiefs in a hat. Dr. Pressman shows the children that the hat is empty. When he asks them if they would like to see a real rabbit, they shout affirmatively. Dr. Pressman then produces a carrot. "Wherever there is a carrot, there must be a rabbit," he says. From out of nowhere a rabbit appears, to the tumultuous applause and hysterical delight of the audience. "Here is Bugs Bunny, great-great-grandson of Peter Rabbit, who wishes you all a pleasant good morning and hopes that you enjoyed the show as much as he did," Dr. Pressman concludes.

These are some of the "message stunts." There are a few others. For example, Dr. Pressman has startled more than one small boy—and endowed him with everlasting neighborhood fame—by tapping him on the head and making him disgorge eggs.

Magician at Fourteen

Dr. Pressman has been practicing dentistry for thirty-three years. He has a large children's practice. He understands and loves youngsters. He has eased and relaxed thousands of tense, fearful child-patients with a bit of magic. He used his legerdemain to get across dental-health facts to the individual child. He decided he could do it on a mass-instruction basis as well, and he has.

the Press



Arthilla Sawyer, infant daughter of Mr. and Mrs. Willard L. Sawyer of Binghamton, N. Y., 'shows off' her front tooth. The six-pound baby was born with the tooth. . . . She was two hours old when this picture was taken.

"Hooligan' Visits the Dentist" headlined the beauty-and-beast picture released by *Wide World Photos*. The story accompanying the photograph reads:

When 'Hooligan,' 3-year-old movie actor chimpanzee, had what his owner thought was a toothache, he was taken to Dr. Charles Reagan, Beverly Hills, Calif. dentist, for a full dental treatment and cleaning. With two pretty dental assistants, Jo Ann Dee (left) and Joyce Edgerton to hold his hands, 'Hooligan' didn't seem to mind the drilling, but decided after this to keep his teeth in better condition by brushing them.

and Dr. O. W. Silberhorn work with one of the first test models developed for teaching the technique. Abrasives are stored in containers shown at the top of the unit.

The trophy winner, in a *Pic by Peake*, is Colonel E. M. Wansbrough, O.B.E., M.M., E.D., Director General of Dental Services, Ottawa. He received the award for competition for general proficiency among reserve corpsmen of the Royal Canadian Dental Corps, from Dr. Stephen A. Moore of London, Honorary Lieutenant-Colonel, R.C.D.C.

The bearded man is a Yank getting dental care, the *Associated Press Wirephoto* states. The story accompanying the picture is:

Sgt. Jodie Garrett, Corinth, Miss., one of the American prisoners-of-war liberated by 25th Division at Namwon, gets much-needed dental care from Capt. William Strong, Irvine, Kentucky. Pfc. William Mason (left), Elizabeth, N. J., assists. The happy Yank said after treatment: "Four days ago, if I had developed a toothache, I probably would have had my teeth knocked out."

The baby picture, released under the headline "Look, Ma!," was sent out by *Wide World Photos*. The legend states:





Dr. Pressman and a fan

R for Living

DR. BENJAMIN J. PRESSMAN — MAGICIAN

By JOSEPH GEORGE STRACK

THOUSANDS OF New York City children wouldn't miss a lecture on oral hygiene for ice cream, candy, a baseball game, or the movies. Furthermore, they would go to oral hygiene lectures every day of the week if they could.

The strange phenomenon sounds like magic — and it is. The man responsible for this unusual situation is Dr. Benjamin J. Pressman of New York City. Every Friday he steps out of his professional role of dentist and becomes a prestidigitator, to the delight — and benefit — of clamoring, screaming, howling, laughing and applauding youngsters. Through his sorcery, learning dental facts becomes fun, and dental hygiene is fast becoming one of the favorite subjects in the New York City public school system. A barrel of appreciative letters from his fans, school principals and elementary-grade pupils alike, attest to his mastery of legerdemain and his success as an instructor in dental health.

Instruction and Entertainment

Dr. Pressman has developed a sure-fire act. It integrates instruction and entertainment. It is psychologically and pedagogically sound. He uses magic as a bridge between the child's world of make-believe and the adult world of reality, skillfully using fun to register facts in the child's mind.

Like most magicians, Dr. Pressman has a "spiel," but it is a line of patter that has great pertinence. He usually opens his act with a statement like this:

"First, to bring my message to you, we must start with letters, because messages are made up of letters and words." While he is talking he holds up a folded piece of white paper. As he continues to speak, he tears out bits of the paper. "Let's see now: we need a verb. Yes, and a pronoun. Now we'll tear out a noun. Now an adverb. Here's an indefinite article. And finally another noun. Now let's see what we have for our first message." He then unfolds the paper. The children applaud loudly when they see an attractive square with cut-out lettering which reads: "Take care of your teeth."

He asks his audience to read the message aloud and memorize it. They chant the slogan with great gusto.

The magic dental health show is on. He continues with his second act, entitled "See Your Dentist Twice A Year." He introduces the act by saying, "This is the story of Jack, Jill, and the dentist." He displays a red handkerchief, explaining, "This is a red-headed little boy named Jack." Then he shows a yellow handkerchief, saying, "This is a blond little girl named Jill."

He continues, "Jack had a very bad toothache. It kept him awake all night, but he was afraid to go to the dentist. The next morning he met Jill. She said to him, 'Why don't you go to the dentist? Dentists are kindly people. They try not to hurt you.'"

Dr. Pressman then knots the yellow and red handkerchiefs together and puts them in a glass tumbler. He holds up the tumbler to his audience as he remarks, "This is the doctor's office where Jack and Jill are going, arm in arm. But the dentist isn't there!" He looks around, and admits, "I forgot to bring the dentist along. But I will produce him by magic." Dr. Pressman then takes a piece of white tissue paper. It suddenly bursts into flame. While the wonder-eyed children watch, a white silk handkerchief gradually appears at the magician's fingers. "Here is the dentist, all dressed in white," he announces. Then, pointing to the glass tumbler containing the two knotted handkerchiefs, he says: "I better hurry him along to his office, where Jack is waiting to have his toothache stopped. Here he goes on the magic ether waves."

"Visit Your Dentist"

The white handkerchief disappears. Dr. Pressman then removes the handkerchiefs from the glass, and says: "Children, you will soon see that not only did the dentist make Jack well again, but he also gave them a message to remember." Dr. Pressman holds up the handkerchiefs he took from the tumbler. The white handkerchief is tied between the red one and the yellow one. On the white handkerchief is printed: "Visit Your Dentist Twice A Year."



"While hundreds watched . . ."

Another act emphasizes: "Eat Green Vegetables and Raw Fruits Each Day." Dr. Pressman opens this act by saying, "I want to tell you that vegetables and fruit — particularly green vegetables and raw fruit, are very important for you to eat every day. By eating them you will have healthy teeth and a healthy body. I will now grow some vegetables for you by magic."

Nutrition

He holds up an empty pan for the children to see. Then he pretends to take some air and to place it in the pan. He takes some seeds from his vest pocket. "Now if you will watch the pan closely you will see the vegetables grow," he says. "But in order to keep the seeds warm, I must cover the pan." He holds his hand lightly over the cover, which begins to rise as if the vegetables were actually growing in the pan. Then he removes the cover, and produces the vegetables and fruit, one by one. As he does so, the children call out the names of each, and Dr. Pressman in turn explains their nutritive values.

Drink a Quart of Milk

Dr. Pressman also demonstrates how to get milk into a young milk-hater, in an act whose message is "Drink a Quart of Milk a Day." They are proud and happy little unrehearsed stooges. While his audience screams with excitement, the magician-dentist helps one of the little stooges, the milk-hater, to hold a glassful of milk in the air. The other little stooge grabs one end of a rope which extends from the glassful of milk and holds it to the head of the subject. To the delight of the audience, the milk is apparently siphoned out of the glass into the head of the milk-hater — who is bewildered and uncertain, but game. When the milk has been drained from the glass, the other little stooge is told to hold the end of the rope to an elbow of the subject. The milk is then seemingly funneled out of the elbow, to the amazement of all present, and the obvious relief of the milk-hater.

No photograph ever held more happiness than this New York Times picture of the dentist-magician's magic at work.

