

# Modern Dental Offices

## No-Hall Plan Aims at Full Use of Space

• • The new bungalow office of Dr. Larry W. White in Hobbs, New Mexico, was designed to allow a maximum number of rooms in a minimum amount of space. (The office was ostensibly designed for two occupants; however, Dr. White is occupying it alone at present.)

Main feature of this floor plan, Dr. White notes, "is the elimination of a hallway which seems to be rather traditional in most professional buildings." (An early effort toward using all available space, and thus eliminating the traditional hallway, was made by Dr. Sanford Golden of Los Angeles, Dr. White says, and adds that he has tried to enlarge and improve on this pioneering effort.)

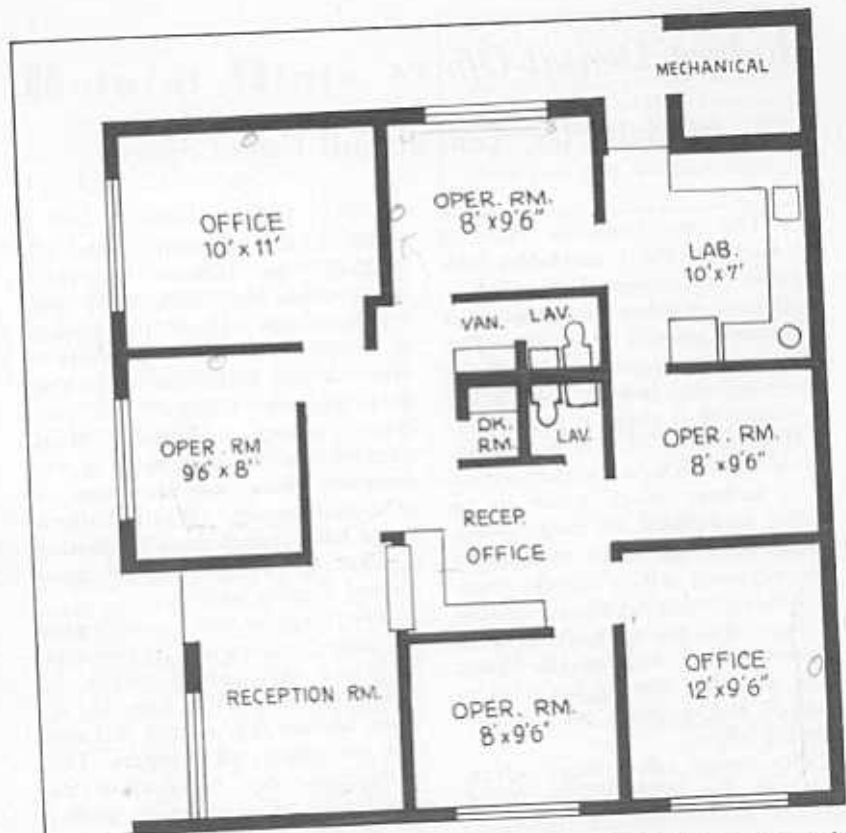
This design offers many advantages, in Dr. White's view. It allows a smaller outside dimension and lower building cost. The receptionist has instant access to all treatment rooms, private offices, the dark room and the reception room. Both occupants have free access to a common laboratory.

The reception room is furnished in Early American decor in an effort to let the patients "feel at home." Whether or not this psychology works is a matter of conjecture, Dr. White says, but most patients seem to enjoy the furnishings.

Chairs and a small table are available for children to color books while they wait. Only dental literature written for laymen is in this room. This literature is often revised and updated to help keep patients informed on progressive changes in dentistry. Many pictures are on the walls of the reception room, and these are all of dental import. (Wyeth Laboratories has printed these interesting sketches of dental interest from various literary sources.)

The reception area is exactly what the name implies, Dr. White says. It is an area which might be looked upon as the hub of activity, because it is around this area that the office staff operates. This arrangement can easily allow the receptionist, if need be, to answer the phone, greet patients, develop radiographs and assist the dentist with a minimum of steps. At present Dr. White has a receptionist and a chairside assistant, but the plan allows the dentist, if need be, to work by himself.

All four treatment rooms are 8 by 9½ feet. Each is equipped with a 90 KV x-ray machine that is operated by a common button just between the rooms. Each treatment room entrance door has a lead shield built in for radiation protection. Each treatment room also



has a ceiling of acoustical tile.

Main features of the treatment rooms are the electrically operated contoured chairs and a dental manifold which replaces the conventional unit. The air-driven contra-angle and straight handpieces are attached inconspicuously to the back of the chair. The manifold uses a high volume, low pressure vacuum cup instead of the cuspidor, and this appeals greatly to the patients. The cup can be moved right in front of them, so that only a mini-

mum amount of time and effort is exerted in emptying the mouth. Another vacuum tube is available for the assistant to use.

A three way water-air syringe is

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*Opposite, top to bottom, left to right: dental building of Dr. White; receptionist area; reception room; office-consultation room; laboratory; operatory layout; Dr. White in operatory (note manifold moved to chairside).*

DENTAL SURVEY



incorporated in the manifold, and this allows cleansing and drying preparations in one motion. The bracket tray has been replaced by a mobile cabinet. This cabinet has been designed so that it carries practically all of the items that are used in the treatment rooms. This allows them to be reached quickly and easily.

This cabinet is pulled up directly behind the patient, and the assistant hands the instruments to the doctor as they are needed. Prearranged instrument trays are used, and this simplifies procedures for both doctor and assistant. An afterthought which has proved very effective was to place wall-mounted magazine racks with dental literature in the treatment rooms. Dr. White says this encourages people to read about dentistry while they wait in the treatment rooms and allows the doctor easy access to a pamphlet he may want the patient to have.

The private office is where almost all consultations are held. The patient's radiographs and diagnostic

casts are shown to him, and any casts or slide photographs that may demonstrate similar cases. Many visual and audiovisual aids are used to explain treatment plans, home care and other aspects of dentistry.

A great deal of important time is spent in this room, so it has been decorated to reflect this importance. The bookshelves are walnut grained wood, and the desk is also of walnut finish. A comfortable, attractive chair is present for the patient to sit in while the explanation is given.

The laboratory is outfitted with casting machine, bench press, lathe, denture processing unit, etc. Also done here is the cleansing, sterilization, and packaging of instruments.

More natural light has been made available to three areas, one of which is the laboratory, by sky domes. These were placed where building codes or building design prevented installation of windows. Ample cabinets and shelves are in the laboratory, and these cabinets contain most of the supplies.

This dental office is not a unique plan since most of these ideas have been expressed previously by others, Dr. White points out—he merely made an effort to collect these various ideas into a plan that seemed to offer maximum use of minimum space.

The rapid progress in dentistry has already made some of the original ideas obsolete, he says, but as long as this progress makes the work easier for the doctor and more acceptable for the patient, the office will be changed to reflect this progress.



"Next."