Five-Lite Systm for the small solo practice.

Multi-Channel Five-Lite System for the practice with two or more doctors.

Non-Verbal Communications
Theta Non-Verbal Communication Systems allow messages to be sent discretely by using lights rather than voice. They eliminate much of the walking back and forth and in and out of the operatories which is so disturbing to the doctor, the staff and the patients. Office staff can continue working and yet be informed discretely of vital information.

Five-Lite System Fig. 1
This System is recommended for the small to medium sized solo practice with up to four operatories. It provides simple, comfortable communication for the one doctor working with one hygienist. The Five-Lite System is sufficient for the solo practice if two operatories are used regularly by the doctor and one operatory is used by a hygienist. A fourth operatory used occasionally as a post-op, overflow or as an emergency operatory would also fit within a Five-Lite System. The Five-Lite System can be expanded into a Multi-Channel Five-Lite System in the future if the practice grows.

Multi-Channel Five-Lite System Fig. 2
This System provides simple communications for a practice with two or more doctors. Each doctor and each hygienist has their own private line of five lights. As a message does not disturb a doctor or hygienist unless it is for them and multiple messages may be sent at the same time, this System would be used in large multidisciplinary practices.

Five-Lite System
This System has five colored lights and a black reset button which are used for sending and responding to repetitive messages. Any of the lights can be turned on at any station. The lights can be responded to from any location by turning the lights out or light-
ing additional lights to acknowledge the message. A buzzer sounds at every station as the light is being lit and the buzzer also sounds additional times as any of the lit buttons are pressed again. Each buzzer is adjustable in volume station by station.

**Five-Lite System Simple Message Coding**

A simple way to code messages is to assign messages to each color of light. As the button is pressed a buzz sounds and the light lights and stays lit. An acknowledgment of “Yes” is sent by pressing the black reset button, turning out the light. A “No” or delay reply can be sent by pressing the lit button providing a buzz back to the sender. Messages for the doctor can usually be on one color of light:

- **Hygiene** (green light for hygienist)
  - Green-White -Hygienist your next patient is here
  - Green-Red -Hygienist phone call
  - Green-Blue -Hygienist needs the receptionist
  - Green-Yellow -Hygienist needs an assistant

- **Assistant** (Yellow light for assistant)
  - Yellow-Red -Assistant phone call
  - Yellow-White -Assistant seat patient for doctor
  - Yellow-Blue -Assistant needed by receptionist

- **Receptionist** (Blue light for receptionist)
  - Blue-Yellow -Receptionist needs assistant
  - Blue-Green -Receptionist needs hygienist

It is important that all message exchanges end with the lights reset so that the System is available for the next message. The Five-Lite system should not be used to indicate status such as room busy or next patient waiting. Status indications would leave the System busy for long periods of time preventing other messages from being sent. Room Status Systems and Patient Waiting Status Systems are available from Theta Corporation.

**Rooms other than Operatories**

The same coding is used for messages between staff members other than the doctor by adding the staff members color to the message. So, “Next Patient” for the doctor was white. “Next Patient” for the hygienist would be white and green lit together (white is the color for next patient and green is the color for hygienist). Common messages sent to staff other than the doctor are:

- **Hygiene** (green light for hygienist)
  - Green-White -Hygienist your next patient is here
  - Green-Red -Hygienist phone call
  - Green-Blue -Hygienist needs the receptionist
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It is important that all message exchanges end with the lights reset so that the System is available for the next message. The Five-Lite system should not be used to indicate status such as room busy or next patient waiting. Status indications would leave the System busy for long periods of time preventing other messages from being sent. Room Status Systems and Patient Waiting Status Systems are available from Theta Corporation.
In many rooms of the office a lighting pushbutton component is used. In the laboratory, sterilization, lounge and other areas where personnel are not working in a fixed position, a CRL 152 Lighting Pushbutton Panel is usually mounted on the wall (see Fig. #4). If there is a seated work location, the panel should be within arm’s reach and within sight of that position. If all personnel are standing, the panel should be in an area where it will be most visible.

In rooms which do not have a wall near the seated work position, a CRL 132 Lighting Pushbutton Bar is usually mounted on the cabinetry. In reception offices that have a high check writing counter above the main reception desk, the CRL 132 Lighting Pushbutton Bar is mounted under the lead edge of the check writing counter (see Fig. #1). The CRL 132 Lighting Pushbutton Bar is also used in a sterilization or laboratory which is made up completely of cabinetry units and has no walls or where the walls would be difficult to install into. The CRL 132 Lighting Pushbutton Bar is mounted under the lead edge of the hung cabinets.

Operations
In the operatories where you and your assistant are working in a fixed position for twenty to thirty minutes at a time, we feel that it is very important for you to have the lights in your view where you will not have to twist to see them. The pushbuttons to control the System must be comfortable for you to reach from your working position. Display lights are usually placed at eye level across the patient on the side wall of the operatory where they can be seen without any body movement by a doctor or hygienist working either off the patients side or behind the patient. A set of remote control pushbuttons is placed low down at elbow level between the doctor and the assistant.

The CRL 160 Light Panel is used for the display lights where there is a wall to mount it on (see Fig. #6). The CRL 130 Aluminum Button Bar is used for the remote control pushbuttons when they can be mounted on a mobile cart (see Fig. #7). On a cart or tray table the buttons are usually mounted with the pearls facing up towards the ceiling. This makes them very easy to push and easy to reach, even if they are on the other side of the cart. If the operatory does not have a cart or tray table behind the patient but does have a counter, the CRL 130 Aluminum Button Bar is used mounted under the lead edge of the counter at the 12 o’clock position (see Fig. #7). If there is no cart, tray table, or counter at the 12 o’clock position a CRL 143 Button Panel is mounted on the wall at 12 o’clock at about elbow level. For operatories divided by cabinetry units rather than walls, the CRL 162 Light Bar is used rather than the CRL
160 Light Panel (see Fig. #8). The CRL 162 Light Bar mounts under the lead edge of the upper cabinet across the patient from the doctor or hygienist.

**Private Office**

In the private office, if you are seated behind a desk with patients facing you in front of the desk, display lights would be mounted on the wall behind the patient. Remote control pushbuttons would be placed where they would be comfortable to reach. This allows messages to be sent or received without disturbing the patient. A CRL 160 Light Panel is most common for the display lights. If the desk is against the side wall, the CRL 143 Button Panel is placed on the wall below desk height next to the doctor. If the desk is away from the wall a CRL 130 Aluminum Button Bar is mounted under the desk.

If the desk in the Private Office faces directly into a wall, the CRL 152 Lighting Pushbutton Panel is placed on the wall above the desk.

**Multi-Channel Five-Lite System for the practice with two or more doctors.**

For the office with many dental providers (doctors and hygienists), the simplest way to communicate is to provide each doctor and each hygienist with a private channel for communication.

Areas of the office common to all providers are provided with a large panel containing a Five-Lite System for each Provider. Each row uses the simple message coding as shown on page #2. A panel with an independent column of lighting pushbuttons and reset button for each doctor and each hygienist would be mounted on the wall (see Fig. #2). The CRL 152-2 through CRL 152-6T would be used depending on the number of rows needed.

In a Laboratory a panel with a row of lights for each doctor would be mounted on the wall. As
these areas are not used by the hygienists, they would not need the rows for the hygienists. The CRL 152-2 through CRL 152-6T would be used depending on the number of rows needed.

The operatories used by doctors are equipped with one row the same as in a Five-Lite System.

The hygiene operatories are equipped with one row the same as in the Five-Lite System and they also have a Hygiene Call Panel. A CRL 187-2 Two Doctor Hygiene Call Panel for 2 doctors or a

**Hygiene Status System**

**Message Lights**

CRL 187-3 Three Doctor Hygiene Call Panel for three doctors. See Fig #11. These Panels control one light for each doctor channel. (see Fig. #11). This panel would permit the hygienist to call either of the doctors by lighting a light on their channel. The Hygiene Status System displays the number of the hygienist that needs a doctor. These lights are controlled by toggle switches in the hygiene rooms. For an office with two doctors, a RSS 632 Two Light and Toggle Switch Panel would be used. (see Fig #14). For more than two doctors, a RSS 655 Light and Toggle Switch Panel would be used. The Toggle switch controls each light to on solid, on flashing or off. Typical use would be on solid - patient available to be checked; on flashing - patient needs to be checked as soon as possible. When the patient has been checked, the hygienist would turn off the light. If any doctor available can check the patient, the hygienist would light all lights. The hygiene status lights need to be displayed in all areas that the doctor may be in such as his operatories, private office and lab.

In doctor operatories, the CRL 169 Light Panel with Hygiene Status would be used combined with a CRL 130 Aluminum Button bar. (see Fig #13).

In a private office set up for consulting, the CRL 169 Light Panel with Hygiene Status combined with a CRL 130 Aluminum Button bar or CRL 143 Button Panel would be used. In a private office not set up for consulting used by one doctor, a CRL 152-2 Two Channel Lighting Pushbutton Panel with numbered lenses for the bottom row may be used.
In a laboratory used by two doctors, the CRL 169-2 Two Doctor Hygiene Status Display and a CRL 152-2 Two Channel Lighting Pushbutton Panel would be used. (see Fig #15). In a laboratory or doctors lounge with three though six doctors, a CRL 152-3T through CRL 152-6T would be used depending on the number of rows needed and a CRL 169-3 through CRL 169-6 Hygiene Status Display with enough columns for every doctor would be used.