The first quarter of this year was off to a slow start, with collections down 2.3% and production up less than 1%. So, the second quarter helped things recover a bit and showed good momentum.

Maybe as the weather gets better, the numbers get better! We’ll work for and look forward to a strong 3rd quarter.

The Top 3 Things That Cause a Practice to Run Behind, and How to Fix Them:

**Number 1**
How long does it take for the Doctor to get in for the hygiene exam?

If you’re waiting until the end of the hygiene appointment to do the patient exam, chances are you will run behind. Instead, we suggest the hygienists let the Doctors know they are available for an exam at any time once the prophylaxis has started. This means, after the following areas have been discussed: medical history information, patient concerns, necessary X-rays, and periodontal evaluation, and blatant clinical findings.

When the hygienist can give the Doctor a 30- to 40-minute window of time to get in for the evaluation, it allows more flexibility, especially in situations where there are multiple hygiene exams.

**Number 2**
How long does it take the Doctor to get out of the hygiene exam?

Doctors can help support this by being aware of personal chatter and assuring it is kept to a minimum. A great phrase for any clinical team member to use to break away from patient/personal discussion is, “Mrs. Smith, we love having you here and I could talk to you all day, however, it’s time for us to get to work!”

Large treatment plans or multiple clinical needs are other reasons exams go long. The most important thing you can do in these situations is to calibrate your clinical policies. In other words, if hygienists have a good idea of the likelihood of what Doctor recommendations are going to be, they can prepare the patient in advance for those recommendations, and the Doctor doesn’t need to spend as much time going over the patient’s care.

We Believe In You!

We believe that Independent Private Practice is the best way to deliver dentistry. It is best for the patients, the doctors and the staff. Private practices can be more selective with their continuing education and technology. They can also be more adaptable and efficient. Most importantly, the people who make decisions about patients’ dental care are the ones in direct contact with them. We also believe that professional management support helps good practices be better and thrive in a competitive environment.
much time explaining. However, hygienists: it’s important that you tell the Doctor that you have explained to the patient, “It’s likely the Doctor is going to recommend a number of fillings, as I see suspicious areas on the X-rays. While we wait and to see what he/she says, I’m going to go over some of the treatments and the needs that you have.” The more prepared the patient is before the Doctor enters for the exam, the less the Doctor has to talk.

**Recommend Consults:** When patients have numerous needs, we encourage the clinical team to use phrases such as, “Mr. Jones, I can see that you have numerous areas of concern on the X-ray, and of course we will wait to see what the Doctor says; but it’s likely that he/she will recommend a consult. In situations like these, it’s likely the Doctor will want to review your X-rays in detail and create a plan moving forward.”

When the Doctor enters for the exam, the hygienist should then let the Doctor know, “Doctor, I noticed on the X-rays that there are a number of suspicious areas, and I’ve told Shelly that it’s likely you will recommend a consult to allow you to put a plan together for her needs, but we’re waiting to hear what you say.”

**NUMBER 3**

**Emergency Patients**

In situations where schedules are jammed up and there is simply nowhere to place an emergency patient, often practices will “squeeze” patients into the schedule. Instead, if you do not have emergency blocks or any time available, we recommend that you use the “urgent care” option.

“Mrs. Murphy, why don’t you come right over? You will have to wait, but the Doctor will see you and at least identify what’s going on and make you comfortable.”

This has two advantages, the first being if it’s a true emergency, the patient will come right over! The second being that every practice has changes in their schedules, and it may work better to slide a patient into the schedule if someone gets done early or a patient doesn’t show up.

Be sure you are taking advantage of any open hygiene time for emergency patients. If a hygienist has a half hour or more available in their schedule, you can seat the emergency patient in their room.

While nothing works 100% of the time, these ideas have proven to help hundreds of practices, and they can help yours too! Call us today if you want more information or help implementing these areas.

**FEE, WAGE & MARKETPLACE SURVEY:**

Our 39th Annual Fee, Wage & Marketplace survey will be mailed in early September. Please participate and encourage your colleagues to do so too!

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**PRACTICE SALES:**

**Don’t Assume Your Hometown Banker is Your Best Deal**

Naturally, you want to keep business with your friends and in your community. However, there are banks that have deep experience with dental practice sales and therefore are often a better choice.

Banks with dental experience tend to be more likely to finance the entire amount, or ask for less down, or generally be more flexible with their terms. It is a competitive market so take advantage of that.

They usually can expedite financing more quickly since, in many cases, they know the baseline dentistry better than your hometown banker will.

So, give your hometown banker a shot at it, but make sure you do some comparison shopping, too. Many thousands of dollars are at stake and, more importantly, your time and energy.

We are familiar with the bankers that are the most active players in our area if you’d like further information.
Self Assessment

Systems Your Office Needs to Have and Staff Needs to Know How to Run

Please score your office on the following:

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<thead>
<tr>
<th>Category</th>
<th>Scale</th>
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<tbody>
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<td>Scheduling</td>
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<tr>
<td>Recall</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
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<tr>
<td>Financial Arrangements</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
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<tr>
<td>Ins. Follow-Up &amp; Management</td>
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<td>Other</td>
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In which areas would you most like help?

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