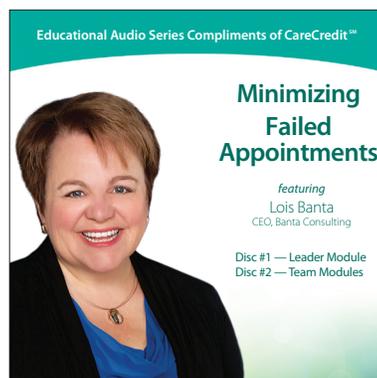


MINIMIZING FAILED APPOINTMENTS

DISCUSSION GUIDE

Featuring | **Lois Banta**



Welcome!

Welcome to the Team Training Modules for the audio CD “Minimizing Failed Appointments,” produced by CareCredit. You already know how frustrating failed appointments can be for the entire dental team and how costly they can be for the practice. Well, together, we are going to uncover new systems, processes, techniques, tools, and communication skills that will help you minimize cancellations and no shows. Okay Team! Let’s get started.



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How to Use this Discussion Guide

This Discussion Guide was created to give you a resource to use while you listen to the audio program and during your team discussions. A form on which to develop an Action Plan is located on the last page along with pages to take notes. It is recommended that you:

- **PRINT OUT the Discussion Guide** or the sections you’d like to discuss and provide each team member with a copy to review prior to beginning Module One.
- **USE the Discussion Guide** as you listen to the CD and then pause as a team to discuss key points and suggested actions. Questions are provided to encourage discussion.
- **USE the Action Plan** form located on the last page to identify necessary steps, assign a project owner and monitor your progress toward your determined completion date. You may want to consider posting this Action Plan where it is visible to all team members.

Module | ONE

Let's Get Started

This module covers the following topics:

- Creating an effective schedule and minimizing failed appointments by measuring and monitoring key trends in your practice
- Having your doctor develop a written vision statement and clearly communicate it with the entire team
- Evaluating your current schedule, imagining the ideal day and then creating systems and processes to achieve your vision and goals
- Pre-blocking using the “X-schedule” technique
- Training the team and retraining patients to avoid cancellations
- Creating a “failed appointment” policy

Additional training resources include role playing and scripts.

If you and your team are ready, begin the audio program.

Measuring and Monitoring Key Trends in Your Practice

You have to inspect what you expect of yourselves and your team by measuring performance, monitoring your progress, and identifying trends. That's why it's so important to identify what's not working and begin developing a plan to fix it, as well as identify what is working so you can celebrate. At the top of page 3, you'll find the top metrics to track and develop goals for many of them.

Example of a written practice mission/vision statement:

“Our practice will be the recognized leader in our community as a provider of superior dentistry and an exceptional patient experience, resulting in a growing patient base fueled by referrals and long-term patient loyalty. To achieve this we will treat each patient as if they are our honored guest, utilize the latest technology and dental techniques, and create and maintain a trust-based relationship with our patients.”

From this mission/vision statement, your team can develop “mini vision statements” for each goal and an action plan to achieve these goals.

Mini Vision statement	Action Plan
Doctor(s): <i>I (we) are dedicated to creating an environment that allows the practice to run smoothly with lower stress and increased productivity.</i>	Share and collect ideas with team on how you would like the practice to run. Add ideas, goals or new processes that lower stress to action plan to be implemented.
Doctor(s) and Team: <i>We are dedicated to creating a scheduling protocol which allows the patient to receive the highest quality care with little or no defects in the schedule.</i>	Design a template for ideal day scheduling to increase productivity, reduce stress, and effectively meet the needs of the patients and practice.
Doctor(s) and Team: <i>We are dedicated to implementing effective written and verbal communication skills which will lower confusion and improve relationships with our patients and the team.</i>	Write down suggested verbal skills to handle any situation that comes up in the practice. Examples: making financial arrangements, presenting treatment plans, handling objections, scheduling patients, creating a sense of urgency, dealing with cancellations and no-shows.
Doctor(s) and Team: <i>We are dedicated to creating a “can-do” attitude and atmosphere to ensure a positive environment for both our patients and our team.</i>	Develop a “contract” with the team regarding keeping a positive attitude regarding change and addressing concerns by offering possible solutions to the issue at hand.

DISCUSSION TIME

Q: Has your Doctor(s) developed a written mission/vision statement?

If so, has it been clearly communicated to your entire team?

Q: Does your practice reflect this mission/vision?

If not, how can you help your Doctor(s) create this important roadmap for the practice?

ACTION ITEM:

Use the Action Plan at the back of the Discussion Guide to identify this need and determine how you will work with your Doctor(s) to achieve this goal.

Creating an Effective Schedule

Creating an effective schedule begins with an understanding of what's working and what's not working. Using some of your practice metrics, on the left side of your paper identify what's not working and on the right side, identify solutions to these issues and problems.

What's Not Working

We consistently run 10–15 minutes late

Our Monday mornings are too full and Fridays too open

Solutions

Evaluate the time it truly takes for procedures and adjust scheduling accordingly

Begin using scripts that guide patients to times that are best for the Practice

Pre-blocking Your Schedule

Now, pre-block your ideal day. Here's how:

- 1 Determine ideal times to offer certain dental appointments, i.e., crown and bridge in am, root canals in pm, emergencies mid-morning and 1st appointment in pm, new patients in hygiene or in doctor op. Most software systems allow for color coding ideal times of days to offer certain appointments. Use this function — it will facilitate predictability.
- 2 Set verbal skills to always guide patients towards the ideal appointment available and give them two options. Most of the time they will choose one of two appointments offered.
Example: *"Dr. XYZ does this procedure in the morning...the next two appointments I have available are 8:00 on Monday or 9:00 on Wednesday...which would you prefer?"*
- 3 Determine how many emergencies happen in the practice each day (run a production by code report and look at total D0140 — problem focused appointments — performed each month and divide total by number of days worked to get the average. This is how many emergency appointments should be pre-blocked on the schedule. (Note: endodontists and oral surgeons generally have more emergencies and would need to take that into consideration.)
- 4 Determine how many new patients happen each month and divide by number of days worked. Pre-block for average new patients seen per day.
- 5 Determine how many quadrants of scaling and root planing are performed each month by running a production-by-code report for a set number of months and divide the total by the number of days worked in that period of time. Then, pre-block the schedule for that many quadrants.

Example:

- The average quadrants of DSRP done per month = 32
- Number of days worked = 16
- Pre-block 2-quadrants of DSRP appointments on the schedule per day

Keep your schedule worksheet in 10 minute increments.

12 top practice metrics to track:

- 1 Monthly units or production: crowns, bridges, scaling and root planing, passive income (tooth whitening — in-office, tooth whitening — home kit, products, etc)
- 2 Hours available for hygiene — each hygienist and operative schedule
- 3 Unfilled hours — open time on schedule (goal is < 5% for both doctor and hygienist)
- 4 Total number new patients (goal = 1-2 new patients per day)
- 5 Dollars diagnosed — new patients
- 6 Dollars accepted — new patients (goal = 85%. Calculate by dividing #5 by #6)
- 7 Dollars diagnosed — existing patients
- 8 Dollars accepted — existing patients (goal = 85%)
- 9 Production by provider
- 10 Number of cancelled and failed appointments (the goal is no cancellations or failed appointments, however typically there should be <1 cancellation per day per hygienist)
- 11 Total number of emergencies per month divided by number of days
- 12 Referral sources

It All Begins With a Vision

Your doctor needs to have a written mission and vision statement. This statement helps you — the dental team — develop the most effective and efficient systems and processes to meet that vision. Without one, you don't have a roadmap to follow and you'll all be heading in different directions.

A mission statement states what the company is now. The vision statement outlines what the company wants to be.

Steps to developing a vision and key components:

- Doctor(s) need to set the mission and vision for the practice and clearly communicate it to the team.
- The team needs to have a can-do and positive attitude towards these ideas and be dedicated to making the changes that will help the practice achieve their short-term and long-term goals.
- Write the statement with clarity and paint a vivid picture of the goal.
- Make sure your goals are realistic aspirations and are achievable and are in line with your values and culture.

DISCUSSION TIME

- Q: What are some of the problems you have identified?
- Q: What are some ways you can solve these problems?

ACTION ITEM:

Fill in your solutions as Action Items on the Action Plan, along with assigned champions and target dates.

X Scheduling

X Scheduling is a great way to develop an efficient schedule. First, you have to start by knowing how long each procedure typically takes. Here's how to effectively time procedures:

- 1 Take a stop watch to the treatment rooms and time each procedure from start to finish. Include seating the patient to dismissing the patient, re-sterilizing room and instruments.
- 2 Add 10 minutes to doctor time to allow for hygiene exams.
- 3 Factor in the average time it takes and be prepared to alter or customize the time for certain patients: fearful, talkers, complicated procedures, hard to numb.
- 4 Identify how much time is needed for each segment of every procedure done in the practice. See the X schedule worksheet (sample on page 9).

X-Schedule Worksheet

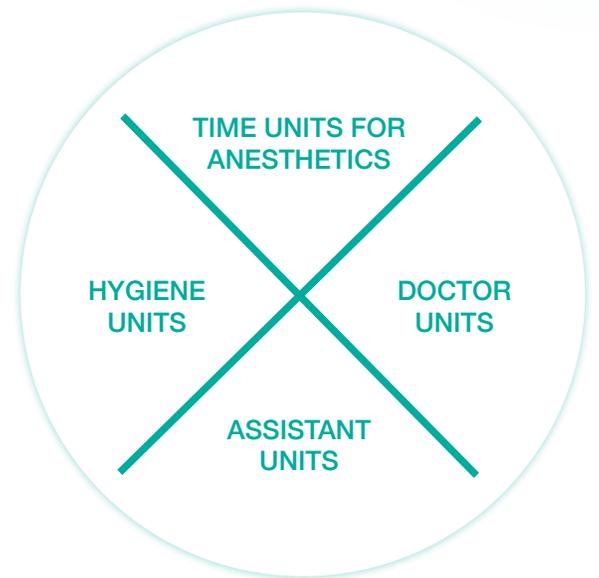
First, Design the “X” scheduling template. Literally draw an “X” on a piece of paper.

The top space in the “X” is where the practice would document how many time units are needed for anesthetics.

The right space is where the practice would document how many doctor units are needed.

The bottom space in the “X” is where the practice would document how many assistant time units are needed for the appointment.

The left space in the “X” is where the practice would document how many hygiene units are needed. However, if the practice is “paperless” they would communicate via the computer’s instant messaging system how many time units are needed for each segment of the appointment.



Example X-Schedule

For example, if the practice is scheduling for a crown, written communication would be listed as follows: 1-4-3 — which means 10-minutes anesthetic time/40-minutes doctor time/30-minutes assistant time.

- Be careful to allow enough time in the doctor’s time for doctor to do hygiene exam and allow enough assistant time to complete their function, i.e., make a temp, de-brief the patient, dismiss the patient, re-sterilize instruments, re-sterilize operatory and get next patient back.
- “X” scheduling also allows for customized appointment times keeping the patient’s unique needs in consideration, i.e., hard to numb, fearful, talkative patients.



“X” SCHEDULING EXAMPLE WORKSHEET
TIME UNITS NEEDED (1 time unit = 10 minutes)

PROCEDURE	TIME UNITS NEEDED ANESTHETICS	TIME UNITS NEEDED DOCTOR	TIME UNITS NEEDED ASSISTANT	TIME UNITS NEEDED HYGIENE
EXAMS				
COMPREHENSIVE EXAM	0	3	2	
EMERGENCY EXAM	0	1	2	
CONSULTATION	0	3	0	
PROPHY, PERIO, FLUORIDE				
CHILD PRO, EX, FL				3
CHILD PRO, EX, FL, BWX				4
ADULT PRO, EX				5
ADULT PRO, EX, BWX				6
ADULT PRO, EX, FMS				9
PROPHY-PARTIAL EDENTULOUS				5
FULL MOUTH DEBRIDEMENT				6
DSRP-2 QUADS				9
DSRP-PTL QUAD				6
PERIO MAINTENANCE ONLY				6
PERIO MAINT, EX, XRAYS				7

The “X” scheduling method is designed as a tool to customize the appointment for each “patient”. For instance, a patient who is hard to numb would need 2 anesthetic time units at the beginning of the appointment instead of the standard 1 time unit. A patient needing a crown and build-up with a tooth broken off at the gumline would need more doctor time units due to the complicated nature of the procedure. I also recommend adding 1 time unit to doctor’s time units to allow for proper hygiene exams. Also, remember when configuring assistant time units to include de-brief of patient, making temps, cleaning and sterilizing ops, sterilizing instruments etc.

To implement the “X Scheduling” method, I recommend copying the blank form beginning on page 11 to use in your own practice. Follow the example above as needed. Keep a laminated “filled-in” worksheet in each operatory and in administrative stations. The “X” can be figuratively speaking or actually placed in the patient’s chart. It depends if the practice is chartless or has paper charts. If the practice is chartless, the correct way to communicate to the admin team how much time is needed is 1-5-3 (example is for a crown where 1 time unit of anesthetic is needed, 5 time units of doctor time and 3 time units of assistant time).

DISCUSSION TIME

- Q: Why is it important to correctly time procedures?
- Q: How can having a more efficient schedule help minimize cancellations and no shows? Increase production? Reduce stress?
- Q: How would using the X Schedule Technique benefit your practice? How can you implement it at your practice?

ACTION ITEM:

As a team, review the X Schedule technique and use the following worksheets to time each procedure. If you haven't timed your procedures, add that as a task to your Action Plan. Determine your X Schedule implementation plan.

"X" SCHEDULING WORKSHEET

TIME UNITS NEEDED (1 time unit = 10 minutes)

PROCEDURE	TIME UNITS NEEDED ANESTHETICS	TIME UNITS NEEDED DOCTOR	TIME UNITS NEEDED ASSISTANT	TIME UNITS NEEDED HYGIENE
EXAMS				
COMPREHENSIVE EXAM				
EMERGENCY EXAM				
CONSULTATION				
PROPHY, PERIO, FLUORIDE				
CHILD PRO, EX, FL				
CHILD PRO, EX, FL, BWX				
ADULT PRO, EX				
ADULT PRO, EX, BWX				
ADULT PRO, EX, FMS				
PROPHY-PARTIAL EDENTULOUS				
FULL MOUTH DEBRIDEMENT				
DSRP-2 QUADS				
DSRP-PTL QUAD				
PERIO MAINTENANCE ONLY				
PERIO MAINT, EX, XRAYS				
EXTRACTIONS				
EXTRACTION-1ST TOOTH				
EXTRACTION-EA ADDT'L TOOTH				
AMALGAMS				
AMALGAM-1 SURF				
AMALGAM-EA ADDT'L SURF				
COMPOSITES				
ANTERIOR COMPOSITE- 1 SURF				
ANTERIOR COMPOSITE- EA ADDT'L SURF				
POSTERIOR COMPOSITE- 1ST SURF				
POSTERIOR COMPOSITE- EA ADDT'L SURF				
VENEERS				
PORCELAIN VENEER- 1ST two teeth				
PORCELAIN VENEER- EA ADDT'L TOOTH				

"X" SCHEDULING WORKSHEET

TIME UNITS NEEDED (1 time unit = 10 minutes)

PROCEDURE	TIME UNITS NEEDED ANESTHETICS	TIME UNITS NEEDED DOCTOR	TIME UNITS NEEDED ASSISTANT	TIME UNITS NEEDED HYGIENE
CROWN AND BRIDGE				
PORCELAIN CROWN-1ST TOOTH				
PORCELAIN CROWN- EA ADDT'L TOOTH				
CROWN-1ST TOOTH				
CROWN-EA ADDT'L TOOTH				
CROWN BUILD-UP-1ST TOOTH				
CROWN BUILD-UP EA ADDT'L TOOTH				
CAST POST & CORE BUILD-UP- 1ST TOOTH				
CAST POST & CORE B/U- EA ADDT'L TOOTH				
CROWN REPAIR				
TEMP CROWN				
SECTION BRIDGE				
3 UNIT BRIDGE				
BRIDGE-EA ADDT'L TOOTH				
PORCELAIN INLAY-1ST TOOTH				
PORCELAIN INLAY- EA ADDT'L TOOTH				
PORCELAIN ONLAY-1ST TOOTH				
PORCELAIN ONLAY- EA ADDT'L TOOTH				
RE-CEMENTS				
RECEMENT INLAY/ONLAY/VENEER				
RECEMENT POST				
RECEMENT CROWN				
RECEMENT RETAINER				
RECEMENT BRIDGE				
DENTURES & PARTIALS & REPAIRS				
IMMEDIATE DENTURE-1ST APPT				
IMMEDIATE DENTURE-2ND APPT				
IMMEDIATE DENTURE-3RD APPT				
IMMEDIATE DENTURE-4TH APPT				

"X" SCHEDULING WORKSHEET

TIME UNITS NEEDED (1 time unit = 10 minutes)

PROCEDURE	TIME UNITS NEEDED ANESTHETICS	TIME UNITS NEEDED DOCTOR	TIME UNITS NEEDED ASSISTANT	TIME UNITS NEEDED HYGIENE
DENTURES & PARTIALS & REPAIRS				
DENTURE/PTL-1ST APPT				
DENTURE/PTL-2ND APPT				
DENTURE/PTL-3RD APPT				
DENTURE/PTL-4TH APPT				
RELINE -1ST APPT				
RELINE-2ND APPT				
ADJUST DENTURE/PARTIAL				
DENTURE/PARTIAL REPAIR-1ST APPT				
DENTURE/PARTIAL REPAIR- 2ND APPT				
BLEACHING				
INTERNAL BLEACH-PER TOOTH				
BLEACH TRAY				
IN OFFICE BLEACH				
MISCELLANEOUS				
SEALANT-1ST TOOTH				
SEALANT-EA ADDT'L TOOTH				
INVISALIGN-INITIAL APPT				
INVISALIGN-CONSULT				
INVISALIGN-EA ADDT'L APPT				
SEDATIVE FILLING				
BITEGUARD-1ST APPT				
BITEGUARD-2ND APPT				
ANTI-SNORE APPLIANCE-1ST APPT				
ANTI-SNORE APPLIANCE-2ND APPT				
REMOVE SPACE MAINTAINER				
PULP TEST				
DIAGNOSTIC CASTS				

Training the Team and Retraining the Patient

To have a successful practice requires training. To move to the next level, as a team, you may need to adjust your mindset on how you communicate and interact with patients. Using scripts and verbal skills, we're going to change the way we talk to patients and our body language.

Example 1:

Team member: *"Mr. Patient, Dr. XYZ does this procedure in the morning. The next two appointments we have available are on Monday at 8:00 or Wednesday at 10:00...which one works best for you?"*

Patient: *"I need an afternoon."*

Team member: *"Through our experience, we have discovered that with this type of procedure, our patients are the most comfortable when it is done in the morning, Dr. XYZ is at his/her freshest and we can address any unexpected concerns early."*

Patient: *"Oh, I see...then, the 8:00 works best."*

Example 2:

Team member: *"Mr. Patient, I have an appointment available on Monday at 10:00 for you...you know, we only offer Monday morning appointments to our most reliable patients and congratulations...you are one of our most reliable patients!" (They would do anything first before they would cancel...because they don't want to disappoint you.)*

Example 3:

Patient: *"I need a late appointment"*

Team member: *"Great...the next two late appointments I have are 2:00 on Tuesday or 3:00 on Wednesday...which works best for you?" (Never presume the patient means 4:00)*

Example 4:

Dr XYZ: *“Mr. Patient, you have active decay on the molar on the upper right side. You also have two other teeth that have old large restorations. I recommend we replace all three restorations now to prevent any emergencies from happening down the road.*

This allows you to receive this care in two appointments versus several appointments.” (Include a benefit to the patient for taking your recommended appointment and perform more dentistry per appointment).

In scheduling, you control the appointment time. Give patients a choice, but only between the 2 or 3 appointment times you want this type of procedure to happen (refer to your ideal day and X Scheduling technique).

DISCUSSION TIME

REVIEW AND ROLE-PLAY THE PREVIOUS SCRIPTS.

Q: Do these scripts feel comfortable for you?
Are there ways you can enhance or modify the scripts to better suit your team’s comfort zone?

ACTION ITEM:

To enhance your verbal skills, you must be committed to practicing the scripts until they become “habit.” Determine your training and role-playing schedule and fill in your Action Plan at the back of the Discussion Guide.

Tolerance Policy for Failed Appointments

Every practice must have a predetermined policy for failed appointments. Develop a failed letter series and decide on how many failed appointments the practice will tolerate. (Take a good look at your dental software system. There are usually great template letters in your software system that the dental practice can customize.)

- A First letter:** Sorry you missed your appointment, let's get you re-scheduled.
- B Second letter:** We are concerned about you...delaying care may affect your overall dental and medical health.
- C Third letter...Fire the patient letter!** See sample "fire the patient letter" in module four.

The ADA recommends that you check with your state in which you practice dentistry regarding specific regulations and rules concerning terminating patients.

Your failed appointment policy should also include your policy on charging for failed appointments and if you will charge a fee to reserve the appointment. I am not usually a fan of charging for failed appointments. The average failed appointment fee charged is \$25-\$50. However, the average appointment value is \$150 in hygiene and \$750 in operative and charging a low failed appointment fee de-values the appointment and it can create an accounting nightmare. Many practices may charge 50% of the appointment fee to permanently reserve the appointment on the schedule. This is pre-paid and credited toward a future dental appointment. It definitely reduces cancellations and no-shows!

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DISCUSSION TIME

- Q: What is your tolerance policy for failed appointments?
- Q: Does your software provide these letters or will you have to create them?
- Q: What are the positives and negatives of charging a cancellation fee? How will it impact patient satisfaction and retention? How will it impact your accounting systems?
- Q: What are the positives and negatives of charging 50% to secure the appointment? How will it impact patient satisfaction and retention? How will it help minimize cancellations and no shows?

ACTION ITEM:

If you do not have a written tolerance policy for failed appointments, place it as a task in your Action Plan.

Additional Scripts and Role Playing Exercises

Example 1:

Dental team member: *“Mr. Patient, the fee for this appointment is \$2500. We have estimated a total dental insurance benefit of \$1000. Your estimated portion is \$1500. How would you like to handle payment for the estimated remaining balance?”*

Patient: *“Can’t I make payments like I always have?”*

Dental team member: *“Yes you can! We accept the CareCredit healthcare credit card. If you aren’t already a cardholder, you can apply right now. This will allow you to continue to make the monthly payment that fits into your lifestyle. We can do an application right now over the internet... would you like more information about that?”*

Patient: *"How does it work?"*

Dental team member: *"With special financing options from CareCredit, no interest will be charged if you make monthly payments and pay off your balance in full by the end of the promotional period. Here is a brochure with all the details."*

Example 2:

Patient: *"\$3000 sounds like an awful lot of money!"*

Dental team member: *"This dentistry is an investment and our goal is for you to keep your teeth for a lifetime. It sounds like you have some concerns regarding how this will fit into your budget."*

Patient: *"Yes."*

Dental team member: *"Well, fortunately we accept the CareCredit healthcare credit card which allows our patients the availability to make monthly payments if they are approved. I'd be happy to explain your options...how does that sound?"*

Patient: *"Sounds great!"*

Example 3:

Patient: *"I need to think about this. I am not sure I can afford it...I need to talk with my spouse."*

Dental team member: *"I completely understand. Perhaps we can have you and your spouse come in tomorrow so we can all go over payment options. Let's set up a time that would be good for both of you. Our goal is for you to make informed decisions so you feel the most comfortable."*

Patient: *"Sounds good...I don't make any important financial decisions without my spouse."*

Module | TWO

Creating Value in the Patient's Mind

This module covers the following topics:

- Pre-appointment communication techniques to get the patient to the next level of their needed dentistry
- Creating ownership and urgency by co-diagnosing with the patient
- Communicating the patient's "story" as your team passes off patients from team member to team member, reinforcing quality of care
- Establishing a system of informed consent and eliminating the element of surprise for your patient
- Providing your patient with payment options to increase treatment acceptance

If you and your team are ready, begin the audio program.

Pre-Appointment Communication Techniques

Creating value so the patient wants their needed dentistry involves the entire team. It is achieved by using communication techniques, such as creating ownership and a sense of urgency, and tools, such as digital imaging, to build the entire patient experience. First, identify the patient's "want" factor. What about their smile would they change if they could? Do they want a whiter, brighter smile? Do they dislike the shape of their teeth? Does food trap between their teeth? Do they have tooth pain? Once they identify what they "want," the doctor can diagnose what the patient "needs."

SCRIPT AND ROLE-PLAYING EXERCISES: PRE-APPOINTING PATIENTS

Example 1:

Hygienist: *"Mrs. Patient, Dr. XYZ has a concern about that tooth on the upper right. The doctor wants to reevaluate it at your next preventive appointment. Let's go ahead and schedule your next appointment. I will make a special note to reevaluate that tooth."* (Creating a sense of urgency predicts the best success for the patient keeping the appointment.)

Example 2:

Dental team member: *"I see that Dr. XYZ has recommended a crown on your upper right tooth. We will need two appointments for that procedure. The first appointment will take approximately 1½ hours and the second appointment will take approximately 30 minutes two weeks later. What questions can I answer for you about this procedure before we schedule?"*

Patient: *"I am not sure of my schedule. Can I just give you a call in a few days?"*

Dental team member: *"Actually, because of the notes I see here regarding the active decay you have, it is best not to wait to schedule. Why don't I schedule an appointment now and then you can check your schedule. That way, we can guarantee an appointment that works best for you. The doctor does these types of procedures in the morning, and the next two appointments I have available are Tuesday at 8:00 or Wednesday at 9:00. Which works best for you?"*

Get Your Patient Involved by Co-diagnosing

Creating value is not an isolated conversation with the patient. By asking your patients open-ended questions and encouraging a free-flowing dialogue between the patient and the practice, you can get the patient involved in their dentistry. Open up the discussion and get the patient to share more of the story regarding their teeth with the practice.

SCRIPT AND ROLE-PLAYING EXERCISES:
CO-DIAGNOSING

Example 1, using an intraoral camera:

Dental team member: *"Hi, Mrs. Patient. One of the first things I'd like to perform for you today is a tour of your mouth with this intraoral camera. I see you have a large filling on the lower right, do you see it?"*

Patient: *"Yes... what's that dark area next to the filling?"*

Dental team member: *"That may be decay. We will take a diagnostic film to be sure. I'll have Dr. XYZ take a closer look and evaluate the diagnostic film I'm going to take. I will save this to my screen. Has that tooth been sensitive?"*

Patient: *"Actually, it has been sensitive to cold and biting pressure."*

Dental team member: *"I will be sure to make a note of your concern and mention it to Dr. XYZ."*

Example 2, an emergency appointment:

(Note: See Emergency Patient Phone Information Slip/Sticker example on page 23)

Dental team member: *"Hello, Dr. XYZ's office. This is Lois, how may I help you?"*

Patient: *"Hi Lois. This is Mary Patient. I have a tooth bothering me."*

Dental team member: *"I am sorry to hear you have a toothache. Tell me what's going on with it."*

Patient: *"Well, it started to bother me a little last week... off and on, and now it's pretty constant."*

Dental team member: *"Mrs. Patient, so I can better prepare for your appointment, may I ask you a few quick questions?"*

Patient: *"Sure."*

Dental team member: *“What side of the mouth is your pain happening? Is it hot sensitive or cold sensitive?”*

Patient: *“It’s on the lower left side. It’s sensitive to hot.”*

Dental team member: *“Does it hurt more when you are lying down?”*

Patient: *“Yes.”*

Dental team member: *“Is it sensitive to biting pressure?”*

Patient: *“Yes.”*

Dental team member: *“Our office sets aside special appointments for our patients in pain. The next two opportunities to see you today are 10:30 or 2:00. Which works best for you?”*

Patient: *“Well, I really wanted to come in when I get off work . . . around 4:30.”*

Dental team member: *“I understand. Our next available 4:30 appointment is 3 weeks from this Thursday or 4 weeks from next Tuesday. Which works best for you?”*

Patient: *“You don’t understand . . . I am in pain!”*

Dental team member: *“I am so sorry. And I agree we really do need to see you today. Does 10:30 or 2:00 work better for you?”*

Patient: *“I guess 2:00.”*

Dental team member: *“Great . . . we’ll see you then. This will be an evaluation and get you out of pain appointment. Once you are seated, we won’t keep you more than 30 minutes. Then, we can appoint you at a time that is more convenient for you for the permanent procedure you may need.”*

Emergency Patient Phone Information Slip/Sticker

This sticker does double duty. First, use it to gather the critical information when the call comes in. Then, document the treatment on the same form and place it right in the patient's chart.

EMERGENCY INFORMATION STICKER SAMPLE						
DATE OF CALL		NAME			BP	
DENTAL PROBLEM						
LOCATION: TOOTH OR QUADRANT				DENTAL X-RAYS IN LAST YEAR		
SWELLING? <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> ORAL		<input type="checkbox"/> FACIAL		NECKPAIN? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> INTERMITTENT	<input type="checkbox"/> CONSTANT	<input type="checkbox"/> SHARP	<input type="checkbox"/> DULL	<input type="checkbox"/> THROBBING	<input type="checkbox"/> LOCALIZED	<input type="checkbox"/> GENERALIZED
SPONTANEOUS-INCREASED BY:		<input type="checkbox"/> COLD	<input type="checkbox"/> HEAT	<input type="checkbox"/> PRESSURE	<input type="checkbox"/> CHEWING	<input type="checkbox"/> LYING DOWN
COMMENTS:						
DATE OF EMERGENCY EXAM				[POS FINDING (+) (++) (+++) NEGATIVE (-)]		
TOOTH#	TENDER TO:	<input type="checkbox"/> PERCUSSION	<input type="checkbox"/> PALPATION	<input type="checkbox"/> PULP VITALITY	<input type="checkbox"/> HEAT	<input type="checkbox"/> COLD
TOOTH#	TENDER TO:	<input type="checkbox"/> PERCUSSION	<input type="checkbox"/> PALPATION	<input type="checkbox"/> PULP VITALITY	<input type="checkbox"/> HEAT	<input type="checkbox"/> COLD
SUBJECTIVE:						
OBJECTIVE:						
ASSESSMENT:						
PLAN/PRESCRIPTION:						

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Keep a batch of these stickers on hand so they are ready to use when you need them.

DISCUSSION TIME

- Q: How does your team currently create ownership and a sense of urgency with patients? Discuss some examples and share with the team.
- Q: Does the practice have an intraoral camera? If not, is there another type of equipment you use? How can your practice benefit from having this type of equipment in place?
- Q: Evaluate ways your practice can better handle emergency patients.
- Q: What are some examples of how your team has used co-diagnosing to create ownership with your patients? Relate success stories to each other.

ACTION ITEM:

Use the Action Plan at the back of the Discussion Guide to outline the tools your practice needs or communication skills you would like to enhance, and work with the Doctor and team to attain these goals.

Handing Off the Patient's "Story"

One proven technique that demonstrates that your practice is service-oriented and helps patients own their dentistry is the hand-off of the patient's story. The main idea here is for the patient to not have to repeat their story. When the patient calls the practice to schedule an appointment, the person taking the call needs to have the skills to ask the right questions and encourage the patient to share their dental needs and wants. After that, it's up to the team to "hand off" that information to the rest of the team so the patient feels understood the minute they arrive at the practice.

SCRIPT AND ROLE-PLAYING EXERCISES:
HANDING OFF PATIENTS

Example 1: Patient complaining about pain after appointment:

Patient (at the front desk): *"My tooth has really been hurting since my last appointment!"*

Dental team member: *"I am so sorry to hear that. Please tell me more. What kind of pain are you having?"*

Patient: *"Well, as soon as the numbness wore off, it was throbbing and cold sensitive. It's not throbbing anymore, but I didn't expect it to still hurt."*

Dental team member: *"I will let Dr. XYZ know you are here and relay your concerns to her."*

Patient: *"Okay."*

Dental team member (in front of doctor and assistant): *"Dr. XYZ and Mary, Mrs. Patient said her tooth has been bothering her since the numbness wore off and it has been very cold sensitive. She said it throbbed for a while but isn't doing that anymore."*

Dentist: *"I am sorry to hear that. Let me evaluate your tooth before I cement this crown. Periodically, with temporaries, there can be some sensitivity. That should subside once we cement the permanent crown. We will set a reevaluation appointment for a couple of days from now to be sure your tooth is feeling better."*

Example 2, handoff from clinical team member to administrative team member:

Clinical team member: *"Mr. Patient, now that we have completed your dental appointment, let's go see Lois so she can schedule your next appointment and get your receipt for you."*

DISCUSSION TIME

Q: Does your practice currently use an effective hand-off technique? What are some other ways you can make this process go more smoothly for you and the patient?

Q: Are there different methods your practice can use depending on different “types” of patients and the different concerns they may have?

ACTION ITEM:

Develop some communication techniques with the team to enable a seamless hand off of the patient and their story from one team member to another. Add creating a script or modifying an existing script to your Action Plan located at the back of the Discussion Guide.

Using Informed Consent to Enhance the Patient Experience

When it comes to an investment of time and money, hardly anyone wants to be surprised. So when unforeseen circumstances change the original treatment expectation, be sure to let everyone know upfront, starting with the patient, and including the front office staff or financial coordinator team member. Also, your practice should have a process for securing financial arrangements with the patient in advance. Remember, the more informed your patients are, the better they will be at making decisions.

Sample Financial Guidelines

- 1 Remember to always ask for full payment and then share your written financial guidelines that lists all your practice’s options with your preferred payment method first.
- 2 Have signage in your office framed and matted with this phrase: “Ask us about financing options!”

- 3 Be sure to display your CareCredit signs along with your signs from the various other credit cards you accept.
- 4 Roleplay the dental team discussing financial arrangements with patients.

Sample Payment Options

Use these payment options, or create your own, to create a foundation of payment alternatives which you can offer your patients.

Option 1: Payment in full at start of treatment with a 5% accounting adjustment. (Cash, check, credit card). Insurance reimburses patient directly.

Option 2: Payment of estimated fee minus estimated insurance benefits that insurance reimburses to practice.

Option 3: The CareCredit healthcare credit card.

Special Note: Any additional unexpected treatment will be discussed prior to treatment being rendered.

SCRIPT AND ROLE-PLAYING EXERCISES: DISCUSSING FEES AND PAYMENT OPTIONS

Example 1, presenting fee before scheduling:

Dental team member: *"Mr. Patient, the fee for those 3 crowns on the upper right is \$2700. How did you want to handle payment?"*

Patient: *"Can I pay monthly?"*

Dental team member: *"Absolutely. We accept the CareCredit credit card. We can do an application today. Do you want more information about that?"*

Patient: *"I am not sure I want another credit card."*

Dental team member: *"The CareCredit credit card is exclusively for healthcare expenses. If you are approved you can take advantage of special financing options with monthly payments. And having a CareCredit card frees you up to keep using your existing consumer credit cards for personal use. Would you like more information?"*

Patient: *"Can I use CareCredit for additional treatments in the future?"*

Dental team member: *"Yes of course! CareCredit is a credit card that can be used for subsequent treatment and care without having to reapply, subject to credit approval. Would you like to apply for CareCredit today?"*

Patient: *"Yes... let's go ahead and apply!"*

DISCUSSION TIME

- Q: How does your team make sure patients are not surprised by treatment or costs?
- Q: What types of appointments does your practice normally pre-appoint? Does your practice have a written procedure policy for handling these pre-appointments?

ACTION ITEM:

Customize a script for your own practice on how you can discuss payment options with your patients.

Make CareCredit marketing materials available for your patients to review and display CareCredit signs in the reception area and consultation rooms.

Additional Pre-Appointment Communications

Scripts and Techniques

Example 1, pre-appointing at consultation appointment:

Dental team member: *"Mrs. Patient, now that we have discussed your needed dentistry, what questions can I answer for you regarding scheduling and financial arrangements?"*

Patient: *"Well, I am not sure I can get off work for a bunch of appointments."*

Dental team member: *"I completely understand. It is for this reason that we like to schedule as much of the dentistry as possible in as few appointments as possible. We've discovered that our patients appreciate not having to leave work so many times. We can complete this dentistry in two appointments. How does that sound?"*

Patient: *"Will I have to pay for it all at once or can I make payments?"*

Dental team member: *"If monthly payments work better for you, we accept the CareCredit healthcare credit card. This assists our patients in fitting their payments more easily into their lifestyle. We also offer a 5% pre-payment courtesy for payment in full if paid by cash or credit card minus the amount insurance reimburses you at the scheduling of your treatment. Which one works best for you?"*

Patient: *"I'd like the monthly payment option."*

Dental team member: *"Great. Here's some more information about CareCredit. You can do an application and after you review the terms and conditions you will receive a credit decision almost instantly."*

Example 2, referring a patient to the specialist:

Dental team member: *"Mr. Patient, as you are aware, Dr. XYZ is referring you to a specialist to complete the initial phase of periodontal therapy. I would like to set that appointment up for you with the specialist today and then go ahead and set the return to our office appointment also. Let me place a quick call to the specialist to get you going. As you know, when you have completed the periodontal visits with the specialist, you will be alternating your preventive appointments between the periodontist and our office. We want to assist you in receiving the most optimal and timely care so we always offer to schedule that appointment for you."*

Patient: *"You set the appointment up for me?"*

Dental team member: *"That's right. We want to assure our patients that the specialist is an extension of our office and want you to have the best possible experience. I'll place the call to them now."*

Module | **THREE**

Techniques for Setting Appointments

This module covers the following topics:

- Using communication techniques starting with the initial phone call to minimize failed appointments
- Communicating urgency and importance of hygiene appointments
- Helping busy patients schedule their appointments
- Overcoming the patient's cost concerns before the appointment
- Conducting the fee discussion
- Using pre-blocking to create flexibility in your schedule and give your patients choices

If you and your team are ready, begin the audio program.

Communication Skills for Scheduling Success

Your first opportunity to communicate how much your practice cares for the patient, convey the patient's financial responsibilities, and demonstrate the level of service you provide is in that first phone call. You can set expectations by creating a high-level patient experience from this initial impression.

**SCRIPT AND ROLE-PLAYING EXAMPLE:
INITIAL TELEPHONE DIALOGUE**

Dental team member: *"Hello, Dr. XYZ's office. This is Lois, how may I help you?"*

Patient: *"Hi Lois, this is Mary Patient and I need an appointment."*

Dental team member: *"When was the last time you've seen Dr. XYZ?"*

Patient: *"Well, I've actually never seen Dr. XYZ before...this will be my first appointment with her."*

Dental team member: *"Oh, so you'd be a new patient to our practice! Welcome. You have chosen the right place. We're so excited to have you as a patient in our practice. If you wouldn't mind, may I take a few moments to ask you a few questions so that we can make sure that you have the best possible experience in this office?"*

Patient: *"Sure."*

Dental team member: *"Good. Besides your name and address and phone number which I will record for you now, who may we thank for referring you to our office?"*

Patient: *"It was my neighbor."*

Dental team member: *"Is your neighbor a patient? And your neighbor's name?"*

Patient: *"Betty Smith."*

Dental team member: *"Oh, Betty is one of our favorite patients. We love to see Betty's shining smile every time she walks through the door and we know that she would refer us someone just like her. We will send her a great thank you note and please tell her 'hello' when you talk to her next."*

Patient: *"I will."*

Dental team member: *"Now, tell us about yourself. Are there any specific dental concerns that you'd like to share with us at this time other than, of course, establishing yourself as a new patient in our practice?"*

Patient: *"Yes, one of my fillings in my tooth is starting to get sore. It seems like there's a gap happening."*

Dental team member: *"So, can you tell me a little more about the gap? Is it causing you pain all the time? Does it wake you up at night? Share with me a little bit more about that."*

Patient: *"No, it doesn't. It just feels different. I feel like something is wrong with the tooth."*

Dental team member: *"Well, here at XYZ Dental, we are dedicated to making sure that we meet all of your dental needs and keeping you as comfortable as possible is one of our main goals. With your permission, I'll make a special note and we'll pay special close attention to that area when you come in on your first visit. Let me share with you a little bit about what to expect on your first visit in our office. We like to make sure that you have the best possible experience so we give you a tour, we make sure that you get introduced to each team member, we perform, once we have you chair side, a comprehensive evaluation and we take any necessary diagnostic photographs and images to make sure the doctor can diagnose and enable your treatment needs. What questions can I answer for you about that first appointment?"*

Patient: *"How long will it take?"*

Dental team member: *"Generally speaking, for a new patient in our office, they see the doctor exclusively with a dedicated dental assistant, dedicated to our new patient experience. It takes about an hour and a half in our office. What questions can I answer for you about payment? How did you want to handle payment for that visit on Monday, January 6th?"*

Patient: *"I have to pay for the visit? For the consultation?"*

Dental team member: *"Generally speaking, our visits range anywhere from \$150 to \$350, depending upon your dental needs and we do ask for payment at the time of service."*

Patient: *"I guess I can pay by credit card, I think that's fine."*

DISCUSSION TIME

- Q: Role play and discuss how your practice handles new patients on the phone. Do you need to adjust your script.
- Q: How can your practice benefit from sending out a new patient welcome packet? What ideally would you include?
- Q: Who is your main contact person at the practice? Are they available during all office hours to handle your patients' questions? Does your practice provide training for that main point of contact so they can field patients' questions such as financing options?

ACTION ITEM:

Use the Action Plan at the back of the Discussion Guide to create or modify a new patient call script and work with the doctor and team to incorporate one in your practice.

Uncovering the Patient's Hidden Objection to Dentistry

The two primary reasons why patients cancel or miss their dental appointment and do not get the dental care they need are because of fear and cost. Unfortunately, patients are often reluctant to discuss these issues. The team needs to develop and use exceptional verbal skills to uncover these barriers.

Hygiene appointment cancellations, unlike operative appointments, are typically due to lack of urgency. But with the right verbal skills, you can help communicate urgency and importance to these patients.

Oftentimes, the patient may miss or cancel an appointment for logical reasons, such as an illness or being stuck in traffic. With these valid reasons, there are still opportunities for the team to overcome these obstacles using good verbal skills by walking the patient through not cancelling the appointment.

Another barrier for many patients is time. When they respond to your scheduling suggestions with reasons related to lack of time, first verify that time is truly the issue, then communicate the value and the benefits of having dentistry in terms of saving or optimizing their time.

SCRIPT AND ROLE-PLAYING EXAMPLES: UNCOVERING HIDDEN BARRIERS AND SCHEDULING “TIME POOR” PATIENTS

Example 1, busy working patients:

Dental team member: *“Mr. Patient, Dr. XYZ is ready to begin your dental treatment. I know you are busy working full time so let me search out a time that would be most convenient for you.”*

Patient: *“Well Lois, I have a hard time getting off work early for dental appointments. I guess I am going to have to check my schedule.”*

Dental team member: *“Mr. Patient, for busy patients like you, we offer lunchtime appointments. Additionally, are there any opportunities for you to take a well day or vacation day in the near future? We can customize the appointment for you by getting as much done as possible in a longer appointment. Which works best for you?”*

Patient: *“Hmmm...I never thought about taking one of my well days...I have several. Let’s go ahead and schedule!”*

Example 2, teacher:

Dental team member: *“Mrs. Patient, we have the school calendar here for you to review. Are there any special school holidays or in-service days you would like us to search for first? For instance, we are open on Columbus Day, and I see here that your school recognizes that as a holiday. This would prevent you from needing to get a substitute teacher that day. How does that sound?”*

Patient: *“Wow, I love that you have my school calendar. Let’s go ahead and schedule on Columbus Day since I have that day off.”*

Example 3, traffic-oriented time delays:

Dental team member: *“Mrs. Patient, because of that construction on I-35, we recommend you leave 15 minutes earlier than you would normally leave to come in for this appointment. I’ll call you the day before to remind you to leave early.”*

Patient: *“Thank you for the heads up! I’ll leave a little earlier.”*

The Benefits of Quadrant Dentistry

When you treat a quadrant or a section of a patient's mouth rather than one tooth at a time, the benefits are tremendous. By consolidating treatments into a longer appointment, patients can get their needed dentistry done in less visits. Encourage busy patients to take a well day or a half day vacation day to take care of their dental health-which optimizes their time in the long run.

- Reduces the number of visits patients need to make to the office
- Reduces antibiotic intake for patients on an antibiotic regimen
- Reduces the number of times patients will need anesthetic

DISCUSSION TIME

- Q: What reasons have you found most patients use to cancel appointments in your practice?
- Q: What are some ways your team can uncover hidden barriers, and what techniques are used to help patients overcome them?
- Q: How does your team handle busy patients? What are some ways you can communicate the importance and urgency of appointments to these patients?

ACTION ITEM:

Develop some scripts for different scenarios that your team can use to encourage patients to take ownership of their dentistry and be responsible for making their appointments.

Handling the Fee Discussion

Another interaction that sets the stage for failed appointments is during the fee discussion. As mentioned earlier, the two primary reasons patients do not go through with their much needed dentistry is cost and fear. Technology and education can help most patients overcome their fear issues. It's up to the team with their exceptional verbal skills to offer patients payment options to help them overcome cost concerns.

DISCUSSION TIME

- Q: What payment options does your practice offer patients? Are these options presented with the goal of encouraging patients to complete the recommended dentistry?
- Q: What types of questions do patients typically ask regarding payment? How can your team answer these questions while also reassuring the patient and making them feel comfortable?

ACTION ITEM:

Create new scripts or modify existing scripts your practice can use to present payment options to the patient and handle payment questions with ease.

Arrangements Help Patients Keep Their Appointments

We have found that when payment is tied to an appointment, patients are more likely to cancel or not show up. By setting up easy payment arrangements for your patients such as offering a 5% courtesy for full payment or accepting the CareCredit credit card, patients are more likely to keep their appointments.

SCRIPT AND ROLE-PLAYING EXAMPLES:
PRESENTING PAYMENT OPTIONS TO ENCOURAGE KEPT APPOINTMENTS

Example:

Dental team member: *“Mr. Patient, now that we have discussed your treatment and appointment needs, let me explain the different payment options we offer.”*

Patient: *“Can’t I just make monthly payments like I used to?”*

Dental team member: *“Actually, our payment guidelines have changed and we are no longer able to take monthly in-office payments. However, we accept the CareCredit credit card and you can make monthly payments if you are approved. May I share more about that with you?”*

Patient: *“Sure. I prefer to monthly payments.”*

Dental team member: *“Great. CareCredit has special financing options with monthly payments for approved cardholders. Would you like to hear more about that?”*

Patient: *“Wonderful. I’d like to see how much I’d pay monthly.”*

Dental team member: *“OK, listed here are the monthly payments for various special financing options available with the CareCredit credit card. Which would you prefer?”*

Patient: *“I’d like more time to pay.”*

Dental team member: *“Great. Let’s go ahead and get your application started. Once you’re approved, you’ll have a convenient way to pay for your treatment.”*

SCRIPT AND ROLE-PLAYING EXAMPLES:
SETTING FINANCIAL EXPECTATIONS AND RECEIVING
PAYMENT PRIOR TO TREATMENT

It can help minimize failed appointments to tie cost to the appointment.

Example 1, asking for payment at the time of service

Dental team member: *"We collect payment at time of service for all of our dental procedures. How would you like to handle payment today...cash, check, credit card or are you a CareCredit cardholder?"*

Patient: *"Tell me more about the CareCredit option."*

Dental team member: *"CareCredit is a healthcare credit card that has special financing options available with monthly payments. We can calculate your monthly payments for each of their options to see which is most comfortable for you. We can do that together now and submit an application once you review the terms and conditions, we'll have a credit decision almost instantly. Would you like more information about that?"*

Example 2, patient saw sign in your practice about payments:

Patient: *"I noticed your sign 'Ask about financing options.' What does that mean?"*

Dental team member: *"It means we pride ourselves in assisting our patients with financial arrangements and informing our patients of the various payment options available. We are sensitive to our patients who prefer to make monthly payments so we accept the CareCredit credit card for patient financing. We recognize that by breaking down your investment in your dentistry into monthly payments, it can be much easier for our patients."*

Patient: *"Can you tell me more?"*

Example 3, informing patient upfront about cost arrangements

Dental team member: *“Mr. Patient, we offer a 5% courtesy for payment in full if paid by cash or credit card before dental treatment begins...insurance reimburses you directly, based on your coverage.”*

Patient: *“Great...I’d like that option.”*

Dental team member: *“OK...the amount to be paid today is \$5350. That includes a 5% savings of \$267! Your dental benefit plan will pay you directly. If for any reason the treatment plan changes, we will discuss it with you and any additional monies due will be offered also at a 5% courtesy if paid by cash or credit card.”*

DISCUSSION TIME

- Q: How does your team set financial expectations with the patient?
- Q: Does your practice have a process in place to receive payment prior to treatment? How has this impacted your practice?

ACTION ITEM:

Create new scripts or modify existing scripts your practice can use to present payment options before the appointment and at time of service.

Pre-blocking Improves Productivity

The best strategy for making sure that the schedule remains consistent and productive is to pre-block the times on the schedule that you do preferred appointments. Pre-blocking provides your practice a dedicated time slot to schedule specific procedures, and when setting appointments, it allows the patient to choose from several appointments. For instance, let’s say the schedule for major dentistry is pre-blocked between 8 and 11 every day. You now have the flexibility to tell the patient “Doctor has the availability for this kind of procedure on Monday morning at 8 or Wednesday morning at 10. Which of these works best for you?” With effective scripts and the right verbal skills, you can guide the patient towards the certain times of day during the week, while allowing them to feel in control.

Sample Block Schedule

TIME	DR - OP 1	DR - OP 2	OVERFLOW OP	TIME	HYGIENE - 1	HYGIENE - 2
8:00	T MAJOR			8:00	SC & R PL	PERIO PRO
8:10	D			8:10	SC & R PL	PERIO PRO
8:20	D			8:20	SC & R PL	PERIO PRO
8:30	D			8:30	SC & R PL	PERIO PRO
8:40	D			8:40	SC & R PL	PERIO PRO
8:50	D	T MAJOR		8:50	SC & R PL	PERIO PRO
9:00	A	D		9:00	SC & R PL	
9:10	A	D		9:10	SC & R PL	
9:20	A	D		9:20	SC & R PL	
9:30		D		9:30		
9:40	A EMERG.	D		9:40		
9:50	A	A		9:50		
10:00	D	A		10:00		
10:10	A	A		10:10		
10:20	D			10:20		
10:30	D			10:30		
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11:20	D			11:20		
11:30	D	T MAJOR		11:30		
11:40	A	D		11:40		
11:50	A	D		11:50		
12:00	A	D		12:00	PERIO PRO	SEALANTS
12:10	A	D		12:10	PERIO PRO	SEALANTS
12:20	A	D		12:20	PERIO PRO	SEALANTS
12:30		A		12:30	PERIO PRO	SEALANTS
12:40		A		12:40	PERIO PRO	SEALANTS
12:50		A		12:50	PERIO PRO	SEALANTS
1:00	LUNCH	LUNCH		1:00	LUNCH	LUNCH
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1:50	LUNCH	LUNCH		1:50	LUNCH	LUNCH
2:00	RE-ORG TIME	RE ORG TIME		2:00	RE-ORG TIME	RE-ORG TIME
2:10	RE-ORG TIME	RE ORG TIME		2:10	RE-ORG TIME	RE-ORG TIME
2:20	RE-ORG TIME	RE ORG TIME		2:20	RE-ORG TIME	RE-ORG TIME
2:30	A EMERG.			2:30	SEALANTS	SC & R PL
2:40	D	T RESTOR.		2:40	SEALANTS	SC & R PL
2:50	A	D		2:50	SEALANTS	SC & R PL
3:00		D		3:00	SEALANTS	SC & R PL
3:10		D		3:10	SEALANTS	SC & R PL
3:20		D		3:20	SEALANTS	SC & R PL
3:30		D		3:30		SC & R PL
3:40	T RESTOR.	D		3:40		SC & R PL
3:50	D	A		3:50		SC & R PL
4:00	D	A		4:00		SC & R PL
4:10	D			4:10		
4:20	D			4:20		
4:30	A	D CONSULT		4:30		
4:40	A	D		4:40		
4:50	A	D		4:50		

Block Schedule

TIME	DR - OP 1	DR - OP 2	OVERFLOW OP	TIME	HYGIENE - 1	HYGIENE - 2
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DISCUSSION TIME

- Q: How can pre-blocking the schedule help your practice?
- Q: What kind of language can you use to help patients feel in control of their appointments?

ACTION ITEM:

Using the provided sample, create your own ideal schedule.

Module | **FOUR**

Confirmations and Cancellation Calls

This module covers the following topics:

- Placing a confirmation call so the patient is responsible for the appointment
- Using a “call to action” in reminder cards
- The right way to handle cancellation calls
- Tips on rescheduling patients
- The real costs of cancellations and failed appointments to the practice
- How to “fire” a patient with tact and diplomacy

If you and your team are ready, begin the audio program.

Placing the Confirmation Call

Confirmation calls are courtesy calls that help the patient be responsible for their appointment. But it can also be one of the main reasons patients cancel—which is why it’s important to choose your words carefully using proven communication techniques. Instead of saying words like “confirm” or “remind,” tell the patient you are making a courtesy call to let them know you’re on schedule and that you look forward to seeing them at their appointment.

Use the confirmation call as an opportunity to surprise the patient in a positive way, by positioning the practice as a very caring and involved team concerned about the patient’s oral health. Confirmation calls have also been found to be very effective when the doctor makes that call. When the dentist calls the patient to let them know he/she is looking forward to personally meeting them, the patient has the feeling of the highest level of quality care.

CONFIRMATION CALL EXAMPLE

Dental team member: *"Hello Mrs. Patient, this is Lois from Dr. XYZ's office.*

I am calling to let you know you are on our schedule tomorrow at 9:00 am and we are looking forward to seeing you."

Patient: *"Thanks for calling...I'll be there!"*

Note: This method of confirming works equally well when leaving a message. It's not mandatory that you request a call back; however, if you have a patient who tends to cancel and you feel you must request a call back, ask them to call you back regarding their appointment. They will be curious and return your call.

DISCUSSION TIME

Q: How does your team handle confirmation calls, and in what ways can your team make these calls more effective?

Q: Discuss other key words or phrases you can incorporate in your confirmation calls to reaffirm urgency and importance of the dentistry.

ACTION ITEM:

Create or modify a script to handle confirmation calls in your patient communications.

Using Reminder Cards

In an effort to minimize failed appointments, many practices use confirmation letters or postcards. Although this may seem like an effective and efficient way to communicate with the patient, it can also provide the patient with an invitation to cancel. Use reminder cards to get the patient to acknowledge receipt of the card instead.

- Avoid language that says “Call us 24 hours in advance if you need to cancel this appointment.” This provides the patient an opportunity to cancel.
- Instead, consider including a short philosophy statement, such as “We’re dedicated to your total well-being, and we look forward to seeing you soon.”
- Add a message to ask the patient to call and acknowledge receipt of the card —not to confirm the appointment. When the patient calls the practice, the team member can easily segue into a conversation to mark the appointment “confirmed” or offer them a courtesy call before the appointment. This helps ease the way towards letting the patient know that you’re looking forward to seeing them and it is their responsibility to be there for the appointment.

SAMPLE REMINDER POSTCARDS:

SAMPLE SCHEDULED APPOINTMENT REMINDER CARD

Dear Mr. Patient:

It’s time for your preventive dental cleaning and exam! Your appointment is listed below:

Thursday, August 16th at 9:00 AM. *Please call our office to confirm receiving this notice.*

Thank you! We look forward to seeing you soon.

Sincerely,

Dr. John Dentist

Dr. John Dentist

SAMPLE REMINDER CARD FOR PATIENT TO CALL OFFICE
TO SCHEDULE APPOINTMENT

Dear Mr. Patient:

It's time for your preventive dental cleaning and exam! Please contact our office ASAP to schedule your appointment.

Thank you! We look forward to seeing you soon.

Sincerely,

Dr. John Dentist

Dr. John Dentist

SAMPLE 90 DAYS OVERDUE APPOINTMENT REMINDER CARD

Dear Mr. Patient:

We are concerned about you. You are over 90 days past due for your continuing care appointment! Please call our office ASAP to schedule your appointment.

Thank you! We look forward to seeing you soon.

Sincerely,

Dr. John Dentist

Dr. John Dentist

SAMPLE 18-MONTH PAST DUE FOR CONTINUING CARE INACTIVATION LETTER

[Date]

Mr. J.P. Patient
1111 Average Lane
Someplace, USA 00000

Dear _____,

We are concerned about you! A recent audit of your dental record revealed it's been over 18 months since your last dental continuing care examination. Your last periodic examination date was _____. We would like to take this opportunity to invite you to call our office to schedule an appointment.

We acknowledge that you may have made other arrangements for your dental care. For your convenience, we have enclosed a postage paid card to indicate your status with us.

We want to help you maintain your mouth in as healthy a condition as possible. Preventive dentistry has been proven to help patients achieve optimum dental health. Please return the enclosed card or give us a call and let us know how we can help you.

Sincerely,

Jane Smith

Hygienist for Dr. John Dentist

SAMPLE 18-MONTHS PAST DUE FOR
CONTINUING CARE POSTCARD — SEND WITH LETTER

(BE SURE TO PUT A POSTAGE STAMP AND RETURN ADDRESS ON REVERSE SIDE)

Dear Dr. John Dentist:

- I can't believe it's been so long! Please contact me at _____
ASAP for an appointment.
- I'll call soon for an appointment.
- I do not wish to make an appointment at this time. Please maintain my file as active.
- I am presently seeing another dentist. Please forward my records to:

- Other (please explain):

Sincerely,

(please **print** name)

Send a postcard similar to the sample above, along with a copy of your 18-Month Past Due for Continuing Care Inactivation Letter. Be sure to put a postage stamp and return address on the reverse side.

Handling Cancellation Calls

Rather than accepting the patient's cancellation and rescheduling them, it's important that you talk with the patient and help them understand how delaying treatment can affect them in terms of additional decay or cost. When you give patients permission to cancel, you give them an opportunity to not reschedule their appointment.

SCRIPTS AND ROLE-PLAYING EXAMPLES:
HANDLING CANCELLATION CALLS

Dental team member: *"Hello, Dr. XYZ's dental office. This is Lois, how may I help you?"*

Patient: *"Hi Lois, this is Mr. Patient. I need to cancel my appointment."*

Dental team member: *"I am sorry. Can you tell me why you need to cancel this appointment?"*

Patient: *"I am just too busy."*

Dental team member: *"Mr. Patient, may I place you on hold for a moment while I pull your chart and discuss your needed dentistry with Dr. XYZ?"*

Patient: *"OK."*

Dental team member: *"Mr. Patient, Dr. XYZ would be so concerned that you are cancelling this appointment. Are you aware you have active decay? We wouldn't want you to delay this care and possibly cause more costly dental treatment. What can we do to help you keep this appointment?"*

Patient: *"Well, I guess I can rearrange my schedule... I'll be there."*

Dental team member: *"Great... we'll see you tomorrow at 11:00!"*

DISCUSSION TIME

- Q: What is your team's process for handling cancellation calls?
What can you do differently to have a greater level of success?
- Q: How can your team find out what the patient's ultimate concerns are for cancelling the appointment?
Discuss ways your team can entice the patient to not cancel their appointment by giving them solutions to their concerns.

ACTION ITEM:

Create or modify scripts to handle different reasons why a patient may cancel and how to help the patient understand the impact of their cancellation on their oral health and their future dental costs.

Rescheduling Patients

Inevitably, you will have patients who must cancel their appointment. When re-booking patients let them know that the doctor's time is valuable and last-minute cancellations do affect the practice. Ask again if there's anything you can do to help the patient keep the scheduled time. If they are not able to, reaffirm the importance of dentistry recommended and work together to find an open spot in the schedule that works for them. If, like many practices, your next open date is week out or more, ask the patient if he or she would like to be put on a "VIP list" to receive a call if the doctor can accommodate them earlier.

When a patient calls to cancel:

- Be concerned and disappointed when a patient calls to cancel their appointment
- Ask your patient, "What can we do to help you keep this appointment?"
- Never give them the next available appointment. Instead, reserve their next appointment out approximately 4-6 weeks. Then, offer to put them on your "priority list" if you get a "change in your schedule."

REMEMBER: when your dental chair does not have a patient in it...
Your are temporarily UNEMPLOYED.

How Much Do Cancellations and Failed Appointments Cost the Practice?

Hygiene Appointments

- Take the average hourly hygiene value X number of open hours = potential financial loss to the practice.
- If dental practice has even one failed or unfilled cancelled hygiene appointment per day, it translates to thousands of dollars in potential lost production.
- Example: If the average hygiene appointment is worth \$150 and there are 200 open unfilled hours on the schedule, it can translate to \$30,000 in lost hygiene production.
- For each additional hygiene day on the schedule, the potential lost production increases. Example: 2 hygiene days per day in practice with each hygienists having one open hour would double the potential lost production.

Operative Appointments

- The average operative appointment is worth \$700.
- A dental practice has one failed or cancelled operative appointment per week.
- \$33,600/year: The cost to the practice over an average of 48 weeks ($\$700$ (average operative appointment) \times 48 weeks = \$33,600)
- \$100,800/year: The cost to the practice a year if 3 operative appointments cancel or fail per week [$\$700$ (average operative appointment) \times 3 appointments/week \times 48 weeks = \$100,800]

When Firing a Patient:

- Follow the legal guidelines on how to handle terminating a patient. The ADA recommends that you check with the state where you practice for specific rules and regulations.
- You are required to send the patient a letter that states that you will treat their emergency needs for at least 30 days. It is a good idea to send the letter certified, registered returned receipt, to verify the letter was delivered and should the letter come back, keep it unopened with the stamped date to verify you attempted delivery.
- If you're already in the middle of a treatment for that patient, you are required to complete the treatment.

EXAMPLE OF A "FIRE A PATIENT" POLICY

Your dental software most likely has great template letters already written. You can modify it to customize the message for your practice. Here are some general messages to use as needed for patients who repeatedly cancel their appointments.

Letter #1: We are sorry you missed your appointment. Please call our office ASAP to get your appointment rescheduled.

Letter #2: We are concerned about you. As you are aware, delaying your care can be costly and compromising to your health. Please call our office ASAP to re-schedule your dental appointment.

Letter #3: "Fire the Patient" Letter. See sample.

* The ADA recommends that you check with the state in which you practice dentistry regarding specific rules and regulations concerning terminating patients.

SAMPLE FIRE THE PATIENT LETTER

[Date]

Mr. J.P. Patient
1111 Average Lane
Someplace, USA 00000

Dear _____,

Our practice was built on the philosophy that the patient is our most important concern. You have missed several appointments in our office in the last 6 months. Therefore, we feel that we can no longer meet your treatment needs. We are requesting that you seek your dental treatment at another office. We will treat your emergency needs for the next 30 days. Please let us know where we may send your dental records. For your convenience, listed below is the phone number to the local dental society to direct you to a new dentist of your choosing:

_____.

Thank you for giving us the opportunity to serve you.

Sincerely,

Dr. John Dentist

Dr. John Dentist

Recap on Cancellation Calls and Firing Patients

- 1 When a patient calls to cancel, always try to help them keep their original appointment.
- 2 When they DO cancel, never give them the next available appointment. Instead, schedule them out 4-6 weeks and offer to place them on your priority list. Then, call them back in 2-3 days to schedule. It creates a sense of urgency and will make your patient feel special instead of pressured.
- 3 Be concerned and compassionate.
- 4 If the patient really is sick, you don't want them in your practice — and possibly compromising the dental team's health, too.

DISCUSSION TIME

Q: Estimate how much your practice loses due to cancelled and failed appointments.

Q: Discuss and determine a tolerance level for patients who habitually fail their appointments.

ACTION ITEM:

Determine your "Fire a Patient" policy and develop a plan to incorporate the policy into your practice.

Words to Use...Words to Lose

DON'T SAY: "remind" or "confirm"

DO SAY: "We're letting you know you are on our schedule and we are looking forward to seeing you."

DON'T SAY: "patch," "watch," or "just"

Patches are for quilts and watches are for telling time. Besides, what are you going to watch a cracked tooth or active decay do...get worse? And when you add "just," it lessens the urgency.

DO SAY: "Dr. XYZ has a concern on the upper left...we will reevaluate this concern at your next dental visit."

DON'T SAY: "cost" or "price"

DO SAY: "fee" or "investment"

The general rule — it's a fee if it's under \$500 and an investment in their dentistry if it's over \$500.

DON'T SAY: "We have a "cancellation."

DO SAY: "We have a "change in our schedule."

DON'T SAY: "short call list," "quick call list," "ASAP list," or "sooner if possible list"

DO SAY: "priority list" or "VIP priority list"

NOTES