

WG Digitalisation in Dentistry- E-Health-Artificial Intelligence (WG DD, eH, AI)

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Al in Everyday Dental Practice 2025: What Works, What Pays Off

Objectives

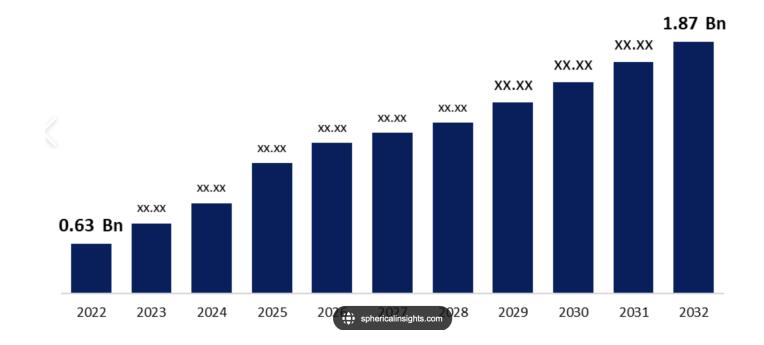
- Show current, low-risk AI that saves time/money in ordinary clinics.
- Align ERO-FDI on whole-team training (phone-in-hand) and an international webinar (of NLOs and specialists).



What's Working Now

Start with administration—fast ROI, low risk. The only risk- more editing

Global AI In Medical Writing Market



Use Case: Ambient Scribe → Structured Notes

- Dictate in the operatory; Al drafts SOAP/periodontal notes; clinician signs off.
- Time impact: -10-30 minutes/day per dentist seen in real-world reports.
- Quality: prompts for missing elements; templated outputs reduce omissions.
- Clinic tip: start with two procedure families; measure edit rate weekly.

Use Case: Claims Prep & Pre-check

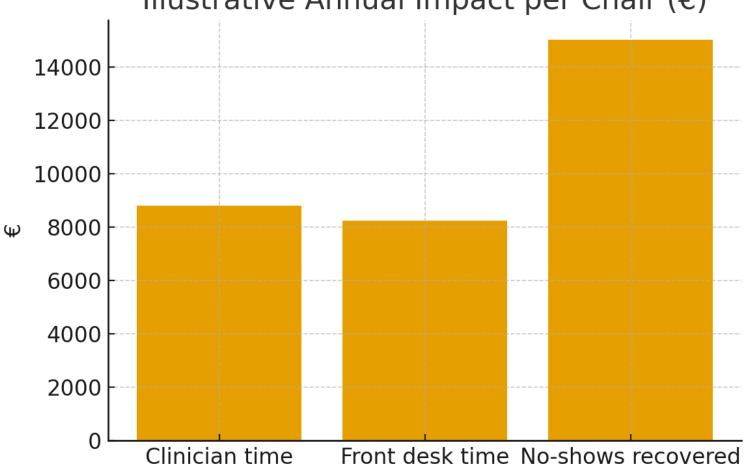
- Code suggestions, attachment checks, prior-authorization nudges.
- Effect: lower denials, reclaimed staff time in group practices.
- Tip: pilot on crowns/endo first; monitor denial rate and resubmission cycle time.

Use Case: Scheduling & Rescheduling

- Predict no-shows; auto-fill gaps; multi-channel reminders (SMS/voice/email).
- Observed: 10–25% relative reduction in no-shows (population-dependent).
- Tip: start with hygiene/recall; track FTA%% and same-day fill rate monthly.

Money Slide: Order-of-Magnitude ROI

Illustrative Annual Impact per Chair (€)



Assumptions: €120/h dentist; €25/h front desk; baseline 10% no-shows on 5,000 appts; €150/visit. Replace with local data.

Use Case: Informed Consents & Patient Info

- Al drafts readable, multilingual, procedure-specific texts; store versions.
- Clinician sets reading level and approves final wording (mandatory).
- Counter misinformation: add a 3–5 bullet myth-busting FAQ per procedure.

How Teams Actually Succeed

- Mandate the use of a smartphone/headset for ambient capture inroom; obtain consent. Better- work with specialized units- offline.
- 5-point micro-audit on every case:
 - 1) Consent to record documented
 - 2) Al note matches planned codes
 - 3) Required attachments present
 - 4) Patient handout reading level set
 - 5) Human sign-off logged
- Monthly dashboards: note edits, denial rate, failed-to-attend, phone time.

Guardrails (Keep It Safe & Simple)

- No unsupervised diagnosis or treatment planning in routine clinics (for now).
- Disclose AI assistance in patient-facing texts; log consent and versions.
- Data minimization; vendor DPA/BAA; local retention policies.

90-Day No-Regrets Adoption Plan

- 1) Pilot ambient scribe in two procedure families; target ≤10% note edits by week 6.
- 2) Turn on claims pre-check for crowns/endo; track denials \downarrow and resubmission times.
- 3) Launch multi-channel reminders for hygiene; monitor FTA%% \downarrow monthly.
- 4) Roll out Al-drafted consents at B1–B2; store versions and approvals.
- 5) Build a clinic FAQ knowledge base; log chatbot responses; quarterly review.

Benchmarks & Quick Literature (for handout)

- Ambient scribe: per-user EHR time \downarrow ~10–30 min/day in real-world reports.
- Admin assistants: measurable reductions in phone/admin load.
- Reminders: 10–25% relative no-show reduction typical.
- Consent readability: typical forms too complex; AI improves clarity with review.

Case Study: Czech Whole-Team Model

Team Training That Works (CZ Reference Model)

- Dentists + staff trained together from basics to advanced.
- Format: 4 × 60-minute blocks (reference model from CZ).
- Quarterly interdisciplinary congresses (dentistry + IT/AI).
- Outcome: higher adoption, fewer errors, shared vocabulary.

ERO-FDI International Webinar Proposal

Pilot Webinar (Officers/Representatives)

- Goal: compare what works now; swap policy docs; curate clinic-ready tools.
- Format: 60 minutes = ≤30 min case inputs (3 × 8–10 min) + ~30 min Q&A.
- Speakers: WG members
- Deliverables: recording, starter kit (checklists, consent templates, KPIs), ROI calculator.
- If successful repeat at least 2 times /year

Close & Next Steps

- WG on-line meeting in month
- To make precise program of possible webinar send it to the Board- thereafter contact NDAs