Gum·Builder™
Powered by AAFE

Full Practice Team Training Template

Build Tissue.
Build Revenue.
Build Smiles.™

PURPOSE

Gum Builder™ is not just another procedure or CE course. It is a full-practice integration system designed to help dental teams identify, educate, schedule, treat, and follow up with patients who have gum recession, sensitivity, black triangles, esthetic concerns, or who are avoiding gum graft surgery.

The goal of this training is to make every team member understand their role so Gum Builder™ becomes part of the daily practice flow — not something that only the doctor remembers to mention.

Gum Builder™ is positioned as a non-surgical, regenerative treatment using CaHA technology to help thicken, stabilize, and support gum tissue while reducing sensitivity and improving esthetics. The attached materials repeatedly emphasize the same key message:

No cutting, No stitches,
No downtime — only results.

01 WHOLE-TEAM ELEVATOR PITCH

Every team member should be able to say this clearly

Gum Builder™ is a non-surgical, regenerative treatment that helps thicken and stabilize gum tissue. It can reduce hot and cold sensitivity, improve black triangles, and support areas of gum recession — without cutting, stitches, or downtime.

Patient-Friendly Version

Many patients have gum recession or sensitivity, but they don't want gum surgery. Gum Builder™ gives us a simple, in-office option that helps stabilize and rebuild the tissue with no cutting, no stitches, and no downtime.

Provider/Practice Version

Gum Builder™ fills the gap between 'watch it' and gum graft surgery. It gives the practice a high-acceptance, high-ROI, minimally invasive service that can be integrated into hygiene, perio, restorative, cosmetic, implant, orthodontic, and senior-care workflows.

02 CORE TRAINING OBJECTIVES

By the end of this training, the office team should be able to:

I. Identify Gum Builder™ candidates during hygiene, exams, consults, and phone calls.

II. Explain Gum Builder™ in simple, confident, patient-friendly language.

III. Create smooth handoffs between hygiene, doctor, assistant, treatment coordinator, and front desk.

IV. Schedule Visit 1, Visit 2, and Visit 3 without losing patients in the process.

V. Use consistent pricing, internal codes, payment expectations, consent forms, photos, and follow-up.

VI. Track cases, outcomes, reorders, referrals, and team performance.

The Gum Builder™ Integration System is specifically designed to bridge training into implementation, empower the entire dental team, and support scalable practice models for solo offices, specialists, multi-location groups, and DSOs.

03 CLINICAL + BUSINESS WHY

Patient Need

Patients care about gum recession because they see it, feel it, and fear the next step. Common patient concerns include:

- Hot and cold sensitivity
- Receding gums
- Long-looking teeth
- Black triangles
- Food trapping
- Esthetic concerns
- Fear of gum graft surgery
- Cost and anxiety around surgery

The materials position Gum Builder™ as the missing middle option between doing nothing and sending the patient for surgery. Gum recession is common, and many patients who are advised to consider grafting decline because it feels invasive, costly, or stressful.

Clinical Proof Points to Train the Team On

Use these numbers in team training, not as a forced sales pitch, but as confidence builders:

79% Reduction in sensitivity

32% Gum tissue volume improvement/regrowth

29% Recession reduction

28:1 Improvement-to-worsening ratio

Relief may begin within days

Visible tissue improvement is commonly positioned around 4–6 weeks

Treatment is typically completed through a short visit sequence

Business Why

The Quick Start Guide frames Gum Builder™ as a 15–20 minute chairside procedure that can integrate into hygiene. It also gives the team a simple ROI story: approximately $12.5 cost per tooth can support $150–$200 revenue per tooth, and a typical 6-tooth case can generate meaningful production with minimal added chair time.

04 WHO IS A GUM BUILDER™ CANDIDATE?

Train the team to look for these patients every day.

Primary Candidate Types

Recession Patients

Patients with visible root exposure, especially 1–4 mm recession.

Sensitivity Patients

Patients who complain of hot/cold sensitivity, air sensitivity, or root sensitivity.

Black Triangle / Esthetic Patients

Patients unhappy with dark spaces between teeth, food trapping, or uneven gumline appearance.

Deep Cleaning / Perio Maintenance Patients

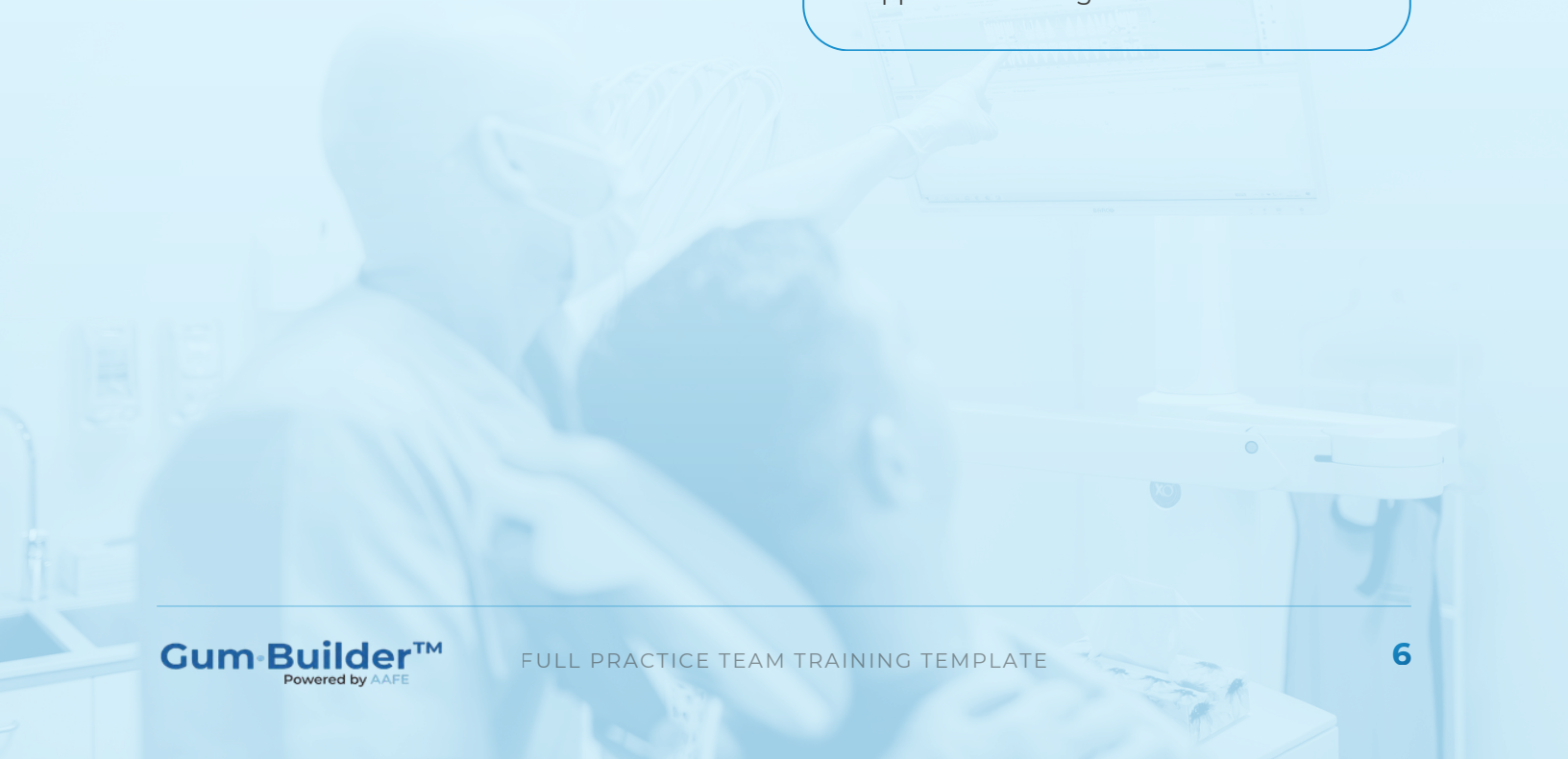
Patients already being monitored for gum issues.

Gum Graft-Averse Patients

Patients who were told they may need grafting but do not want surgery.

Restorative / Cosmetic / Implant / Ortho Patients

Patients receiving crowns, veneers, implants, or orthodontic movement where stronger, healthier gum tissue may support better long-term outcomes.



05 OFFICE ROLE BREAKDOWN

A. DOCTOR ROLE

The doctor is responsible for diagnosis, candidate approval, treatment planning, clinical consent, delivery of treatment, and final case acceptance.

Doctor Responsibilities

- Confirm patient is a good candidate.
- Explain Gum Builder™ as the recommended non-surgical option where appropriate.
- Present grafting as gold standard when clinically required, while offering Gum Builder™ as an option for patients avoiding surgery.
- Set expectations: this is a process, not a one-time magic fix.
- Complete or oversee photos, measurements, treatment, and follow-up.
- Reinforce urgency when recession or sensitivity is present.

Doctor Script

You have gum recession in this area, and that is likely contributing to the sensitivity you're feeling. In the past, many patients were told to either watch it or consider gum graft surgery. We now have a non-surgical option called Gum Builder™ that can help thicken and stabilize the tissue, reduce sensitivity, and improve the look of the gumline without cutting, stitches, or downtime. I think you may be a good candidate.

B. HYGIENIST ROLE

The hygienist is the primary identification engine

Hygienist Responsibilities

- Ask sensitivity questions at every hygiene visit.
- Look for recession, exposed roots, black triangles, food traps, and esthetic concerns.
- Document areas of concern.
- Take intraoral photos when possible.
- Make a clean doctor handoff.
- Avoid overexplaining or selling.
- Use the phrase: **"I'm going to have the doctor look at this specific area."**

Hygiene Discovery Questions

Ask naturally during the appointment:

- Do you ever feel cold sensitivity in this area?
- Has anyone ever mentioned gum recession to you?
- Do your teeth feel longer than they used to?
- Have you ever been told you may need gum grafting?
- Do you notice food getting stuck between these teeth?
- Does this area bother you cosmetically?

Hygienist Handoff Script

> Dr. [Name], I want to show you this area. Mrs. Jones has recession here, and she mentioned hot and cold sensitivity. I also noticed the gumline is starting to pull back. I think this may be a Gum Builder™ conversation.

The Quick Start Guide clearly trains the team: **do not sell — identify and inform.**

C. DENTAL ASSISTANT ROLE

The assistant keeps the clinical flow smooth and repeatable.

Assistant Responsibilities

- Prepare the Gum Builder™ tray.
- Confirm product and supplies are available.
- Take before, close-up, retracted, and smile photos.
- Support measurements and chart documentation.
- Prepare topical/local anesthesia setup.
- Assist with transfer, injection workflow, molding, buffing, and post-op instructions.
- Confirm next visit is scheduled before patient leaves.

Tray Setup Checklist

- Radiesse+
- 29g Comfortox syringes
- 27g or 30g transfer needles
- Topical 20% benzocaine
- Lidocaine for infiltration
- Gauze and Q-tips
- Retractors
- Perio probe and ruler
- Coronal polisher
- Camera or phone with macro capability

The Quick Start Guide states the tray should be built and photographed for assistants so setup becomes standardized.

D. TREATMENT COORDINATOR ROLE

The treatment coordinator turns interest into scheduled treatment.

Treatment Coordinator Responsibilities

- Explain fee structure clearly.
- Reinforce no surgery, no stitches, no downtime.
- Present Gum Builder™ as less invasive and typically lower cost than grafting.
- Collect payment upfront or according to the office financial arrangement.
- Schedule Visit 1 and Visit 2 before the patient leaves.
- Make sure consent forms and documentation are complete.

Price Question Script

The doctor will need to evaluate the area in person and confirm the exact treatment plan. What I can tell you is that Gum Builder™ is significantly less invasive than gum surgery, has no downtime, and is typically much more affordable than grafting. Once the doctor confirms the areas, we'll give you the exact fee before starting.

E. FRONT OFFICE ROLE

The front office frames Gum Builder™ as a premium, non-surgical service and makes sure no patient falls through the cracks.

Front Office Responsibilities

- Answer phone inquiries.
- Book Gum Builder™ consults.
- Schedule Visit 2 before the patient leaves.
- Confirm payment expectations.
- Track unscheduled candidates.
- Follow up with patients who showed interest but did not schedule.
- Place brochures and posters where patients can see them.

Phone Inquiry Script

Yes, we offer Gum Builder™. It is a non-surgical treatment designed to help with gum recession, sensitivity, and black triangles without grafting. It is quick, comfortable, and has no downtime. Let's schedule a consultation with Dr. [Name] to see if you are a candidate.

Checkout Script for Visit 2

Dr. [Name] needs to see you back in 3–6 weeks for the second phase. This visit is important so we can evaluate the tissue response and continue the regeneration process. Let's get that scheduled now.

F. MARKETING / INTERNAL COMMUNICATIONS ROLE

Marketing keeps Gum Builder™ visible across every patient touchpoint.

Required Patient Touchpoints

- Website page
- Email newsletter
- Social posts
- Waiting room slideshow
- In-office posters
- Patient brochures
- Before/after gallery
- Chairside one-page explanation
- Follow-up texts/emails
- Recall reactivation campaigns

The deck specifically recommends keeping Gum Builder™ visible across all touchpoints and using monthly themes such as “What is gum recession?”, “Sick of sensitive teeth?”, and “Avoid gum surgery?”

06 THE GUM BUILDER™ PATIENT WORKFLOW

Step 1 IDENTIFY

Candidate is identified through hygiene, exam, consult, restorative planning, phone call, or patient complaint.

Trigger words:

- My teeth are sensitive.
- My gums are shrinking.
- My teeth look longer.
- Food gets stuck here.
- I don't want gum surgery.
- I hate these black spaces.
- I was told I need a graft.

Step 2 INFORM

Team member explains simply:

> We now have a non-surgical option for that called Gum Builder™. Let me have the doctor evaluate it.

Step 3 DOCTOR DIAGNOSIS

Doctor confirms candidacy and explains why Gum Builder™ is appropriate.

Step 4 FINANCIAL PRESENTATION

Coordinator or front desk explains the fee and scheduling.
Possible models from the materials include:

- Per-tooth model
- Flat 6-tooth case model
- Hygiene-entry model
- Restorative add-on model
- Fee-for-service internal code model

The Quick Start Guide suggests using an internal code such as GR-150, while noting that some offices may reference D2991 or D4265 but Gum Builder™ is primarily positioned as a fee-for-service procedure.

Step 5 TREATMENT VISIT 1 — STABILIZATION

Includes:

- Photos
- Measurements
- First layer injection
- Molding
- Immediate visual improvement
- Post-op instructions
- Schedule Visit 2 before patient leaves

Step 6 VISIT 2 — REGENERATION / SECOND LAYER

Typically scheduled in **3–6 weeks or 4–12 weeks**, depending on protocol and clinical judgment.

Includes:

- Re-measure
- Photos
- Second layer if needed
- Papilla refinement
- Continued tissue support

Step 7 VISIT 3 — EVALUATION

Typically around Month 3.

Includes:

- Final measurements
- Final photos
- Sensitivity review
- Patient satisfaction survey
- Before/after review
- Maintenance plan

Step 8 MAINTENANCE

Annual or 6-month hygiene recall check.

The Quick Start Guide outlines a visit sequence of Stabilization, Regeneration, Evaluation, and Maintenance, with no brushing in the treated area for 24 hours and avoiding spicy or very hot foods for 24 hours.

07 SAME-DAY TEAM HUDDLE TEMPLATE

Use this every morning during the first 30 days.

10-Minute Gum Builder™ Huddle

01. YESTERDAY'S REVIEW

- How many Gum Builder™ candidates were identified?
- How many were shown photos?
- How many doctor handoffs happened?
- How many consults were scheduled?
- How many treatments were accepted?
- Any objections we need to improve?

02. TODAY'S OPPORTUNITY LIST

Pull today's schedule and mark patients with:

- Recession
- Sensitivity
- Black triangles
- Perio maintenance
- Deep cleaning history
- Crowns/veneers/implants
- Ortho history
- Previous graft recommendation

03. ASSIGN ROLES

- Hygienist identifies and flags.
- Assistant takes photos.
- Doctor confirms.
- Treatment coordinator presents.
- Front desk schedules Visit 2.
- Marketing tracks patient-facing materials.

04. PRACTICE ONE SCRIPT

Pick one script daily:

- Sensitivity script
- Black triangle script
- Price question script
- Grafting alternative script
- Checkout Visit 2 script

08 FIRST 30-DAY LAUNCH PLAN

Day 1 SETUP

- Activate StatDDS account.
- Order Radiesse+ and Comfortox syringes.
- Build and photograph tray setup.
- Print consent forms.
- Print post-op instructions.
- Place brochures in reception and operatories.
- Train team on elevator pitch.
- Identify first 10 candidates from charts.

The Quick Start Guide specifically instructs offices to activate the StatDDS account, confirm tray setup, brief the team, and pull charts for the first 10 patients with recession or sensitivity.

Week 1 INTERNAL TRAINING + FIRST CANDIDATES

- Hold daily 10-minute huddles.
- Hygienists screen every patient.
- Doctor confirms first candidates.
- Schedule first 3–5 consults or treatments.
- Take baseline photos.
- Track objections.

Week 2 TREATMENT FLOW

- Complete first cases.
- Make sure Visit 2 is scheduled before patients leave.
- Review clinical photos with team.
- Refine tray and room setup.
- Confirm payment collection process.

Week 3 REACTIVATION

- Call or text patients with known recession/sensitivity.
- Send email to patients who declined gum graft surgery.
- Use “sensitive teeth” and “avoid gum surgery” messaging.
- Add website and social awareness posts.

Week 4 MEASURE AND IMPROVE

Track:

- Candidates identified
- Consults scheduled
- Cases accepted
- Treatments completed
- Visit 2 scheduled rate
- Revenue generated
- Patient feedback
- Before/after photos collected
- Product usage and reorder needs

09 PATIENT SCRIPTS BY SCENARIO

Sensitivity Script

You mentioned cold sensitivity, and I'm seeing some gum recession in that same area. That exposed root surface is often what causes the sensitivity. We now have a non-surgical treatment called Gum Builder™ that can help stabilize and rebuild that tissue without grafting.

Black Triangle Script

I see the space you're talking about between these teeth. That's often called a black triangle. Gum Builder™ may help improve the tissue support in that area and make the space look better without surgery.

Grafting Alternative Script

Grafting may still be the right answer in some severe cases, but for patients who want to avoid surgery, Gum Builder™ gives us a non-surgical option that can help stabilize the tissue, reduce sensitivity, and improve the appearance.

Restorative Add-On Script

Before we finalize this crown/veneer/implant area, we want to make sure the gum tissue is as healthy and stable as possible. Gum Builder™ can help support the tissue around the restoration and protect the long-term result.

The B2B brochure positions Gum Builder™ as useful across hygiene, perio, restorative, cosmetic, and senior-care channels because recession and sensitivity exist in every practice.

10 TEAM SCORECARD

Use this weekly.

Metric	Goal	Actual	Notes
Patients screened for recession/sensitivity	**100%** of hygiene patients		
Candidates identified	**10**/week		
Doctor handoffs completed	**80%+** of candidates		
Consults scheduled	**5**/week		
Treatments accepted	**3**/week		
Visit 2 scheduled before checkout	**100%**		
Before/after photos taken	**100%** of cases		
Revenue generated	Practice goal		
Product reorder checked	Weekly		

11 PRINTABLE “DAY-AFTER” CHECKLIST

Gum Builder™ Go-Live Checklist

Admin

- StatDDS account active
- Radiesse+ ordered
- Comfortox 29g syringes ordered
- Internal billing code created
- Fee schedule approved
- Consent forms printed
- Post-op instructions printed

Clinical

- Tray built and photographed
- Camera ready
- Retractors ready
- Probe/ruler ready
- Topical and lidocaine ready
- Coronal polisher ready
- Assistant trained on photos and setup

Team

- Front desk practiced phone script
- Hygienists practiced identification script
- Doctor practiced diagnosis script
- Treatment coordinator practiced fee script
- Checkout team practiced Visit 2 scheduling script
- First 10 candidates pulled from charts

Patient Marketing

- Brochures placed
- Posters placed
- Waiting room slide added
- Website page live or in process
- Email/social post scheduled
- Before/after folder created

12 FINAL TEAM MINDSET

Gum Builder™ works best when it becomes a team-based system, not a doctor-only procedure.

The hygienist identifies.
The assistant prepares.
The doctor diagnoses.
The coordinator presents.
The front desk schedules.
Marketing keeps it visible.
The whole team follows up.

When every role is clear, Gum Builder™ becomes a daily practice growth engine: better patient care, better case acceptance, stronger esthetic outcomes, and a new high-value service line for the practice.

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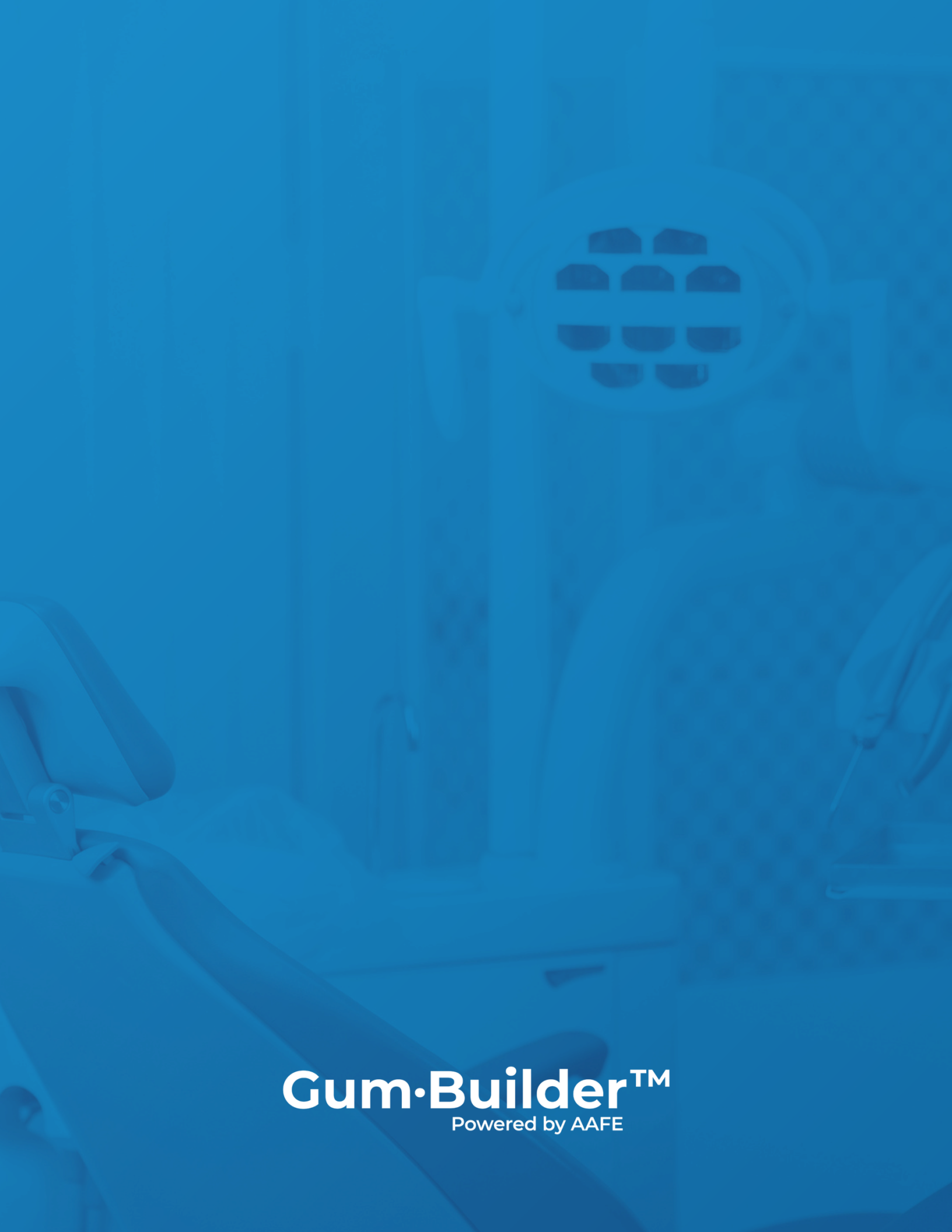
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