• Number of new patients
• Total office collections
• Total office production
• Accounts receivable balance
• Average production per hour for each doctor
• Average production per hour for each hygienist
• Number of broken appointments for doctor
• Number of broken appointments for hygiene
• Money collected on the day of visit
• % of production collected
• % of total office production from hygiene
• % of hygiene that is 4000 codes
• % of time filled for doctor
• % of hygiene time filled
Use: (1) As each item is completed throughout the day, initial each in the space provided. Do not sign off on any task that has not been completed. (2) If your practice has unique needs or duties that are not mentioned on the checklist, add them where applicable. (3) This checklist is to be turned into your immediate supervisor at the end of each day.

The Receptionist is to stay at the front desk, ALWAYS within hearing distance of the Phones and Patients. Skillful handling of phones and patients is the first priority of the position.

**Daily**

**Morning**
- Inspect the building and grounds for neatness, cleanliness, etc. upon arriving at the office.
- All trash receptacles are to be free of cigarette butts and trash.
- Straighten the mat at the front door.
- Unlock the front door.
- Turn on your computer, put on headset and Walkie-Talkie.
- Clock in.
- Turn on the lights in the reception area and make sure the air conditioner/heater is on.
- Straighten the Reception area.
- Turn on music, TV, DVD, etc.
- Make coffee.
- Listen and record the messages from the answering machine and return and/or route call to the appropriate areas.
- Confirm any patients unconfirmed on today’s schedule.
- Look over today’s schedule and get familiar with red tags and low credit ratings.
- Attend Morning Huddle.
- Monitor staff attendance.
- Monitor staff for appearance, nametags, etc.
- Receive 3 Day Report from Financial Coordinator for patients scheduled tomorrow.
- **8:30 am:** Begin confirming appointments for the next work day.
- Enter statistics from the previous day on Dental Dashboard.
- Send Broken Appointment post cards from the previous day.
- File charts from the previous day.
- Receive Route Slips and utilize the Route Slip Checklist.
- Verify that all new patients from previous day were entered on the Receptionist Activity Sheet and that all letters were mailed.
- __________

**Re: New Patients**
- As New Patients arrive have them complete their registration and give them “Our Policy Regarding Dental Insurance.”
- As New Patients arrive prepare the new patient records.
- Make a copy of the patient’s license and insurance card (if applicable).
- Verify that all information on the Registration Form is the same as entered into the computer.
- __________
• Create new patient records after the registration is completed and the patient information is verified.
• Route a copy of the insurance card to the Insurance Coordinator.
• Enter names of all new patients on the Receptionist Activity Sheet.

Throughout The Day
• Stay in the front desk area.
• Continue trying to confirm patients for the next work day.
• Become aware of open time on the schedule and fill it.
• Verify patient information (medical and contact info), etc. update as needed.
• Greet patients and inform the technical staff of their arrival.
• Make sure patients do not have to wait in the reception area.
• Answer the phone and route calls to the proper terminal.
• Fill out the New Patient Call Slip completely as they call for an appointment. Enter on the Receptionist Activity Sheet.
• Enter new patient information in the computer.
• Have existing patients fill out the Patient Information Update Slip.
• As patients arrive highlight their name in yellow on the master schedule.
• Keep the master schedule updated at the front desk.
• Schedule patient’s appointments for doctor and hygiene.
• Pull charts for patients added to the schedule.
• Type and send welcome letters to new patients.
• Type and send thank you letters to people that referred others.
• Type and send No Cavity letters.
• Type and send letters to patients that have moved or changed dentists.
• Type and send correspondence for doctor.
• Sign for incoming packages and route to the proper terminal.
• Offer to serve refreshments to patients.
• Enter treatment plans into the computer.
• Enter completed treatment into the computer.
• Check out patients collecting co-payments.
• Verify that all patients leave with an appointment.
• Handle emergency patients calling into the office and fill out the Scheduling Inquiry Slip.
• Keep the reception room presentable and magazines updated.
• Write school excuses for patients.
• Back up the Financial Coordinator with presenting treatment plans to patients. Record in the Treatment Plans Presented/Accepted Log.
• Make calls to patients for Recall, Reactivation and Incomplete Treatment. Enter on Recall and Reactivation Tally Sheet.
• Update and use Call Lists to fill open time on the schedule.
• Clock out before leaving for lunch.

Afternoon
• Clock in after returning from lunch.
• Check your mail box.
• Straighten the Reception area.
• Open and distribute the mail.
• Correct any returned mail and resend it.
• Review Route Slips for patient updates, enter changes in the computer.
• Pull charts for tomorrow’s patients.
• Locate patient records, if needed.

End Of The Day
• Check your mail box.
• Print and distribute schedules for the next day.
• Straighten the Reception area.
• Prepare for Morning Huddle.
• Enter stats on Dental Dashboard.
• Close out credit card machine.
• Prepare records for the next day’s appointments by putting in order, etc.
• Take home the names of unconfirmed patients and try to reach later.
• Straighten work area.
• Transfer phone to answering machine.
• Turn off music, TV, DVD, etc.
• Clock out before leaving.
• Turn off lights; make sure the air conditioner and/or heat is adjusted for the evening.
• Lock front door.

As Needed
• Repair patient’s charts.
• Perform chart audits.
• Call in prescriptions.
• Handle patient upsets.
• Scan documents into patient’s accounts.
• Inactivate accounts for patients that have moved, changed dentists or passed away.
• Monitor broken appointments.
• Receive Time Off Requests and mark attendance record.
• Keep a calendar of all office and doctor activities.
• Work on special projects, under the direction of the doctor.
• Maintain office equipment (computer, fax, copier, Dr’s laptop, software, phone, etc.).
• E-mail referring doctors on case updates.
• Scan documents into patient’s accounts.
• Practice marketing.
• Maintain warranties, contracts, service agreements, etc.
• Distribute office keys.
• Safeguard alarm codes, security codes, and passwords.
• Set up and maintain interoffice mail center.
• Make travel arrangements for doctor and staff.
• Empty the shredder.
• Clean the staff lounge/kitchen.
• Keep a current list of all employees, birthdays, and contact info.
• Route birthday cards to Doctor and Office Manager.
• Send baby gifts, flowers, sympathy cards, etc.
• Order patient education materials.
• Order children prizes/treats.
• Prepare the building for winter freezes.

• ________________________________________________________________

Weekly

• Each Monday, generate and print Incomplete Treatment Report.
• Using a checklist, verify status of office supplies.
• Send list of needed supplies to doctor for approval. Place order.
• Order postage, if needed.
• Each Wednesday, generate and send appointment cards to pre-scheduled hygiene patients scheduled 3 weeks away.
• Each Thursday [if off Friday] mail reminder cards for Monday appointment.
• Make sure you have an adequate supply of forms and other supplies at your desk area. Copy forms as needed using the original, or print from computer.
• Keep business cards at the reception counter and reception area stocked.
• Update office calendar.
• Keep doctor’s personal schedule and put on work calendar.

• ________________________________________________________________

Monthly

• On the 15th, generate and send recall cards to hygiene patients due next month without an appointment.
• Prepare for and attend staff meetings.
• Order food for staff meeting.
• Prepare for staff/doctor birthday celebrations.
• Take and type minutes from staff meeting.
• Take inventory of business cards and order if necessary.
• Take inventory of office stationery and order if necessary.
• Take inventory of recall and appointment cards and order if necessary.
• Keep magazine subscriptions current.
• Decorate the office for the appropriate holiday.

• ________________________________________________________________

Yearly

• Order and deliver Christmas cards and gifts.
• Complete the Reactivation Project each January.

• ________________________________________________________________
General Administrative
Sample
Financial/Insurance Coordinator Checklist
Chair B – Two Person Front Desk

Name: _______________________   Date: ______________

Use:  (1) As each item is completed throughout the day, initial each in the space provided. Do not sign off on any task that has not been completed.  (2) If your practice has unique needs or duties that are not mentioned on the checklist, add them where applicable.  (3) This checklist is to be turned into your immediate supervisor at the end of each day.

Daily

<table>
<thead>
<tr>
<th>Morning</th>
<th>Initial as Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Turn on your computer.</td>
<td>_____</td>
</tr>
<tr>
<td>• Clock in.</td>
<td>_____</td>
</tr>
<tr>
<td>• Look over today’s schedule and get familiar with patients who owe money.</td>
<td>_____</td>
</tr>
<tr>
<td>• Attend Morning Huddle.</td>
<td>_____</td>
</tr>
<tr>
<td>• Account for Route Slips from previous workday; send to Chair A.</td>
<td>_____</td>
</tr>
<tr>
<td>• Generate and work the 3-Day Report.</td>
<td>_____</td>
</tr>
<tr>
<td>• File patient records and other items.</td>
<td>_____</td>
</tr>
<tr>
<td>• Enter statistics from previous day in Dental Dashboard.</td>
<td>_____</td>
</tr>
<tr>
<td>• Check your mailbox.</td>
<td>_____</td>
</tr>
<tr>
<td>• Receive Route Slips and utilize the Route Slip Checklist.</td>
<td>_____</td>
</tr>
<tr>
<td>• Receive any messages from the Receptionist and return calls.</td>
<td>_____</td>
</tr>
<tr>
<td>•</td>
<td>_____</td>
</tr>
</tbody>
</table>

Re: New Patients: This is a backup to Chair A

<table>
<thead>
<tr>
<th>Daily</th>
<th>Initial as Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>• As New Patients arrive have them complete their registration and give them “Our Policy Regarding Dental Insurance.”</td>
<td>_____</td>
</tr>
<tr>
<td>• As New Patients arrive prepare the new patient records.</td>
<td>_____</td>
</tr>
<tr>
<td>• Make a copy of the patient’s license and insurance card (if applicable).</td>
<td>_____</td>
</tr>
<tr>
<td>• Verify that all information on the Registration Form is the same as entered into the computer.</td>
<td>_____</td>
</tr>
<tr>
<td>• Create new patient records after the registration is completed and the patient information is verified.</td>
<td>_____</td>
</tr>
<tr>
<td>• Route a copy of the insurance card to the Insurance Coordinator.</td>
<td>_____</td>
</tr>
<tr>
<td>• Enter names of all new patients on the Receptionist Activity Sheet.</td>
<td>_____</td>
</tr>
<tr>
<td>•</td>
<td>_____</td>
</tr>
</tbody>
</table>

Throughout The Day

<table>
<thead>
<tr>
<th>Daily</th>
<th>Initial as Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Verify patient information (medical and contact info), etc. Update as needed.</td>
<td>_____</td>
</tr>
<tr>
<td>• Enter patients on appropriate Call Lists if they do not schedule needed appointment or if they break an appointment.</td>
<td>_____</td>
</tr>
<tr>
<td>• Verify insurance benefits.</td>
<td>_____</td>
</tr>
<tr>
<td>• Enter and update patient insurance information in the computer.</td>
<td>_____</td>
</tr>
<tr>
<td>• Fill out the New Patient Call Slip completely as they call for an appointment.</td>
<td>_____</td>
</tr>
<tr>
<td>• Present treatment plans to patients. Record in the Treatment Plans Presented/Accepted Log. Send the slip to Chair A for entry on the Receptionist Activity Sheet.</td>
<td>_____</td>
</tr>
<tr>
<td>• Send insurance claims to batch.</td>
<td>_____</td>
</tr>
<tr>
<td>• Print insurance forms (if can’t be filed electronically) and mail.</td>
<td>_____</td>
</tr>
<tr>
<td>• Back up the Receptionist/Scheduler with:</td>
<td>_____</td>
</tr>
<tr>
<td>a) Answering the phone.</td>
<td>_____</td>
</tr>
</tbody>
</table>
b) Greeting patients and inform the technical staff of their arrival.

c) Check out patients collecting co-payments.

d) Make calls to patients for Recall, Reactivation and Incomplete Treatment. Enter on Recall and Reactivation Tally Sheet.

e) Update and use Call Lists to fill open time on the schedule.

f) Scheduling patient’s next appointment (if not done in the back).

g) Verifying all patients leaving the office have a future hygiene appt. or recall date.

- Pull and evaluate credit reports.
- Assign, and update credit ratings.
- Take phone calls from patients about insurance and finance.
- Handle emergency patients calling into the office and fill out the Scheduling Inquiry Slip.
- Write school excuses for patients.
- Set up financial arrangements with patients (arrange 3rd party, if needed).
- Print and review route slips for patients added to the schedule.
- Make collection calls to patients with past due balances.
- Make Collection Calls and enter outcome on Collector’s Stat Sheet.
- Perform all updates, deletions, and additions of insurance information in the computer and on the patient’s record.
- Give the patients a copy of “Our Policy Regarding Dental Insurance.
- Clock out before leaving for lunch.

Afternoon

- Clock in after returning from lunch.
- Check your mailbox.
- Post incoming checks received in mail (payments and insurance).
- Make adjustments to patient’s accounts due to insurance participation.
- Mail statements after insurance checks are posted.
- Mail claims if they can’t be sent electronically.
- Generate and print Route Slips for patients coming in the next day.
- Attach Route Slips to Patient Records making notes on Route Slips.
- Pull records for patients coming in the day after tomorrow.
- File or scan E.O.B.’s.

End Of The Day

- Check your mailbox.
- Prepare for Morning Huddle.
- Transmit electronic claims. Verify that none failed. Handle, if necessary.
- Run all necessary reports and verify/balance totals.
- Prepare bank deposit for that day.
- Complete and send to doctor, the Daily Audit Checklist to Doctor.
- Go to the bank.
- Route the 3 Day Report to Scheduling Coordinator for patients scheduled the day after tomorrow.
- Straighten work area.
- Back up the computer.
- Clock out before leaving.

As Needed

- Handle requests for additional info from insurance companies.
- Write and submit narratives to insurance companies.
• Send off secondary insurance claims.
• Process requests for patient refunds.
• Process Care Credit applications.
• Turn accounts over to collections.
• Work on special projects, under the direction of the doctor.
• Take call when assigned.
• Handle computer software support.
• Scan documents into patient’s accounts.
• Handle patient upsets.
• Call in prescriptions.
• Empty shredder.

________________________________________________________

**Weekly**

• On Monday, generate and print Aged Insurance.
• Call insurance companies (Monday) about outstanding insurance claim entering results on the Aged Insurance Call Log.
• On Monday, generate and print A/R Aging Report.
• Monitor and maintain petty cash in the office.
• Verify that electronic claims have not failed. Handle, if necessary.
• Make sure you have an adequate supply of forms and other supplies at your desk area. Print from original.

________________________________________________________

**MONTHLY**

• Run monthly reports and place in binder.
• Month-end close-out of computer software.
• On the 23rd of each month, prepare statements, with needed notes.
• Print and mail statements on the 24th of each month.
• Complete and send to the doctor the *Monthly Audit Checklist to Doctor for the previous month.*
• Turn accounts over to collections, after receiving Doctor’s approval.
• Prepare for and attend staff meeting.

________________________________________________________

**Yearly**

• Run reports and place in binder.
• Close out the year.

________________________________________________________
Receptionist
Telephone Inquiry Survey

Instructions:  
[1] Put a tally mark next to each procedure / service inquired about by callers and/or existing patients.

Month: _______________________

<table>
<thead>
<tr>
<th>How Did They Hear About Us:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing Patient</td>
</tr>
<tr>
<td>Insurance</td>
</tr>
<tr>
<td>Internet / Website</td>
</tr>
<tr>
<td>Mailer</td>
</tr>
<tr>
<td>Newspaper</td>
</tr>
<tr>
<td>Phone Book</td>
</tr>
<tr>
<td>Radio / Telephone</td>
</tr>
<tr>
<td>Referral from Doctor</td>
</tr>
<tr>
<td>Referral from Patient</td>
</tr>
<tr>
<td>Sign [Outside]</td>
</tr>
<tr>
<td>1-800- Dentist</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How many said they had “NO Money?”</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many did not schedule?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service Type Requested</th>
<th>Tally Marks</th>
<th>Appointment Made [tally mark]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Want to Schedule a Cleaning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shopper / Cost of Cleaning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Patient / Walk-In</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shopper / Cost of Crown</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bleaching Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extraction(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthodontics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dentures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service Asked About [Internet Office]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accepting New patients</td>
</tr>
<tr>
<td>File Insurance</td>
</tr>
<tr>
<td>Medical card</td>
</tr>
<tr>
<td>Number of Doctors on Staff</td>
</tr>
<tr>
<td>Number of Hygiene on Staff</td>
</tr>
<tr>
<td>Pain Medicine Required</td>
</tr>
<tr>
<td>Payment Plans</td>
</tr>
<tr>
<td>PPO Inquires</td>
</tr>
<tr>
<td>Treat Children</td>
</tr>
<tr>
<td>Request Early / Late Appointments</td>
</tr>
<tr>
<td>Request Weekend Appointments</td>
</tr>
</tbody>
</table>

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## Classic Practice Resources, Inc.

Create Lasting Impressions for New Patients

<table>
<thead>
<tr>
<th>Answer [Check One]</th>
<th>Points of Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### RATE YOUR PRACTICE

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A live person answers the telephone.</td>
</tr>
<tr>
<td>The person answering the telephone is pleasant and good at multi-tasking.</td>
</tr>
<tr>
<td>An answering machine is rarely used during office hours.</td>
</tr>
<tr>
<td>A patient is never informed about a broken appointment fee when they call the office to make their initial appointment.</td>
</tr>
<tr>
<td>There is an exact protocol for gathering information each time a new patient calls.</td>
</tr>
<tr>
<td>A new patient is rarely scheduled more than 1 week away.</td>
</tr>
<tr>
<td>A welcome letter is mailed to the new patient, before the appointment date, (if time allows) or within 3 days after their initial appointment.</td>
</tr>
<tr>
<td>Doctor personally signs each welcome and thank you letter.</td>
</tr>
<tr>
<td>The new patient is asked to arrive early to fill out forms, but they don’t know they are coming early.</td>
</tr>
<tr>
<td>Staff know the practice website address.</td>
</tr>
<tr>
<td>Staff know the menu of services offered in the practice.</td>
</tr>
<tr>
<td>The practice would not ask patients to go to the website to download forms before the appointment unless the patient asked specifically.</td>
</tr>
<tr>
<td>Doctor personally calls the new patient the day before the appointment to welcome them.</td>
</tr>
<tr>
<td>The practice allows patients to come in for a cleaning on their first visit.</td>
</tr>
<tr>
<td>Doctor meets the new patient somewhere other than the treatment room.</td>
</tr>
<tr>
<td>Doctor learns the patient’s chief complaints and goals before doing the initial exam.</td>
</tr>
<tr>
<td>Morning Huddle includes an announcement of new patient names and appointment times.</td>
</tr>
<tr>
<td>Staff make it a point to say “hello” and welcome new patients (even when they’re not scheduled with them).</td>
</tr>
<tr>
<td>Patients are escorted to the front desk and there is an exact protocol for ”the handoff”.</td>
</tr>
<tr>
<td>Patients are received by all staff as if they were seeing an old friend from school.</td>
</tr>
<tr>
<td>As patients exit the office, all staff in the area say ”good-bye”.</td>
</tr>
<tr>
<td>Exterior lights are turned off during the day.</td>
</tr>
<tr>
<td>The office sign looks sharp and is in good condition.</td>
</tr>
<tr>
<td>The parking lot is free of trash.</td>
</tr>
<tr>
<td>The grounds are well manicured.</td>
</tr>
<tr>
<td>There is no peeling of paint and the building looks fresh and clean.</td>
</tr>
<tr>
<td>The shingles on the roof are in good condition.</td>
</tr>
<tr>
<td>Walls are clean with updated pictures.</td>
</tr>
<tr>
<td>Floors are clean (free of scruff marks and stains) and updated.</td>
</tr>
<tr>
<td>The windows are clean.</td>
</tr>
<tr>
<td>The doors are free of scuff-marks and dirty hand prints [if the door is glass, it is free of fingerprints].</td>
</tr>
<tr>
<td>There is no trash near the front door and the mat is updated and clean.</td>
</tr>
<tr>
<td>There are no dead bugs or animals on the ground outside.</td>
</tr>
<tr>
<td>There are no dead bugs in the light fixtures or around baseboards.</td>
</tr>
<tr>
<td>The best parking spaces are reserved for patients.</td>
</tr>
<tr>
<td>Patients receive a complimentary umbrella if it is raining.</td>
</tr>
<tr>
<td>The lights are on and working in the office.</td>
</tr>
<tr>
<td>All magazines in the reception room are current.</td>
</tr>
<tr>
<td>There is patient education in the reception room.</td>
</tr>
<tr>
<td>Waiting patients are offered bottled water, coffee or a soft drink.</td>
</tr>
<tr>
<td>The reception room is clean, tidy, updated and free of dust.</td>
</tr>
<tr>
<td>You do not utilize a sign-in sheet.</td>
</tr>
<tr>
<td>The office restrooms are clean and stocked.</td>
</tr>
<tr>
<td>You have complimentary toothbrushes and toothpaste in the restrooms.</td>
</tr>
<tr>
<td>Answer [Check One]</td>
</tr>
<tr>
<td>--------------------</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Sometimes</td>
</tr>
</tbody>
</table>

**RATE YOUR PRACTICE**

- Staff cell phones are turned off during office hours.
- Staff do not have personal conversations around the patients.
- The hygienist or dental assistant, seeing the patient, spends 70 - 80% of the time talking about dentistry rather than other topics.
- Once there is a treatment plan, the patient goes to a private area for financial arrangements.
- The patients are talked to in terms of monthly payments and not large dollar amounts.
- Dental procedures are put in layman terms so that the patient will understand.
- A patient receives a copy of their treatment plan and financial agreement when made.
- Financial arrangements are made in advance, with all patients, before the appointment is given.
- Patients are rarely, if ever, left alone in the treatment room.
- Our office stays on schedule and patients seldom wait more than 5 - 7 minutes in the reception area.

**RESULTS**

<table>
<thead>
<tr>
<th># Answered &quot;Yes&quot;</th>
<th>Office Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>55</td>
<td>5 Star Service Practice: Patient Service is Excellent!</td>
</tr>
<tr>
<td>44 - 54</td>
<td>4 Star Service Practice: Patient Service is Good</td>
</tr>
<tr>
<td>38 - 43</td>
<td>3 Star Service Practice: Customer Service Needs Improvement</td>
</tr>
<tr>
<td>Less Than 37</td>
<td>2 Star Service Practice: Customer Service Needs Overhaul</td>
</tr>
</tbody>
</table>

★ ★ ★ ★ ★
### Upset Patient Alert Form

**Use:**
1. Print this form on Goldenrod colored paper.
2. When a staff member notices that a patient is upset or is not happy with this office in any way, this Alert Form is immediately started.
3. **ALL** staff members are responsible for helping the office keep **ALL** patients happy with their services.
4. As each step is completed, the staff members should put their name and completion date in the space provided.

<table>
<thead>
<tr>
<th>Staff Member:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / 1. Describe in as much detail as possible the particulars regarding the unhappy patient, including WHAT occurred, WHEN it happened and WHO was involved. Use the back or an additional sheet if necessary. Route this form to management.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Management:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / 2. Immediately calls the patient and does a full and complete handling of the upset. Give details on the conversation below, use the back or an additional sheet if necessary. If it is absolutely necessary to involve the doctor to handle the upset, then do so.</td>
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<thead>
<tr>
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<tbody>
<tr>
<td>/ / 3. After the situation has been resolved, route a COPY of this Alert Form to the Doctor, so he/she is aware of the problem and the resolution.</td>
<td></td>
</tr>
<tr>
<td>/ / 4. Also, route COPY(s) of this Alert Form to the staff member(s) who created or neglected the situation that resulted in the need for management to step in.</td>
<td></td>
</tr>
<tr>
<td>/ / 5. Also, send COPY(s) to the appropriate staff personnel files and the original to the permanent patient records.</td>
<td></td>
</tr>
</tbody>
</table>
In order to help our clients feel more comfortable, the following terminology guide has been developed. Keep a copy of this and review it occasionally to refresh yourself.

<table>
<thead>
<tr>
<th>TRY SAYING</th>
<th>INSTEAD OF</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Reception Room”</td>
<td>“Waiting Room”</td>
</tr>
<tr>
<td>“Confirm”</td>
<td>“Remind”</td>
</tr>
<tr>
<td>“Fee”</td>
<td>“Price or charge”</td>
</tr>
<tr>
<td>“Dr. is attending a continuing Education Class”</td>
<td>“Dr. is on vacation”</td>
</tr>
<tr>
<td>“Dr. had to make an outside call and will be back at…”</td>
<td>“Dr. is out”</td>
</tr>
<tr>
<td>“May I tell him who’s calling?”</td>
<td>“Who is calling?”</td>
</tr>
<tr>
<td>“Receipt, statement, explanation of charges”</td>
<td>“Bill”</td>
</tr>
<tr>
<td>“Agreement”</td>
<td>“Contract”</td>
</tr>
<tr>
<td>“Courtesy Credit”</td>
<td>“Discount”</td>
</tr>
<tr>
<td>“Payment arrangements or payment schedule”</td>
<td>“Financial arrangements or policy”</td>
</tr>
<tr>
<td>“Paperwork”</td>
<td>“Forms”</td>
</tr>
<tr>
<td>“Could you please hold?”</td>
<td>“Wait a minute”</td>
</tr>
<tr>
<td>“Take care of”</td>
<td>“Pay your bill”</td>
</tr>
<tr>
<td>“Investment”</td>
<td>“Cost or money”</td>
</tr>
<tr>
<td>“Sandy is on the other line. May I take a message or help you with anything?”</td>
<td>“Sandy is busy.”</td>
</tr>
<tr>
<td>“Approve,” “authorize,” “OK”</td>
<td>“Sign”</td>
</tr>
<tr>
<td>“Treatment Room”</td>
<td>“Operatory”</td>
</tr>
<tr>
<td>“Let me work on the schedule”</td>
<td>“Booked Up”</td>
</tr>
<tr>
<td>“We have a change in the schedule”</td>
<td>“We have a cancellation”</td>
</tr>
<tr>
<td>“Dr. is ready to see you”</td>
<td>“Come on back”</td>
</tr>
<tr>
<td>“Dr. is with a patient”</td>
<td>Dr. is busy”</td>
</tr>
<tr>
<td>“Consultation”</td>
<td>“Case Presentation”</td>
</tr>
<tr>
<td>“Former Patient”</td>
<td>“Old Patient”</td>
</tr>
<tr>
<td>“Interruption in the Schedule”</td>
<td>“Running Late”</td>
</tr>
<tr>
<td>Change</td>
<td>Cancellation</td>
</tr>
</tbody>
</table>
Office Management
Morning Huddle Agenda

Today’s Date

Use: 1] This agenda is filled out at the Morning Huddle by the Office Manager or designated person. 2] The huddle is scheduled 10 to 15 minutes prior to the arrival of the first patient. 3] Each attendee should receive a copy of the schedule for that day. 4] The doctor and team will examine the schedule, learn valuable information about the patients, look for opportunities and review statistics.

Scheduler: Provide attendees with today’s schedule.

Production Target met for the prior work day: Office [ ] Yes [ ] No
Doctor #1 [ ] Yes [ ] No
Doctor #2 [ ] Yes [ ] No

Hygiene Department

Hygiene Name: 1) Name
2) Name
3) Name
4) Name

Production Target Met
4000 Codes
$__________
$__________
$__________
$__________

# of Patients Seen

Stayed on Schedule? [ ] Yes [ ] No
[ ] Yes [ ] No
[ ] Yes [ ] No
[ ] Yes [ ] No

Scheduler: We had ______ broken appointment. Patients that broke appointments were:

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>Status / Account Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td></td>
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<tr>
<td>2)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>Status / Account Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>3)</td>
<td></td>
</tr>
<tr>
<td>4)</td>
<td></td>
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</tbody>
</table>

Office Goals

Goal Met For:

<table>
<thead>
<tr>
<th>Goal Met For:</th>
<th>Today</th>
<th>Tomorrow</th>
<th>Day After Tomorrow</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Office</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
</tr>
<tr>
<td>Doctor #1</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
</tr>
<tr>
<td>Doctor #2</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
<td>[ ] Yes [ ] No</td>
</tr>
</tbody>
</table>

Total office production this week is [ ] Above or [ ] Below Target by $__________

We have ________ patients unconfirmed for today. They are: __________________________________________

# Units of Open [Green] Time today for: Doctor #1 _________ Doctor #2 _________ Total Hygiene Department _________

Premeds today are: (using the printed schedule, call out the patient’s name)

Consultations today: (Dr. should have received chart and models on his desk)

Patients Scheduled with birthdays this week are:

<table>
<thead>
<tr>
<th>1) Name / Appointment</th>
<th>2) Name / Appointment</th>
<th>3) Name / Appointment</th>
<th>4) Name / Appointment</th>
</tr>
</thead>
</table>

We have ______ new patients on the schedule today. They are:

<table>
<thead>
<tr>
<th>New Patient Name</th>
<th>Appt. Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td></td>
</tr>
<tr>
<td>2)</td>
<td></td>
</tr>
</tbody>
</table>

Accounts Receivable: Read today’s “Red Tags,” highlighted pink on the schedule and give the suggested handling for each.

Insurance: Patients coming in today with incomplete treatment and remaining insurance benefits are:

<table>
<thead>
<tr>
<th>1)</th>
<th>2)</th>
<th>3)</th>
<th>4)</th>
</tr>
</thead>
</table>

Lab-Technical

Confirm that all lab cases for the next two work days are in the office. [ ] Yes [ ] No
Confirm that all POT calls from the previous day are complete. [ ] Yes [ ] No If not, contact the patients.

Name two good things that happened in the office yesterday:
1) ________________________________________________________
2) ________________________________________________________

Emergency Time: __________________________________________

Copyright ©1997-2014 Classic Practice Resources, Inc. All Rights Reserved
Most staff members are terribly ill-prepared to handle the patient to boom your practice. Most offices thus depend upon the in-coming call to survive. Below are the simple basics on how you can interest your patients enough to get them paid up and scheduled for their exams, treatments and maintenance. Read, study, and practice the scripts until you understand them well.

1. TOO BUSY

This person is in a hurry, always in a rush, flying off in every direction, or all of a sudden has gotten overwhelmed with some problem or state of events.

Handling

Mrs. Brown: “I’m too busy to come in now.”

Scheduler: Looking at the chart and knowing she has three children and is a housewife, say something like “I’ll bet you are busy, keeping up with three children!”

Mrs. Brown: “Oh yes, blah, blah, blah, . . . .”

Scheduler: (Let the patient talk and be a good listener. Then acknowledge her and remember to keep your attention on your goal. “That’s good you’re taking care of everybody like that”, or, “It really does sound like you’re busy. Maybe we’d better schedule you for two to three weeks away. The appointment book is pretty filled up until then anyway, and in two to three weeks we can get your favorite appointment time for you.

Mrs. Jones: “I can’t come in for awhile. I’m really busy right now.”

Scheduler: Find out what it is that is keeping her tied up like this by asking something like, “Is it with your work (exams, your schedule, etc.)?”

Mrs. Jones: “No, I have company here for two more weeks.” Or, “No, I have exams till the middle of May.”

Scheduler: Acknowledge whatever it is that they tell you. Do not say something like: “You’re not too busy for something so important as your dental health.” Instead say, “I really do know how busy you are so let’s not put it off any longer than the end of May. I see you like Wednesday mornings -- how about Wednesday, May 22nd at 10:30?”

Mrs. Jones: “Well, you can put me down for it, I guess.”

Scheduler: "Well, good! I hope we can work out a schedule so you can get alot done at one time to save you lots of trips." (She'll think of all the time she's saving.)
Mrs. Jones: "Well, that sounds great." (They're really ready now.)

Scheduler: “Okay, don’t worry. It will be no problem to change the appointment if you need to, as long as I know a couple of days in advance.”

Mrs. Jones: "Okay, put me down."

Scheduler: Sets date on book. If this is a patient with a good credit history and credit rating, we do not mention finances. If it is a patient with a bad credit history, we say, "Now, how do you plan to handle the fee for your visit?" Get their answer and if the person isn't sure, work it out or connect them with the Financial Coordinator.

2. UPSETS

Let’s take a situation where the patient has not been in for quite some time, and you’re not sure why. They may or may not have a balance due on their account. However, if they do have a balance due, under no circumstances do you mention money or their past due account. At this point you do not know if they do or do not have an upset.

Handling

As always, first establish good rapport with them. Then find out "what's up" by asking:

Scheduler: “How was your last visit here?

Patient: "Well, actually that tooth I was having trouble with is still bothering me some." (They didn’t have their problem totally handled when they were in before and are upset about it.) Or the patient says, “I was not happy with the fee that was charged for the last treatment.

Scheduler: You may need to keep asking questions in order to find out all about the upset or the situation so you can handle it. They may say their last visit was "okay," but you detect a hint of reluctance. Continue with:

1. "Did anything happen that upset you?"
2. "Is there anything you wanted handled here that was not done?"
3. "Did you come here for something that was not done?"
4. "Is there anything that we failed to do for you?"

If they have a genuine upset and want to handle it, they now have an open invitation. If they tell you that they are upset about something, ask them what it is and then just listen to them and don't take it personally or get upset yourself!

Do not disagree with what they tell you. Acknowledge what they say. Do not interrupt a patient when they are telling you why they are upset. Let them have their say completely before answering them. Encourage them to tell you all of it. Like water in your gas tank, you're better off to empty the tank before putting more gas in. If you cannot handle the situation, get the information to the doctor so he can. Tell the
patient you are sure that the doctor will want to know about this and will want it straightened out right away.

You can let them know you care by saying something like,

"I understand what you're saying (patient's name), and I know that it's very important to Dr. Goodtooth to make sure that every one of his patients is happy with the service they receive in this office. I'm going to get this information to him as soon as possible. I know he'll want to get the situation straightened out with you so we can get back on track taking care of your dental needs. Now, just let me get this straight as to exactly what happened . . . ." (Get all the details and write them down.)

Or,

"I see you are upset about this. Let me understand it so we can get it straightened out. Tell me all about it."

See the section "Handling Complaints" in the policy "Telephone Etiquette: General Rules and the Handling of Complaints."

The Scheduling Coordinator ensures she gets all the specifics regarding the upset from the patient. After she has all the information, the Scheduling Coordinator tells the patient, "(Patient's Name), I am going to give this information to the doctor, and either he or I will get back to you as soon as possible. (Verify patient's phone number). Good-bye."

Be sure the details of the conversation are written up for the doctor and routed to him as soon as possible. Once the upset is resolved, the patient will usually schedule with ease. The honest patient who doesn't have his own axe to grind will usually respond in a positive manner to this type of approach. But make sure you handle the upset because A PATIENT WILL NEVER PAY OR SCHEDULE UNTIL WHAT THEY ARE UPSET ABOUT IS HANDLED.

A Note of Importance

Sometimes, a patient will hold on tightly to their upset no matter what you do for them. Thankfully, the world is not filled with these people, so don't feel too badly if you have done everything within reason to rectify a patient’s upset and they still refuse to let it be resolved. You can be sure that your office is not the only group of people this patient is trying to make miserable.

Patient Says the Cleaning Hurt Their Teeth

If you encounter a patient who says that the cleaning hurt their teeth, proceed as follows:

1. Ask if they remember which hygienist worked on their teeth.
2. If the hygienist is,
   a. still with the practice, explain to the patient that we are not going to let the
      hygienist hurt them again. Say, "We will get with the hygienist and let
      them know they need a lighter touch this time. Some patients' gums are
      more sensitive than others and we'll let the hygienist know about your
      situation." Or you can schedule them with another hygienist.

   b. no longer with the practice, let the patient know that. Also assure the patient
      that they would be happy with (the new/another) hygienist.

3. Let the patient know you will note on their record to make sure they are not hurt
   again. Note the patient's record on the Green Scheduling Card.

3. PERSONAL PROBLEMS

This might be almost anything: the patient is getting a divorce, has a broken leg, their
house burned down, they have an infected ingrown toenail, they've been in the hospital,
they had a death in the family, their dog died, or they've had a hysterectomy.

A serious illness or death in the family would be a reason to express condolences
and/or send good cheer, flowers, etc. Empathize with them and let them know you will
make sure to put them down for later and that is the least you can do to help out, but for
them to feel free to call you if they need anything in the meantime.

   Handling

Other than very morbid conditions, people with personal problems can be handled
easily. Just find out what is really causing them problems and messing up their life.
For a broken arm, been in the hospital, or other physical health problem cases, you can
say:

Scheduler: "With those problems you probably haven’t been able to take care
of your mouth as well as you would like and that really wreaks
havoc on your teeth and gums. I suggest we put you down on the
schedule for about a month from now (or whatever appropriate
convalescent period is). The appointment book is full for two to
three weeks ahead. If you're still not doing well in a month, we can
always change your appointment as long as we know a couple of
days ahead." (Then go ahead and schedule them.)

For those getting a divorce you can say, "Well you at least ought to have all of your
dental work up to date." They'll get the idea.

A personal problem is very easy to handle if they can just get their body to the office.

4. FEAR

The first thing to remember about a fear case is that they most likely are not going to
tell you that they are afraid. They won’t admit that they are “too scared to go to the
dentist.” They don’t want you to think less of them. In fact, most of them don’t want
you to know they are scared at all. So, you are going to have to find out that they are
scared by listening closely to their excuses that won’t “hold water” and by observing their actions closely. Studies show that fear is a major factor in people’s reluctance to visit the dentist.

**Handling**

If you detect that the patient is giving you flimsy excuses and you suspect that they are a fear case, inquire about their last service with questions like these:

“The last time you were in for a cleaning, did it bother you?”
“Who cleaned your teeth?”
“Was she gentle?”
“Were your teeth sensitive afterward?”
“How was your last visit here?”

Let the patient know that we are simply preventing them from having to have more work done in the future. You need to let this type of patient know that this fear is really ruining their dental health and that poor dental health can wreck their life with pain and expensive problems down the road.

Make them the following assurances:

1. "**The Hygienist can be instructed to be especially gentle in their case.**" If you have two hygienists, you could offer to put them with another one and let them know it's totally okay.

2. "**The Doctor has newly developed techniques for local anesthetics to completely deaden the teeth and he can do it in such a way that the patient is completely comfortable.**"

3. Let them know that their decision to come in is the best thing for them.

4. Tell them that you’ll "**look out for them and make sure everyone knows they are to have a comfortable visit.**"

5. Let them know that they will be happier and healthier.

6. Tell them that they will be proud of themselves for doing it.

**Once you have their agreement, get them in as quickly as possible—the same day if possible.** If they are scheduled several days later, you'll most likely have to go through the same procedure on the confirmation call, so mark it on the appointment book that this is a **fear case.**

**5. CAN’T MAKE A DECISION**

This is the questioning person who can’t make a decision. If you let them, these people will drag things out forever. They ask zillions of crazy questions, change the subject, etc., all in an attempt to smoke-screen their way out of having to make a firm decision. This is their **modus operandi** (method of operating) for how they generally handle their lives. You can hand them an answer on a silver platter and they still won’t take it.
When you attempt to answer their questions, your answer never satisfies them or resolves the situation. They always think of something else to ask, or another reason not to come in. These people can really exasperate you! They may ask as many as a dozen questions, but don’t lose your cool or show any signs of being upset or they will become more introverted and get upset, and you will lose them. These people are confused. A very small percentage will do it as a ploy, but the majority just can’t make a decision. They just don’t seem to understand or be able to decide.

Handling

The only way to handle them is to get them to realize (nicely) they’re putting it off, that they have to take a stand, and that they have to commit to handling their dental health (specific problem).

Say, "You know, sometimes it's really hard to decide that you’re just going to have to make time to keep up your dental health. We all know we sure can find lots of reasons not to go to the dentist. (Be sympathetic with that line.) But we just have to say, 'That's it; I'm doing it!' I don't want to suffer the consequences."

As a last resort, schedule them to come in to see the doctor for a no charge visit (when the doctor will probably again look in their mouth). Make sure this is slotted for a non-productive time (see "Setting Up the Right Size Appointment Book"). and note on the Green Scheduling Card they get a free visit. During this meeting, it’s easier to handle them in person. Show lots of concern and repeat the above lines.

Other "nudges" include:

1. “You can't afford not to have this done.”
2. “Are you concerned about losing your tooth (teeth)?”
3. “Can you see something needs to be done?”

6. UNAWARE OF NEED

This patient may tell you, “I’m not having any problems now,” or “I’m doing fine; I don’t need to come in now,” etc. He does not perceive he needs any treatment, prevention or anything else.

He may mistakenly believe that he has to be in pain before he sees the need to make an appointment to go to the dentist.

Handling

What you do in a case like this is just do the Chart Summary and find out what motivated the person to come to the office in the first place, or find some notations on his chart of his problems with his mouth, as well as what treatment he has had in the past. Stress prevention of cavities and periodontal disease. Explain to them how prevention works and the benefits of maintenance care.
One other thing you can do is ask them, “Are you sure there’s nothing wrong?” Then tell them: “When it gets to the point that it hurts, it’s usually too late.” This sometimes gets them to begin considering the possibility of coming in for a checkup “just to be sure” there aren’t any big problems.

7. FINANCIAL PROBLEMS

This is one of the main excuses patients give as an objection to scheduling and is actually used universally to “kill a sale.” When a patient gives this excuse to you, it can either be a) real, b) a false perception the person has, or c) an untruth or deception (more commonly known as a lie).

There are many different ways a person may tell you they have financial problems, but it all boils down to, “I can’t afford it!” Such a statement is a generality which usually is not true. What this does is avoid the specific details and generally “stops” the other person (in this case, the Scheduling Secretary). Most people don’t know how this works and fall victim to this general statement and give up the chase at that point, therefore killing the sale or transaction. In other words, it’s such a general thing to say, ”I can’t afford it!”, and you just don’t know how to go in on it. Also, many consider it’s bad manners to enter this domain. It can, however, be handled. Let's look at how this works.

Handling for "Real"

Occasionally or rarely this may be the case. Most likely, the person has a distorted sense of values. They are probably spending more wasted dollars elsewhere than they would spend on preserving their health. It is our duty to point out the real needs that they have and their false economy from waiting and negligence. If they are unaware of their dental needs, these should be brought into their awareness. See how to handle the objection, “Unaware of Need.”

Scheduler: “If there was a way to handle your dental problems that was affordable, would you come in?” Or, “If I could show you a way that you could afford to do your dental work, would you be glad about that?”

They will almost always say “yes” to that. If they don’t, they really didn’t get or understand what you were saying, so explain it to them again. Then work out an arrangement by using your accounts knowledge and creativity.

For the rare one when everything else fails, we can offer them an alternative treatment plan that may cost less and “buy them some time” until more permanent solutions (treatments) can be done. The goal here is to prevent them from losing teeth. Check with the doctor on this and he may be able to change the treatment plan. However, try to make sure it is not a false perception or untruth or deception they are pulling before you suggest this as a solution.

Handling for "False Perception"

Some people may think they cannot afford dental care when actually they can. Most people are very poor financial managers and when their money gets tight they think in
generalities and even fool themselves. They may even have a small amount of money in savings earning six percent interest and put off dental treatment of cavities at twenty to thirty dollars per surface, and they create a need for endodontics at six to ten times that!

**So, this person does not perceive how the neglect of their mouth is the expensive way to go.** They do not understand that *they cannot afford not to do it*. They do not realize the consequences of procrastination. They think about or see a problem that they do not have and tell you it is a fact and use that as an excuse. If you understand this, you are way ahead of them and have the knowledge to bring them to the right decision to come in and get their dental problems taken care of.

Scheduler: "Mr(s). __________, sometimes money is tight and people have to be cautious about their spending. Getting real value becomes even more important. Timing is important when you're looking for the best value. That's why I wouldn't want you to put off taking care of your cavities. You could end up having to spend six to ten times more for endodontics later, or lose a tooth which will have to be replaced."

**Handling for "Untruth or Deception"**

Often people will manufacture the excuse that they "have no money", when that is not really the case. They may use this as an excuse to try to stop the Scheduling Secretary from even attempting to schedule them, and all the while they do not want to tell you the real reason they are avoiding the dentist. This could be any one of the other objections, but is most likely either fear, upset, unaware of need, personal problem, or can't make a decision.

Having "no money" is an easy way out. Handle them by questioning them about the other objections until you find out what's really bothering them. Once you have the real reason, handle it and they will usually schedule easily.

Scheduler: "Mr(s). __________, I know sometimes money is tight and people have to be cautious about their spending. But let me ask you, how was your last visit?" (You're acknowledging them but now checking for other objections.)

**Handling Complaints of High Fees**

It may happen that you get a patient who says, *"Your fees are too high."* It's important to know what to say. Show surprise and say, *"Our fees are too high?"* and wait for their response to see what they have on their mind. Sometimes people do not say what they mean. They might think it should cost less, or they may think they cannot pay the whole fee now and require monthly payments over a period of time. This is where you must find out exactly what they are upset about and handle it with good communication skills. Ask,

- "What do you think was too high?"
- "What would have been a fair fee in your mind?"
- "I suppose it is possible a mistake could have been made."
They may be asking for a reduced fee. If they are a senior citizen over the age of 65, you can tell them they are entitled to a five percent discount.

For anyone else, however, say things like, "Mr(s). __________, I know it may seem that way but our fees are really in line and we are proud of our fees."

"I'm glad you are concerned about the cost because that is one of our advantages for the quality work we do. People remember poor quality more than they remember a fair fee and Dr. Goodtooth really does quality work."

"Dr. Goodtooth is an excellent dentist and he has such a good reputation. He really tries to go the extra mile to take care of his patients. He is always available to you, even on Saturdays, Sundays and holidays when necessary. He takes very good care of his patients."

"Back to the fees, Dr. Goodtooth keeps the fees in line in the acceptable (or average) range. He stands behind everything he does."

    Or

"We charge very fair fees for the highest quality of service and treatment and we always go that extra mile to take good care of you. We will make sure you get the best of treatment."

If they insist the fees are higher than others, show them a fee comparison schedule (which by the way, shows nothing about the high quality of care that is delivered).

"Mr(s). __________, I am glad you brought that up and I appreciate how you feel. Our fees are very fair fees especially compared to others in this area and nationally. Here, I'll show you a comparison of our fees with others if you like. (Show them a list of fees compared with other offices in the area and around the nation for the services they are getting.) Also, Dr. Goodtooth is well recognized for his excellent work."

If the fee is higher (which is very rare) say, "Our fee is only two or three percent more than the average and less than the usual and customary. We definitely do make the extra effort to give you excellent service and quality. Our extra service is worth more, but we don't charge for it."

    Or

"Are you concerned about a small extra fee, or the high quality of service? If you pay too little and don't get what you need or want, you waste your time and money. You know, you get what you pay for."

If They Want to Change Dentists Because of Fees

If you fail with the above, say, "Let me have Dr. Goodtooth call you. I know he will care how you feel." If they refuse, the doctor may call them anyway.

If they are really "solid" and will not budge, say, "I will tell Dr. Goodtooth and I know he will miss you. We'll still have your records on file, so if you ever have an emergency or any problems at all, just give us a call."
Your Ace in the Hole

Regardless of the objection, if you reach an impasse and can’t schedule them on the phone, you have an ace in the hole, which is to just *get them into the office* so the doctor can check them out and make sure they are not about to come apart. You can let them know that you will get the doctor to *just look at them* and you will make sure that they are not charged for the exam. This way you will make a friend and it will be much easier to work with them in the future. The patient will be grateful and will really know that you care about them. This is effective, but should be used only as a last resort.
Scheduling

Use Trigger Words

- Pus
- Pain
- Infection
- Uncomfortable
- Throbbing
- Hurt
- Blood
- Cancer
Scheduling

Recommended Treatment

The PCC will attach this slip to the PCF so the technical staff is aware of needed treatment. Technical staff will initial below after verifying.

Patient Name ___________________ Date ____________

_____ Needs Pano/FMX       Date of last Pano/FMX ________
  ❑ Never had Pano or FMX

_____ Needs Perio Charting       Date of last Perio Charting______
  ❑ Never Had

_____ This patient should be on Perio Maintenance

Is a hygiene recall appointment needed? ❑ Yes    ❑ No

Patient has incomplete treatment on the Green Card. ❑ Yes    ❑ No

Check Patient Objections that apply:
❑ Too Busy    ❑ Upsets    ❑ Personal Problems    ❑ Fear
❑ Can't Decide    ❑ Unaware of Need    ❑ Financial Problems

Technical Staff Initials_____________________

Notes:

Copy Purple

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Use: 1] The following formula will assist you in determining recall effectiveness and patient retention in your practice. 2] The goal is to have 75% of your patients returning back to the practice each year. 3] It will also provide you with the number of hygiene days needed, each month, in your practice.

<table>
<thead>
<tr>
<th>Practice Name</th>
<th>Date Completed</th>
</tr>
</thead>
</table>

1. **Enter the Number of Active Patients** (In within the past 12 months)  
   a. Multiply the results of #1 x 2 (Each patient needs at least 2 recall appointments per year)  
   b. Divide results in 1a by 12 (For the number of months)  
   c. Multiply the results of 1b X 75% (Retention Target)  
   Equals Monthly Core Patient Base Target  
   #1 Results

2. **Enter Your Current New Patient Average Per Month**  
   #2 Results

3. **Add Results of #1 and #2**  
   #3 Results

4. **Multiply the Results In #3 by 15%**  
   (15% is the periodontal target of hygiene patients)  
   #4 Results

5. **Add Results of #3 And #4 (Above)**  
   Expected # of Patients Per Month, In Hygiene:  
   #5 Results

6. **Multiply #5 X 12 (Months Per Year)**  
   Expected # of Patients to be Seen Annually  
   #6 Results

7. **Calculate Your Recall Effectiveness:**  
   a. Add the # of hygiene related visits over the past 12 months.  
      (Prophy 1110 & 1120, Periodontal 4341 & 4342, Debridement 4355, Periodontal Maintenance 4910)  
      Use your computer generated software reports or archived hygiene schedules to obtain the # of visits.  
      #7 Results
   
   b. Divide #7 by #6 above and move decimal two places to the right  
      Recall Effectiveness Goal 75%

8. **To Find Hygiene Days Needed Monthly**  
   a. Enter # of hygiene patients that can be seen daily  
   b. Divide the results in #5 above by the number of hygiene patients that can be seen daily in 8a.  
   #8 Results

9. **Enter the number of hygiene days your office can support each month, with an effective recall process,** according to this formula [result from 8b].  
   #9 Results
Patient Reactivation Project

Sandy Pardue
Classic Practice Resources, Inc.
8325 Jefferson Highway
Baton Rouge, Louisiana 70809
1-800-928-9289
Scheduling

Getting Started with the Reactivation Project

This project will help you reactivate dozens, if not hundreds of patients back into the practice. It is important to follow the guidelines exactly as written. For optimum results do not start this project in the months of May, June, November or December, unless otherwise suggested by your consultant.

This is a tried and true approach to reactivation and will help revitalize your practice. After the initial project we recommend doing this project each year in January.

How to Begin the Project:

1) Assign someone to be in charge of overseeing the project. Inform the rest of the staff that the office is doing a reactivation project and let them know what part if any, they will play.

2) Verify the knowledge of the person in charge of the project on use of the computer software program. They will need to know how to generate reports and print cards that include a message, as well as the patient address.

3) You may need to contact the computer software company for the following:
   a. Instructions for generating a report showing who is due to come in the office by last visit date. The idea is to generate a list of patients that have not been in the office for 6 months or longer. Go back at least 3 years and as much as 5 years.
   b. Creating and printing post cards with a customized message.
   c. Printing the card from the computer with the individual patient’s address.

4) Record the phone call with the computer software support department, if you live in a state where this is legal, or take good notes to reference in the future.

5) You should start a binder titled “Reactivation Project.” Put everything that pertains to the project in the binder, the next time you do the project all of the materials are there for reference.

You will need the following:

1) A copy of the Reactivation Project Checklist given to you by Classic Practice Resources.

2) The sample recall card (showing both sides) with our recommended message for patients that have not been coming on a regular basis.

3) The name and telephone number of a local printer to produce the cards with our recommended front side design and the special green or gold color.

4) A computer list of all patients whose last visit to the office was six months or longer. Go back at least 3 years and as far back as 5 years. This will include all patients of record.
5) The number of patients on the computer list to order the cards. You will be able to cut down on the cost of the cards if you order enough for all three mailings. It is impossible to know the exact amount of cards you will need on the second and third mailing, so I suggest ordering twice the amount of cards that you need to do the first mailing. We do not recommend outsourcing the mailing of these cards.

6) A written procedure for handling the cards that will come back to you after the first mailing. These will be cards belonging to patients that have moved, changed dentists, are deceased and so forth. We will supply you with a checklist for CD (changed dentists), CD-due to insurance, MOT (moved out of town), Inactive or Deceased Patients.

7) A calendar, so that you can mark the date the cards were mailed as well as how many were sent.

Refer to the Reactivation Project Checklist to Begin the Project

Terms to Know

Recall – In dentistry this means to summon back to the office to see the hygienist on regular intervals.

Reactivation – To make active again

Inactive Patients – Patients that have not come in for 7 or more years and all efforts have been exhausted.
Reactivation Project Checklist

SITUATION:
There are patients of record in your practice that are overdue for hygiene recall and have outstanding treatment. Use the following steps to successfully reactivate them through the hygiene department. If you follow the procedures exactly, this project should bring back 10% to 19% of the overdue patients. You will continue your normal recall protocol during this project.

Project Start Date: ________________________________
Person in Charge of This Project: __________________________
Others Assigned to this Project: ______________________________

INSTRUCTIONS: Go through each step listed below. Date and initial as each step is completed. Do not go out of sequence. This is a 90 to 100 day project.

STEP ONE:
Generate and print a list of all patients that have not been in the practice for at least 6 months, going back 3 to 5 years. This report will contain patients that also have outstanding diagnosed treatment. The idea is to get them in the office for needed treatment.
Number of patients on this report (needing a cleaning): ___________
Date completed: ___________ Initials: ___________

STEP TWO:
Choose a recall card to be mailed to these patients. Classic Practice Resources recommends the following message on a fluorescent green or goldenrod postcard.

Dear Jane,

We miss seeing you in our office. As you know, when dental decay, gingivitis, periodontal disease or other complications are discovered in early stages, treatment is not complicated and costs are less. Please phone the office at (insert your phone number including area code) for a convenient appointment.

We have found that we get a better response by using card stock purchased from a local printer rather than the “cutsie” type cards. We recommend having the printer typeset the doctor’s business card or a photo of the office on the opposite side. Either way, it is kept conservative and professional. Always have “Return Service Requested” printed under the return address on the front of the card so that you will receive the patient’s new address. If you have any questions, call Classic Practice Resources. You will need to get your doctor’s approval on the message to be used. Determine the cost of the cards and postage for three mailings. Get approval from the doctor before ordering.
Date completed: ___________ Initials: ___________

STEP THREE:
Have your Accounts Receivable/Finance Secretary review the list printed in Step One. Using a red pen, have her mark through any undesirable patients. You do not want to recall patients that have been turned over for collections. Have the doctor look over this list to verify.
Date completed: ___________ Initials: ___________
STEP FOUR:
There are two ways to achieve this step. Read over each of them and choose the one that will work best in your practice and with your software. Please call us if you have any questions about these procedures.

1) Generate a computer report using a specific date range. You’ll need to find out which Patients have not been in the office for 6 months or longer, going back at least 3 years. You will want to send these folks the same card, three months in a row. This exact date range will be used each month during the project. The list will get shorter each month as people will call and schedule. You’ll find out that some have moved, are deceased and have changed dentists, as you work through this project. You should take care of these folks as you become aware of them being on the list so that their name does not come up each month.

2) Another way to do the project is to create a special data base for the patients on the project. The first step is to find out which patients have not been in the office for 6 months or longer, going back at least 3 years. You will want to send these folks the same card, three months in a row. This procedure will require a special recall date that all past due patients will be given to create the database. Use something like 12/25/45. Each month you will use the special recall date to generate a report to send the cards to this database. You’ll see the list get smaller as patients call in to schedule. I suggest putting undesirables such as collection problems or denture patients in their own special database. This should be done regularly in every dental practice. For example 12/25/50 for collections and 12/25/55 for dentures, etc. This will guarantee that these folks do not end up on your regular recall.

Make sure any decision to put patients on special recall dates are approved in advance by the doctor. Type up the protocol you decide to use for your practice and place it in the project binder so everyone will know the process. It will be useful in the future when you do the project again. This will also ensure that everyone in your office will know the designation for these special groups and they can follow-up. By using these special dates, you will be assured these patients will not be recalled until you are ready for them and that each one is easily recognized by their special date.

Write the recall date that you selected for this project here: _______________

Date completed: _______________  Initials: _____________

STEP FIVE:
If you decided to do the second choice in Step Four you will need to print the report of everyone due and go into each person’s account and enter the “special” recall dates. Using a red pen put a check mark next to the name on the recall list as each recall date is entered in the computer.

Date completed: _______________  Initials: _____________

STEP SIX:
At this point you are ready to send recall cards to the group you want to reactivate. Generate a current report now, using the special date or date range and another one each month before mailing the cards. The list will get shorter as patients schedule. Print the names and addresses on the cards or you can print mailing labels for the cards. We do not recommend outsourcing the mailing of these cards. Count the patients on the list that will be recalled as a part of the project and enter the number here: _______________

Date completed: _______________  Initials: _____________
STEP SEVEN:
Mail the cards. Some of them may come back because the patient moved. Locate the patients and get them in. You’ll need to update addresses on the record and in the computer as you become aware of a change; this will ensure the next mailing will have updated information. You should research new addresses when you do not have the correct one. Update the information in the computer and get another card out right away using the new address. As patients call in to make an appointment as a result of the project, you should update their recall date in the computer.
Enter the number of cards mailed: ___________
Date completed: ___________ Initials: ___________

STEP EIGHT:
Twenty-five days after the first mailing goes out, generate and print another report using the same special date or date range. This list should be shorter than the first list because people will have called and scheduled an appointment. Enter total number of people on the list here: ___________
Date completed: ___________ Initials: ___________

STEP NINE:
Print the cards for the people on the list in step eight for a second mailing.
Enter the number of cards mailed here: ___________
Date completed: ___________ Initials: ___________

STEP TEN:
Twenty-five days after the second mailing, generate and print a report of past due patients using the same special date or date range. This list should be shorter than the second one. Enter total number of people on the list here: ___________
Date completed: ___________ Initials: ___________

STEP ELEVEN:
Prepare and mail the cards. This is your final mailing.
Enter the number mailed: ___________
Date completed: ___________ Initials: ___________

STEP TWELVE:
Wait three work days to begin calling each person from the last report, noting the results of the calls in the computer. As patients make an appointment as a result of the project, you should update their recall date in the computer. Do not give up trying to contact patients via phone after only one or two attempts. Do not leave messages over and over on a machine. Confirm contact information and update changes. You may have to work on locating lost patients and always update records as you go.
Date completed: ___________ Initials: ___________
STEP THIRTEEN:  
Complete this checklist within two weeks after the last mailing. Generate and print a FINAL report using the same special date. Enter total number of people on the FINAL list here: ________

Enter the number of patients from STEP SIX: ________

Subtract the number of patients remaining on the report that never came in. (You will get this number from the last list you printed in STEP THIRTEEN): ________

Total number of patients reactivated from performing this special reactivation project. ________

STEP FOURTEEN:  
If you chose option one in Step Four for the project and you go back to past months on a regular basis to recall patients that are past due, then you are fine. We do not see offices doing that. Therefore we suggest that you put everyone not contacted or that has not scheduled during this project, on a recall date three (3) to six (6) months in the future using the last report.

If you chose option number two in Step Four for your project, no one should have the special date that your office used for this reactivation project. Every patient you want to return to the practice should have a future recall date in the computer. You should verify this by generating and printing one last recall report using the special date. If everything was done properly, no names should appear on this FINAL report.

Date completed: _______________ Initial: ____________

This project should be performed in your practice each January.

HAPPY SCHEDULING!!!

For verbal skill and communication training, attend one of Sandy’s future workshops.

Contact Sandy for information on how she and her group of consultants can help your practice grow during this new economy. Customized training workshops at your office are available.

Sandy@classicpractice.com
Dear Mr. Joseph Doe:

We miss seeing you in our office. As you know, when dental decay, gingivitis, periodontal disease or other complications are discovered in early stages, treatment is not complicated and costs are less.

Please call our office at (123) 456-7890 for a convenient appointment.
Reactivation Cards

Order Classic Practice Resources’ PROVEN, Effective Reactivation Cards

Initial setup, design, and incorporation of a logo/photo and contact information using Classic Practice Resources’ proven, effective Reactivation Card layout with their custom message. Initial setup fee is required for new customers.

INITIAL SETUP   =   $150.00
REORDER FEE   =   $50.00

Printing

Cards will be printed in B/W on Neon Green, 65# cardstock, cut to 5.5" X 4.25".

1,000 CARDS   =   $390.00
2,000 CARDS   =   $485.00
3,000 CARDS   =   $580.00
4,000 CARDS   =   $675.00
5,000 CARDS   =   $770.00
6,000 CARDS   =   $865.00
7,000 CARDS   =   $960.00
8,000 CARDS   =   $1,055.00
EACH ADDITIONAL 1,000 CARDS   =   $95.00

Shipping

Please include the cost of shipping and handling at the rate of $15.00 per 1,000 cards ordered. A direct mailing service is also available; if interested, call us for details and rates.

SHIPPING PER 1,000 CARDS   =   $15.00

See page two for the process overview, payment details, and terms and conditions.

See page three for a printable order form with customizable setup and design options.

Questions? Contact Mary at Deep Fried:
mary@deepfriedads.com I (504) 324-9569 x. 510
Card Development + Printing Process

PHASE 1: PAYMENT
Order forms may be delivered by fax, email, or mail. Once an order form is received, the order will be processed, invoiced and sent to the Client via email for payment.

Note: Deep Fried cannot move into the setup + design phase until payment has been received. Card designs will mimic the provided sample on page one, and the written content on the back of the card will feature Classic Practice Resources’ proven, effective reactivation messaging.

PHASE 2: SETUP + DESIGN
After payment is received and content is delivered, a design proof will be drafted and sent to the Client via email. After Client review, any necessary edits can be made before sending to print. Initial proof delivery and edits can usually be completed within one to three business days.

PHASE 3: PRINTING + DELIVERY
After Client has approved the proof, the cards will be sent to print. It usually takes about two to three weeks for printing, shipping, and delivery. If you have opted in for the direct mailing service, this process may be slightly different.

Payment + Refunds

Invoices will be sent via email through Deep Fried’s online payment system called Paymo. Payment can be made online via Paypal, using a credit card or Paypal account (a Paypal account is not required - users may checkout as a guest), or checks can be delivered to Deep Fried. Payment over the phone is not accepted. If you have opted in for direct mailing, service and postage fees are required before delivery.

Payment for cards is required before Deep Fried can move into the setup + design phase, and due to the proprietary nature of the written content provided by Classic Practice Resources, that will be featured on the back of the cards, refunds can not be granted after payment has been made.

Content

Content that is necessary to begin design work includes artwork (e.g. logo or image) that is to be featured on the front of the card. Deep Fried does not offer stock logos for Clients to choose from. If a Client does not have a logo, a typeset version of the practice name can be created by Deep Fried to be used as the artwork. A typeset logo example has been provided to the right.

Note: logos must be provided in vector format (EPS, AI or vector PDF), or a high-resolution JPG, PSD, TIF or PNG. Scanned / copied / low-resolution logos not provided in the requested formats may incur additional fees for reformatting / recreating.

Fees

Please understand that due to the changing costs of printing, paper, postage, etc., all printing and shipping fees are subject to change. Our order forms are updated regularly to reflect these changes, and if you have received an outdated form, we will notify you to send an updated form with proper terms and pricing information before moving forward.
Reactivation Card Order Form

**Your Contact Information**

<table>
<thead>
<tr>
<th>PRACTICE NAME:</th>
<th>OFFICE CONTACT:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OFFICE ADDRESS:</th>
</tr>
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<tbody>
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<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>OFFICE #:</th>
<th>CELL #:</th>
<th>FAX #:</th>
</tr>
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<tr>
<th>EMAIL FOR PROOF:</th>
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<table>
<thead>
<tr>
<th>REFERRAL SOURCE:</th>
<th>CPR Program</th>
<th>Spice Up Your Practice</th>
<th>Dentaltown Website</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Setup**

- **NEW CUSTOMER = $150.00**
- **RETURNING CUSTOMER = $50.00**

PLEASE SELECT ONE: I would like the front of my Cards to feature:

- A logo + address or tagline
- A photo of office + address or tagline
- A typeset logo + address or tagline

**Printing**

<table>
<thead>
<tr>
<th>Number of Cards</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,000 Cards</td>
<td>$390.00</td>
</tr>
<tr>
<td>2,000 Cards</td>
<td>$485.00</td>
</tr>
<tr>
<td>3,000 Cards</td>
<td>$580.00</td>
</tr>
<tr>
<td>4,000 Cards</td>
<td>$675.00</td>
</tr>
<tr>
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</tr>
<tr>
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</tr>
<tr>
<td>7,000 Cards</td>
<td>$960.00</td>
</tr>
<tr>
<td>8,000 Cards</td>
<td>$1,055.00</td>
</tr>
</tbody>
</table>

EACH ADDITIONAL 1,000 CARDS = $95.00

PLEASE SELECT YOUR PRINTING AND DELIVERY PREFERENCE:

- I would like my cards to be printed and delivered as individual cards.
- I would like my cards printed and delivered with 4 cards up on an 8.5" x 11" page with perforated edges. (This option is recommended if you are planning to print addresses onto your cards.)

**Shipping**

SHIPPING PER 1,000 CARDS = $15.00

Note: Shipping fees are subject to change. We also offer direct mailing; please notify us if you would like to receive a list of rates.

**PAYMENT:** Please fax / mail / email this form & we will contact you to receive payment & begin work. Thank you for your order!

I WOULD LIKE TO PAY BY:

- Check
- Credit Card (Online Invoice)

Note: We do not accept payment over the phone.
Accounts Receivable
Easy Pay Plan Consent Form
Pre-Authorized Credit Card Agreement

Doctor or Practice Name
Address • City, State Zip
Telephone Number • Fax Number

Patient Name                      Home Number                  Cell Number                      Other

Billing Address                                    City            State           Zip

Cardholder’s Name (if different)                     Home Number                 Cell Number                      Other

Billing Address (if different)                   City            State           Zip

Card Type:

- Visa
- MasterCard
- Discover
- American Express

Credit Card Account Number                                                            Exp. Date       Security Code

Cardholder’s Signature                                                Date

I Authorize [insert doctor or practice name] to charge my credit card for the following:

- A one-time charge of $_________________________ on ________________________________.
- Payments broken into segments, starting on ________________________________, 2014 until balance is paid in full:
  - Weekly
  - Bi-Monthly
  - Monthly
  - In the amount of $_________________________

Insurance Balance Authorization

- Balance NOT paid by insurance within 90 days and/or any balance due AFTER insurance payment received.
- A one-time charge, not to exceed $_________________________, on ________________________________, 2014.
- Payments broken into segments, starting on ________________________________, 2014 until balance is paid in full:
  - Weekly
  - Bi-Monthly
  - Monthly
  - In the amount of $_________________________

Mail Receipt:  ☐ Yes  ☐ No

I assign my insurance benefits to the provider listed above. I authorize [doctor or practice name] to maintain my
credit card information on file for “Easy Pay Plan” purposes only.

I understand that this form is valid for one year unless I cancel the authorization by written notice to:

Doctor or Practice
Address
City, State Zip

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Accounts Receivable
Payment Options with Insurance

We offer a variety of payment options to help you, our valued patient, receive the dental care you need. Dental treatment is an investment in your health. We realize that every person’s financial situation is different. For this reason, we have outlined our flexible payment plans. Thank you for choosing our office to meet your dental needs.

I choose the following method of payment for dental care performed for myself and/or my family:

☐ Pay as You Go: I elect to pay in full using cash, check, or charge on all visits as treatment progresses.

Estimated Patient Portion: ____________

☐ Easy Pay - Credit Card Payment Option: Three equal installments by credit card. One-third payment is due at the first appointment; one-third is due thirty (30) days later; and the remaining one-third is due sixty (60) days from the initial appointment. Our office personnel will charge these payments to your credit card on the due dates.

*Complete the “Easy Pay Consent Authorization Form.”*

☐ In-Office Financing: Interest free financing for up to ninety (90) days based upon your credit being approved.

Estimated Patient Portion: ____________

☐ Major Service – Two Payment Option: We offer a two payment option for treatment with co-payments over $300. We ask that you pay one-half of your portion at the first appointment and the second half at the subsequent appointment.

Estimated Patient Portion: _______________ ÷ 2 payments = _______________

☐ Third Party Financing: Third Party Financing: By arrangement with third party finance company, we offer our patients, upon approval, an interest-free term loan (up to 6, 12, 18 months) with no down payments, no annual fee, and no prepayment penalty. Longer payment options are available with interest.

Estimated Patient Portion: ____________ $______________ a month for ______ months.

Regarding Insurance Benefits:
We will file your insurance claims as a courtesy for you and will accept “assignment of benefits” on your behalf. Regardless of what we may calculate your insurance company to pay, it is only an estimate. The financial obligation for dental treatment is between you and this office, and is not between this office and your insurance company. We will do all we can to get the maximum benefits reimbursed for you. Please be aware that some of the services provided may not be covered or may be considered above the ‘usual and customary’. You are responsible for payment of your account, regardless of any insurance company’s arbitrary determination of usual and customary fees.

Signature of Responsible Party _____________________________ Date ______________

For office use only

Staff person presenting options: _____________________________ Date: ______________

If applicable: Approval Amount: __________________________ Authorization Code: __________________________

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Accounts Receivable
Payment Options Non-Insurance

We offer a variety of payment options to help you, our valued patient, receive the dental care you need. Dental treatment is an investment in your health. We realize that every person’s financial situation is different. For this reason, we have outlined our flexible payment plans. Thank you for choosing our office to meet your dental needs.

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Estimated Patient Portion: __________

☐ Easy Pay - Credit Card Payment Option: Three equal installments by credit card. One-third payment is due at the first appointment; one-third is due thirty (30) days later; and the remaining one-third is due sixty (60) days from the initial appointment. Our office personnel will charge these payments to your credit card on the due dates.

*Complete the “Easy Pay Consent Authorization Form.”*

☐ In-Office Financing: Interest free financing for up to ninety (90) days based upon your credit being approved.

Estimated Patient Portion: __________

☐ Advance Payment Discount (receive discount): 5% bookkeeping courtesy for payment in full by cash or check at the start of treatment, resulting in a one time payment.

Estimated Patient Portion: __________ less 5% discount __________ = __________

☐ Major Service – Two Payment Option: We offer a two payment option for treatment over $300. We ask that you pay one-half of your expected balance at the first appointment and the second half at the seat date appointment.

Estimated Patient Portion: __________ + 2 payments = __________

☐ Third Party Financing: By arrangement with third party finance company, we offer our patients, upon approval, an interest-free term loan (up to 6, 12, 18 months) with no down payments, no annual fee, and no prepayment penalty. Longer payment options are available with interest.

Estimated Patient Portion: __________ $__________ a month for ______ months.

Signature of Responsible Party __________________________ Date ______________

For office use only

Staff person presenting options: __________________________ Date: ______________

If applicable: Approval Amount: ______________ Authorize Code: ______________
Dental Report Card

Doctor’s Name
Office Address ● Office City, State Zip
Office Telephone

ORAL HYGIENE ASSESSMENT

- Excellent
- Good – Little plaque, calculus or stain
- Satisfactory – Some plaque and light bleeding
- Needs Improvement – Inflammation, plaque, calculus, stain & bleeding

Services and products received during this visit, at no additional fee, are checked below:

- Medical-History Update
- Oral Cancer Screening
- Blood-Pressure Screening
- Oral Health Education/Instructions
- Educational Materials

Patient’s Blood Pressure: _____________________ / _____________________

Systolic             Diastolic

SERVICES PERFORMED DURING YOUR VISIT TODAY

- Periodic Oral Examination
- Limited Oral Evaluation
- Comprehensive Oral Evaluation
- Root Planing / Periodontal Scaling
- Prophylaxis
- Sealants
- Cavity Detection
- Other:

- Periodontal Screening
- Diagnostic Study Models
- Plaque Control Instructions
- Fluoride
- Radiographs
- Oral Health Medicaments
- Periodontal Therapy

WE RECOMMEND THE FOLLOWING:

- Daily home care with attention to specific areas: _____________________

- Keep on schedule with hygiene recall
- Maintenance therapy at 3 months, 4 months and 6 months
- Periodontal therapy intervention

We would like to see you back in _______ months. As you know, when dental decay, Gingivitis, Periodontal Disease, or other complications are discovered in early stages, treatment is not complicated and costs are less.

____________________________
Name of Hygienist

We welcome your friends and family.
My Dental Report Card

____________________ polished and flossed my teeth today.

She took ______ x-rays of my teeth.

She explained how I should floss and brush my teeth and how Sugar Bugs can cause cavities.

I need to work on:
- Brushing
- Flossing
- Brushing Near Gums
- Limiting Candy
- Drinking Less Juice / Sodas
- Nothing, Keep Up The Good Work!

I was given a toothbrush, toothpaste and floss.

I will use them often to keep my teeth healthy.

Dr. ___________________ examined my teeth and reminded me to brush and floss every day.

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