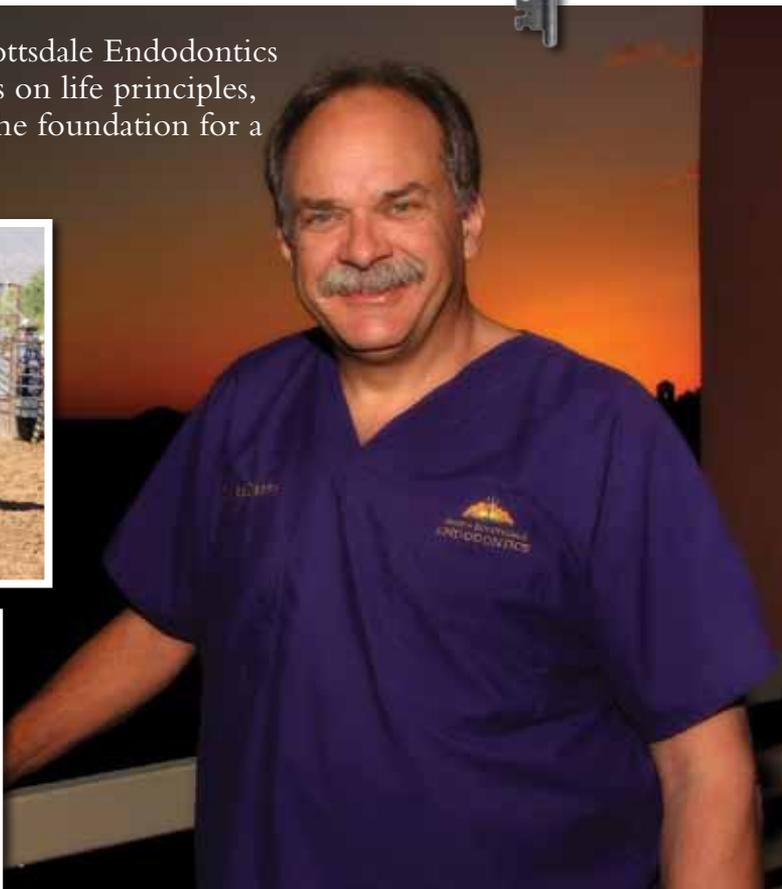


Through the keyhole



Dr. Tom McClammy of North Scottsdale Endodontics & Implantology in Arizona reflects on life principles, pushing the envelope, and laying the foundation for a rewarding and enriching career



What can you tell us about your background?

After graduating from Oregon Health & Science University (OHSU) in 1982, I practiced general restorative dentistry in rural Oregon for 15 years. I was in an area where I had the opportunity to participate in a wide variety of dental procedures.

After realizing that dental school provided only the basic skills for patient dental care, I became somewhat of a CE junkie. Almost by accident, I attended a CE seminar in Santa Barbara given by Dr. Cliff Ruddle of Advanced Endodontics. Cliff lit my fire when he showed me vertical compaction of warm gutta percha. I was hooked! In a very short time, I knew I had found my niche, and I began a love affair with endodontics that continues to this day—and is stronger than ever.

I took a fork in the road that led me to Boston University, and an opportunity to study with Dr. Herbert Schilder, where I graduated under his mentorship in 1999. I am really proud to be a BU alum and a Schilder-trained endodontist.

Is your practice limited to endodontics?

My practice is limited to endodontics and implantology, but I don't think of it as a limitation at all.

As a general dentist, I was surgically placing and restoring implants as far back as 1983. And over the three decades since, I've had to accept the fact that there are a certain number of teeth that just cannot be saved naturally. But I've also learned that the fight is not over with that, and that the next best thing to a natural tooth is a well-placed dental implant.

In fact, we actually save teeth by placing implants. A well-placed implant can strengthen and improve the condition of the

teeth around it, and I strongly believe that endodontists who have the desire and training to place implants should do so, when indicated. We have intimate knowledge of dental anatomy and the dental alveolus, and we are already hyper-focused on precision measurement at the micro level, which is the cornerstone of sound implantology.

How long have you been practicing?

After completing the BU residency program in 1999, I returned to the northwest and started practicing in Bend, Oregon, as an endodontic specialist. Central Oregon is a wonderful place, but the long cold winters left my wife, Christine, and I in search of warmer climates.

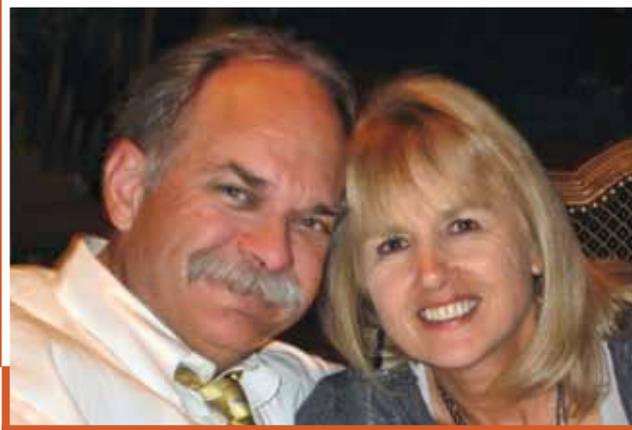
So, always one to go to extremes, in 2004 we sold the Oregon practice and relocated to Scottsdale, Arizona—about as warm a place as you can find!

What systems do you use?

I am a huge advocate of the dental operating microscope, and have been using one since the early 90s.

I was exposed to operatory microscopy early in my career and started actively using the microscope as a general practitioner. I was one of the first general dentists in the country, if not the world, to incorporate it, and I certainly was the first dentist in Oregon.

Magnification and lighting are critically important in almost every area of clinical dentistry; "*The better you can see it, the better you can treat it.*" Currently, I use a Zeiss OMNI PROErgo®, which allows me to do things that I could not do without it. Simply put,



Tom & Christine (soulmates)



Waiting room NSE & I

the PROErgo® makes my eyes smile!

I believe in setting up our treatment rooms to be efficient, comfortable, and ergonomic. ASI (Advanced Systems Integration) has taken all of the “gadgets” that we use and has incorporated them into a delivery system that has a single foot control. This decreases the stress in the operatory environment exponentially. I am on my seventh generation of ASI delivery systems, and as the technology improves, I change with it. The changeover brings both challenges and growth, but ASI listens to my suggestions for improvements and does their best to accommodate my ideas. The fewer micromechanical movements we make during patient treatments, the more efficient we can be. And the more efficient my staff and I are as a team, the more we enjoy our days. And the patients always sense that we love what we do. It makes a difference.

Like many other endodontists worldwide, (22 countries now) I use The Digital Office (TDO), developed by endodontist and innovator Dr. Gary Carr. TDO continues to evolve, and is, without question, the premier endodontic software in the world.

Obviously, there is no such thing as a truly paperless office—none of us are exempt from using the restroom—but TDO certainly helps us save more paper and more trees. Utilizing TDO, patients can self-register online, and referring doctors can go online with a password and check out the status of their referred patients’ treatments. In this age of constant communication, the amount of data TDO is able to organize and share makes it, in one word, vital.

I use nickel-titanium rotary files and many other small hand files and instruments. Dentsply Tulsa Dental Specialties continues to provide the “latest and greatest” innovations, primarily in the area of shaping and disinfection of the root canal system. And more recently, they have embraced implantology in a big way.

I rely on the Aribex Nomad®, a hand-held x-ray device that makes it possible to take radiographs without being restricted to a wall-hanging x-ray unit. It’s as easy to use as holding a hair dryer, with a rechargeable battery and no cord. It makes taking radiographs considerably more efficient for the patient, as well as for the staff.

As soon as I saw 3D imaging, I knew that it would be a big hit with endodontists; I just had no idea how quickly endodontists would embrace it. While I began utilizing Cone Beam Computed Tomography in 2006, by sending our patients to an imaging center, we now have a J. Morita CBCT machine in the office. We use it multiple times daily, in the diagnosis and treatment of both our endodontic and implant patients. Today, I can’t imagine practicing without this important and revealing technology, that allows us to evaluate an area three dimensionally prior to—and oftentimes

even during—treatment.

While CBCT is of incredible, and ever increasing, value in endodontics, it is a no-brainer in the treatment planning and placement of dental implants. After having placed implants for more than 20 years, I would not even consider placing an implant—even for a single tooth—without the benefit of CBCT images. Several years ago, I co-wrote (with Dr. Dale Miles) a chapter in the 10th Edition of *Pathways of the Pulp*, on Cone Beam Imaging for Endodontics. I am currently completing an entire chapter on Clinical Applications of Endodontics in the *Cone Beam CT Color Atlas* by Dr. Miles.

Global Surgical™, who sold me my first dental microscope, also manufactures a surgeon’s stool that I have used since the early 90’s. I am a huge advocate of adjustable armrests, because of their positive effect on posture, arms, shoulders back, elbows—your entire ergonomic life. Lots of dentists suffer from back, neck, and shoulder problems, and I have none of that. I attribute much of that to my posture, and sitting in a comfortable, properly supported surgeon’s chair makes that possible.

Finally—and this may come as a surprise to my wife—I have a love affair with Apple® products. I have three 27-inch Apple cinema display LED monitors hooked up to my Mac Pro on my



Braxy & Tom



Dr. McClammy & team "rocking one out"

desktop. I am a huge proponent of the iPhone®, the iPad®, the Mac Pro® and the MacBook Pro®. Most recently, I put 27 inches iMacs® in my treatment rooms where I view radiographs, CBCT images and communicate with my patients utilizing the TDO software. And I have recently started using the iPad for educating patients about endodontics and implantology. We all know the old adage that "a picture is worth 1,000 words." In endodontics, a picture is worth more like 10,000 words.

I know it seems like I am heavily focused on emerging technologies, and I am, but I want to make it clear that the tools and gadgets that new technologies bring us can help us to do extraordinary things, but they do not take the place of sound principles of clinical practice. If you have a solid foundation in the skills you need to practice successfully, these new technologies can be leveraged to enhance and improve your abilities and also to engage your patients and improve their experience, as well. But they will never take the place of an experienced endodontist with sound judgment and the benefit of training and experience.

What training have you undertaken?

GV Black said, "The professional man has no right to be other than a continuous student."

CE is what has kept me alive and so stimulated in dentistry. After graduating from dental school in 1982, I needed to set additional goals. CE has given me the gift of staying fascinated and enthused about clinical dentistry every day. And my continuing study has introduced me to colleagues that have literally been instrumental in changing the course of my life.

Years ago, an insatiable desire to keep learning led me to Santa Barbara, where I met Cliff Ruddle. After his initial 2-day seminar, I could not wait to return and learn more. At Cliff's retreatment seminar, I made the life-changing look into a dental microscope for the first time. I knew right then that I would find a way to buy a microscope and put it to use in my restorative practice.

It did not take me long after that event to buy my first scope and incorporate it into my general practice. In a short time, I was using it not only for my endodontics, but all of my restorative procedures, as well. I developed the light filter with Global Surgical so that composites would not prematurely polymerize. Every day seemed like a voyage of new discoveries as my staff and I found new ways to do things, and do them better, because we could see better. And all of that stems from that desire to constantly be exposed to new techniques, new technologies, and new ideas.

On the flip-side of that, I've also discovered that one of the most effective ways to learn is to teach. When we came to Arizona, I had a written list of specific goals, and one of them was to begin

teaching. That goal is being realized, as I've had the opportunity to teach endodontics with Cliff Ruddle at the Scottsdale Center for Dentistry. In addition, we have taught courses here at North Scottsdale Endodontics & Implantology for the last 3 years, exclusively to endodontists, on incorporating implants into endodontic practices. I am also teaching endodontics a half day per week at the Arizona School of Dentistry and Oral Health. And, as an educator, I can state one thing unequivocally: I learn more from my students than I do from any other single source I encounter.

Do your patients come from referrals?

My patients all come through referrals, from a wide variety of sources, including both general practitioners and other specialists, as well as referrals from current and former patients.

While most of the patients that we treat are local Arizonans, with travel being what it is these days, we literally treat patients from all around the world. One of the reasons that I wanted to practice in Scottsdale was to make it very easy for patients that travel to get to us.

Who has inspired you?

Dr. Schilder inspired me to strive for excellence in endodontics and life. He left me with thoughts that I still reflect upon daily, as I continue my practice.

Dr. Cliff Ruddle has been a phenomenal inspiration to me, and he continues to motivate me to this day. To me, Cliff is one of the very best teachers of clinical endodontics on the planet. If I can have one-tenth the positive effect that he has had on others, I would consider that part of my life successful.

Dr. Gary Carr has no equal. Gary's energy, enthusiasm and passion for our specialty are both sensational and infectious (perhaps the only example of "infection" that I actually welcome in my practice!). He is brilliant, and has shared with his colleagues numerous innovations that we use every day.

Finally, my father taught me to tell the truth. If you tell the truth, you never have to remember what you said. And one of my dad's favorite lines is "the truth will out." My father inspired me to work hard, and it's in working hard that I have found my most inner peace. I simply love my work!

What is the most satisfying aspect of your practice?

Treating the patient. During a presentation in 1999, Herb Schilder said, "Make yourself the patient, and you will have the right answer." That is how I conduct my practice-- treat patients, get them out of pain, and create a lifelong relationship.

What are you most proud of?

I am extremely proud of my practice and the relationships that have developed from treating patients as friends. I love where I live, I love what I do, and I am thankful every day for the blessing of living in this country of opportunity and freedom. I have a beautiful place to practice, in a beautiful part of the county, and I see the sun and feel its warmth more than 300 days per year. I love it, and it gives me a great deal of pride.

What is unique about your practice?

North Scottsdale Endodontics & Implantology is a unique practice setting, not only because of the services that we provide, but because of how we provide them. I try to instill in my staff the importance of treating each patient the way they would want to be treated if they were, themselves, the patient.

Endodontists need to be available. We have had the opportunity to treat patients even on holidays. In my practice, these after-hours appointments are referred to as "opportunities," rather than "emergencies." They're opportunities to ease pain for our patients and to gain the self-satisfaction that comes from that.

Finally, it is my personal goal that each patient receives a follow-up phone call after treatment—not from the staff, but from the doctor who treated them, personally. I block time each and every day to call my patients, and I live up to my commitment the vast majority of the time. That kind of direct communication allows for both better clinical treatment, and for a patient experience that seems to be increasingly rare in the modern landscape.

What is the biggest challenge?

The biggest challenge I see is working with the wide range of doctors and treatment philosophies in our referral base. It takes a realization that all of us have different educational backgrounds, different experiences, and tremendous variation in skill level. It is sometimes difficult to send an endodontically treated tooth or an implant to a referring dentist who may or may not have the skills to restore it well.

What would you be if you were not a dentist?

If I had not become a dentist, I would have continued as a builder. I put myself through school building and contracting. Even after I completed dental school, I still built custom homes. Concomitantly with being a dentist in Oregon, I was a licensed general contractor. I love building things, whether it's the foundation for teeth, or a custom home or office building. In my current location, I have about 5,000 square feet and originally built-out two-thirds of it. The remaining one-third will become a seminar center for teaching dentistry, microscopes, endodontics and implantology. The creativity, planning, and tweaking in construction is very similar to building teeth; A vision and well-made plans are paramount.

What is the future of endodontics?

The future of endodontics and dentistry has never been brighter than right now. We have the best technology and the best dental materials of any time in history, and the things we can do practically make us heroes.

The dental IQ of patients in this country has never been higher, and because of the wide access to information that's out there, patients know what to expect, and they expect the best. My grandmother had dentures at age 30. My mom is 87 and has nine dental implants that function with her non-removable dentition. People can save their teeth today, keeping them functional, looking good and feeling good. We are in the golden age of dentistry right now, and we are only limited by our own imagination.

What are your tips for a successful practice?

In real estate, the traditional formula for success is: "location, location, location!" In my opinion, for dentists, and especially for endodontists, it's "communication, communication, communication!"

That means always reassessing how we communicate with our staff, our patients, and our referring doctors. Marketing is everything! It is so important to let our referral sources know what we do and what we are capable of doing. We need to realize that everything we do is some form of marketing. I have a sign for North Scottsdale Endodontics on the freeway side of my building, where 100,000+ cars pass by every day.

And I never forget the simple but brilliant truth shared by Dr. Schilder: Treat your patients as if you were the patient, and in time, you will have more patients than you can treat.

What advice do you give to budding endodontists?

My advice is this: live where you want to live; set up your practice where and how you want to. Set some realistic goals and strategies. Be true to yourself. Live your life in balance. It takes longer today to enjoy the journey to success, but it will come—and most of the fun is in the journey, itself.

The single thing that will set you apart from others is the quality of your work. The first person that you need to satisfy is yourself, and you need to hold yourself to the highest of standards. When you do that, everyone around you will benefit; your patients, your staff, and even your loved ones.

During the courses I teach, I always like to point out the old saying, "Who you are, is where you were when...!" In a literal sense, you can take that to mean that we're all made up of the sum of our experiences—the things we've seen and done. But in a philosophical sense, I like to think of it as a forward-looking statement; it's not just about where you were, but where you are and where you're headed. For me, the proverbial "where" is on the cutting edge of technology; and the "when" is always now! Take advantage of every opportunity to learn, and keep pushing forward with the knowledge you attain.



Simply the best way to do dentistry

What are your hobbies, and what do you do in your spare time?

I love to spend time with my wife of 25 years, Christine, my rope horses, and my two blue heeler "dawgs." And in a place like Scottsdale, when you do have spare time, you know that you can always count on it to be beautiful! 

drmclammy@nsenedodontics.com
www.nsendodontics.com

Top Ten List

1. Zeiss OPMI® PROErgo
2. ASI (Advanced Systems Integration) delivery systems
3. TDO (The Digital Office)
4. Dentsply Tulsa Dental Specialties
5. Nomad®
6. KODAK 6100 digital sensor
7. CBCT (J. Morita)
8. Global Surgical
9. Apple®
10. Continuing Education