

ORAL-B® iO™ SYSTEM INCORPORATION PROGRAM INSTRUCTION & SCRIPTING

By recommending a Crest+Oral-B home care regimen with in-office treatment, patients can experience improved clinical results, and your office can benefit from increased revenue and the operational impacts of the healthier, happier patient

Oral-B[®] iO[™] Features & Benefits:



Oral-B® iO™ Transformational Gum Health System



Oral-B® iO™ Gingivitis System



Round Brush Head

✓ Superior Cleaning vs. Manual ✓ Irresistible Brushing Experience



Personalization

✓ Customized Cleaning ✓ Better Compliance



Artificial Intelligence

✓ Guidance to Better Brushing ✓ Whole Mouth Coverage



Concentrated Energy

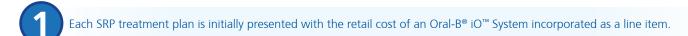
Smart Pressure Sensor

√Advanced Gum Protection

√Smooth, Effective Clean

✓ Quiet Brushing Experience









Discussing with the Patient:

Mr. Smith, now that we have reviewed your oral health and discussed my recommended treatment for gingivitis, I'd like you to start using this **electric toothbrush** as a routine part of your oral home care process to help ensure a **successful outcome with the treatment we are going to provide.**

This home care regimen is included in your treatment plan because **what you do at home is just as important as what we do here in the office**. This is the same brush I use at home, so I've seen the impact this brush can provide firsthand. The best part is that the brush **guides you to use proper brushing techniques and maximize your results** let me walk you through the features.

As a thank you for your commitment to improving your oral care routine at home, Oral-B® provides this \$20.00 rebate. Simply complete the form on the back, drop it in the mail, and they'll send back a pre-paid gift card!

Electric Rechargeable Office Resources:

Scan to view these resources for your office





Letter of Medical Necessity



Money Back Guarantee



Online Rebate

©2023 P&G ORAL-32732





SRP TREATMENT CASE

Patient:
Birth date:
Chart Number
Provider:

DATE	VISIT	тоотн	CODE	DESCRIPTION	FEE	PATIENT
		LL	D4341	Perio Scaling & Root Planing per Quad		
		LR	D4341	Perio Scaling & Root Planing per Quad		
		UL	D4341	Perio Scaling & Root Planing per Quad		
		UR	D4341	Perio Scaling & Root Planing per Quad		
				Oral-B [®] iO [™] Electric Toothbrush Home Care system		

INSURANCE PROVIDERS				
Primary	Secondary			

FINANCIAL SUMMARY					
SRP Treatment Fee					
Oral-B [®] iO [™] Electric Toothbrush Home Care System					
Estimated Deductible to be Applied					
Estimated Insurance Payment					
Estimated Patient's Portion					