



DYNAMIC VERBAL SKILLS

BY PRACTICE DYNAMICS

VERBAL SOLUTIONS FOR BEING DYNAMIC

Table of Contents

CHAPTER 1

Introduction	03
--------------------	----

CHAPTER 2

Key Elements to Communication in the Office	04
5 Characteristics of Communication	04
DiSC Overview	09
Triggers	13
Consistency	17
Yes or No Questions	18

CHAPTER 3

Dynamic Verbal Skills for the Entire Team	20
Dynamic Terms	20
Diagnosis and Treatment Plan Discussions	21
Referrals	22
The Business Team	24
• Phone Calls	24
• Voicemail Scripts	33
• In Person Conversations	34
• Financial/Insurance	36
• Webutation Management	41
The Clinical Team 30	42
In Person Communication	42

The Hygiene Team	46
Periodontal Education	49
Scheduling	52
Post Op Instructions	54
The Doctor Team	55
 CHAPTER 4	
Dynamic Handoffs	57
 CHAPTER 5	
Conclusion	59

Chapter 1

Introduction

The ability to communicate effectively with your team, is a critical aspect of any health care office. Over the course of a day, you will communicate with patients, referring doctors, supply reps, labs, pharmacies and of course your team and your leaders. Your communication skills can give you the opportunity to ease patients fears, to improve information exchange and to grow your success in the business. Great communication can bring people, teams, together and enable them to function more efficiently. There are several components to great communication, and the first few moments, first impressions, set the tone for both you and the other person. It is important to be prepared for conversations from the beginning of the phone call or the in-person interaction. Utilizing basic etiquette such as, remaining calm, being polite and your clarity of message is also vital.

Communicating effectively requires important skills. And as with any skill we truly want to exceed at we must practice. Perhaps it sounds funny to think of practicing communication skills. However, if you desire to be successful and a leader, practice is required. Take a moment and think of anything in your life you wanted to be great at, such as baseball, math, singing. Did you just walk out to the baseball field and have an awesome season? Most likely, you worked day in and day out, put in long hours and did all the extra work to accomplish that goal. The same is true for being an effective communicator.

Your practice begins today with this book. As you read on, you find there are many components to communication. We start with listening, which is a true art. Next is the knowledge and the ability to adapt your communication skills to match others. We move on to empathy and understanding where the other person is speaking from. And finally utilizing great verbal skills for any situation. Great leaders have several attributes with effective communication being at the forefront.

The definition of communication is giving, receiving, and sharing information, in all forms, verbal, written, and listening. Your practice and work can begin right here with this book. You will find many areas for you to review, repeat and excel at.

**THE ART OF COMMUNICATION IS THE LANGUAGE
OF LEADERSHIP" - JAMES HUMES**

Chapter 2

Key Elements to Communication in the Office

5 Characteristics of Communication

The Art of Listening

Listening is one of the easiest things you can do, and one of the hardest. Many times, people just need to be heard. They need to know someone is listening. Being heard is a basic life need, and yet so many of us are not great listeners. Often, we just hear with the intention to reply. We are so excited to share a piece of ourselves, we forget to listen to what the other person is saying. We are simply ready to talk next. In doing this, we do not hear the conversation, our attention span gets smaller and the person we are speaking to feels they are not important.

Listening is an art form and takes practice. It takes preparation to tune out the world around us and the ability to stop, free your mind of judgement, and prepare to receive what they have to say. We need to truly just hear the other person.

You may be the best speaker in the world, but if you do not hear with others are saying, no one will listen to you. And your ability to lead through your message will be diminished.

Effective communication starts with good active listening skills. Although a simple and easy concept, active listening is not as easy as you would think. Let's review the 3 levels of active listening.

Level #1:

Internal Listening

This is the easiest level to recognize and achieve. At this level we are focused on ourselves. What does this mean to me? Although we hear the patient or the co-worker our internal chatter starts asking questions regarding thoughts, judgments, feeling or conclusions.

We see this level in dental practices when we get caught up in the daily distractions of the phone ringing, the schedule falling apart or accommodating an overly full schedule.

Level #2:**Focused Listening**



At this level we are truly hearing what the other person is saying and how they are saying it. We are listening fully and have blocked out the outside world. We listen for words, expressions, emotions and what they don't say. At level #2 we are also using core skills of summarizing, questions, paraphrasing and restating key points to deepen our understanding and build trust.

We have witnessed this many times in dental practices when team members truly connect and listen to the patient. One of the most important areas for this level of listening is the new patient phone call.

Level #3:**Whole Body Listening**



Much like Focused Listening this level of listening is all about the other person. However, with whole body listening we are taking information in at a deeper level. We are focused on the words, the language patterns, the body language, and we are using our intuition to understand the emotions behind the words.

When we are connected at this level with our patients, we can truly make a difference. What are they saying and what are they not saying? When teams are using this level on a consistent basis, we see practices that excel in a best-in-class patient experience and overall profitable practice.

In conclusion, be assured that the journey of quieting our minds, focusing on the other person, and becoming a fully present listener, will significantly improve your effectiveness as a team member, leader, friend or parent. Giving the gift of listening is immeasurable, bring back the lost art.



**"MOST PEOPLE DO NOT LISTEN WITH THE INTENT TO UNDERSTAND;
THEY LISTEN WITH THE INTENT TO REPLY." --STEPHEN R. COVEY**

Empathy



When we truly listen, we start to relate. When we relate, we form empathy. Empathy brings about understanding and an open door to a productive conversation. When you can place yourself in that person's position, you give yourself the capacity to handle a situation the way you would want it handled. You give the gift of making that person feel more comfortable and safer. Empathy goes hand in hand with listening; the less you talk, the more you listen. The more you listen, the ability to communicate understanding back to that person happens. This is another skill that needs to be practiced to master.

Adaptability

When we communicate, our goal is to deliver a message, however you must deliver the message in the way the receiver will digest and comprehend. Therefore, we must adapt our communication style to match the person we are communicating with. This takes awareness on our part. You may speak quickly and make decisions quickly, but the person you are communicating with may need more time and thought. Recognize tone, speed and body language and adapt your style to match theirs.

There are many tools to help you recognize and adapt your listening and speaking skills. Utilizing these tools and your willingness to adjust your communication style will be a key in your growth as a great communicator.

Great Verbal Skills

“GOOD WORDS ARE WORTH MUCH AND COST LITTLE.”
GEORGE HERBERT

You can accomplish just about anything with great verbal skills. But again, this is an art and must be practiced. While many professionals do not like to read or speak from a script, the system of what to say and when to say it is key to improving your skills. Once you have the system down, you can start to incorporate your own personality into your words. I'm sure you have heard many times, it is not what you say but how you say it. Use your words wisely each day, with each scenario to accomplish the task of effective communication.

Effective Speaking

This involves your dynamic words, your tone, volume and how you use them all together. It is now your responsibility to speak in a manner that your counterpart can actively listen, understand your message, and communicate back.

For example, discussing financial situations with a patient can be uncomfortable for both you and the patient. Where you have this discussion, along with the words you use, your volume and your tone, can make or break your result. If possible, have uncomfortable conversations in a private location. Be aware of your surroundings and distractions. Use a calming tone and a respectable volume.

As you move through this document, remember, the goal is to be effective and successful in your professional relationships. Start by actively listening to what the other person is saying and understand their position. Next, adapt your communication style to meet their needs. And finally, refer to this document to enhance your verbal skills.

Earlier we discussed Adaptability and learning to adjust your communication style based on the person you are communicating with. DiSC is one of the best tools to learn and practice how to be the best communicator.

This chapter will take a few minutes of your time to explore how utilizing DiSC in a professionally setting can take your team to a new level of effective communication.



DiSC Overview

Communication is the key to any business and team success. Understanding the components of communication and listening styles will set us ahead of the rest. The DiSC communication profiling system is thorough and educational. Each team member will complete the online profile and receive a detailed report, personalizing how they hear, how they speak and how they communicate with other profiles.

Understanding DiSC



Understanding who we are and how and why we react differently than others is an invaluable tool in our everyday lives. When we learn together as a team, we not only understand who we are, we understand who our team members are that we work with every day. These new tools and new insights then help us to determine who are patients are so we can better communicate and better understand them.

This simple tool allows teams to unlock the mystery why some people react and communicate the same as we do and why others seem so different. With this foundation teams learn how to reduce conflict, improve productivity, and ultimately relate better to the team and our patients.

The model is broken down into four (4) quadrants and each of us falls within a specific area of the whole. A detailed online test maps out where you fall within the diagram based how you answer and reaction to certain questions.

Along with the four (4) styles, it is important to notice the key words that surround each style for more insight into communicating with each different style.



- D** Challenge/Results/Action
- i** Action/Enthusiasm/Collaboration
- C** Collaboration/Support/Stability
- S** Stability/Accuracy/Challenge

D Style: Dominant

People with the D style are strong willed individuals who prioritize results. Because they want to make their mark, they constantly look for new challenges and opportunities. In addition, they also prioritize action and often focus on achieving their goals quickly and forcefully.

Advantages

- ⊗ Self-motivated.
- ⊗ Innovative.
- ⊗ Self-assured.
- ⊗ Strong willed.
- ⊗ Confident.

Disadvantages

- ⊗ Can be tough to work with.
- ⊗ Not sympathetic.
- ⊗ Creates controversy.
- ⊗ Impatient.
- ⊗ Can be perceived as manipulative.

Hot button is TIME. Sensitive wait times in the practice and just needs the facts.

I Style: Influence

People with the I style put a high priority on enthusiasm and tend to maintain an upbeat attitude. They get excited about new possibilities, and they may be very expressive when communicating their ideas. In addition, they prioritize action, so they often focus on making quick decisions towards exciting solutions.

Advantages

- ⊗ Charismatic.
- ⊗ Magnetic.
- ⊗ Motivating.
- ⊗ Social.
- ⊗ Exciting.

Disadvantages

- ⊗ Talks a lot.
- ⊗ Poor with details.
- ⊗ Desires attention.
- ⊗ Poor with follow up.
- ⊗ Poor organization.

Hot button is Social Conversations. Be sure to allot the time to talk and connect.

S Style: Steadiness

People with the S style place a high value on providing support. They tend to be good listeners, and as a result they are often seen as patient and accommodating. In addition, they also prioritize stability, so they focus on maintaining a predictable, orderly environment.

Advantages

- ⊗ Even tempered.
- ⊗ Calm.
- ⊗ Friendly.
- ⊗ Organized.
- ⊗ Agreeable, puts others first.

Disadvantages

- ⊗ Indecisive.
- ⊗ Needs time to adjust to change.
- ⊗ Does not like conflict.
- ⊗ Not likely to speak their mind, unless directly asked.

Hot button is Care. S patients need to know you care.

C Style: Conscientious

People with the C style place a high priority on accuracy. Because they want to ensure superior results, they tend to analyze options rationally and separate emotions from facts. In addition, they also prioritize stability and tend to value follow through and restraint.

Advantages

- ⊗ Critical thinker.
- ⊗ Thoughtful.
- ⊗ Well organized.
- ⊗ Introspective.
- ⊗ Good project leaders.

Disadvantages

- ⊗ Asks a lot of questions.
- ⊗ Wants proof.
- ⊗ Technical.
- ⊗ Critical.
- ⊗ Perfectionist.

Hot button is DETAILS. A C patient will require lots of details and well thought out plan for treatment.

Recognizing the DiSC Style of Our Patients

Discovering who we are as individuals is only half of the fun. Our next step is to discover who our patients are and how we can best communicate with them to ensure they are comfortable and a raving fan of our practice.

Key areas of our day to be aware of patients DISC Style:

- **Morning huddle.** Communicate at the huddle regarding the patient and personality styles.
- **Treatment presentations.** Be aware of the patient's style and adjust your style to better communicate with them.
 - ⊗ D patient. Keep to the facts and stick to the allotted time.
 - ⊗ i patient. Keep focused on them and how the treatment I going to affect them and their lifestyle.
 - ⊗ S patient. These patients tend to put the needs of others first. They need to understand that taking care of them is a priority so they can better take care of the people around them.
 - ⊗ C patient. It is all about the details with this patient. Be sure to have plenty of time to answer questions.

Triggers

Every patient has a trigger as to why they scheduled an appointment to see us. They will tell us about their trigger in conversations we have with them. It is our responsibility to listen to the cues and then to adapt our words to match theirs.

The 4 Triggers

- Pain/fear
- Time
- Money
- Health

Pain/Fear

- **This trigger point is all about feelings and emotions.**
- **Listen for key words:**
 - ❖ Pain, fear, afraid, anxious, I do not like, I am not comfortable; these are all cues for feelings.
- **Watch body language:**
 - ❖ Hands wringing or gripping the chair (white knuckles), fidgeting of the feet or in the chair.

Time

- **This trigger point is not emotional, the patient maybe has a busy work or personal schedule. Probably a D or and S.**
- **Listen for key words:**
 - ❖ Time, busy, schedule.
- **Watch body language:**
 - ❖ Looking at watch, clock, phone

Money

- This trigger point is based on finances.
- Listen for key words:
 - ❖ Budget, money, finances, insurance.
- Watch body language:
 - ❖ Ringing of the hands, looking at wallet

Health

- This trigger point is based on emotion.
- Listen for key words:
 - ❖ Health, lifetime plan, embarrassment.
- Watch body language:
 - ❖ Nervousness, embarrassment.



Verbal Skills with Trigger Points



Pain/Fear/Anxiety

Team Member to Patient:

(Patient Name), I understand you are experiencing pain now. Sometimes the pain can cause us to have anxiety. We have many options in our office to help you with the discomfort and the anxiety. Have you ever used nitrous oxide/oral sedation with dentistry before?"

This will lead into further discussions. The key is to watch the patient's body language and listen to what they are saying. Use the same trigger words they do.

"(Patient Name), I am so glad we were able to get you out of pain and address your immediate issue. Dr. XXX has discovered a few areas of concern. We want to get you back as soon as possible to make sure you do not experience the same pain again."

Time

"(Patient Name), Dr. XXX has diagnosed three (3) implants on your lower right hand side. I know your time is important; we can schedule all implants in one day and work to minimize your follow up appointments in the office. We can also schedule you first thing in the morning to make sure you still have a full day ahead of you."

The patient may have a difficult schedule and need certain times or days. Again, listen to what the issue is and speak to resolve it.

Patient:

"I can only come in on Tuesday mornings or Friday afternoons."

Team Member:

"I completely understand. We can make all appointments moving forward on a Tuesday morning. As a matter of fact, let's get all your appointments set up now so we don't have any conflicts. The first appointment may be further out than we would like, but we will put you on an ASAP list and if anything changes on a Tuesday that is sooner, we will call you to come in."

Money

"I don't think I will be able to afford anything major right now."

Team Member:

"**(Patient Name)**, we offer many options to help you afford your treatment in our office. Our business team will help explain how you can make affordable payments and budget your treatment plan."

"**(Patient Name)**, we know your treatment in our office is an investment. Therefore, we have partnered with a premiere healthcare financing company. You have been preapproved for credit. We can take a few minutes now to understand how this program works and to schedule you for your additional appointments."

Health

"**(Patient Name)**, we are excited you have made the emotional investment in your health and keeping your teeth for a lifetime. To maintain your oral health, we need to set up your treatment plan and make all your appointments. We also use great technology in our offices that will email/text you a few days prior to your appointments. We want to make sure we see you at the correct intervals."



Consistency

For the team to be well rounded, educated, and able to talk to anyone at any time, consistency is key. The entire team should have a general understanding of each department, the services offered, and the education presented to the patient by each team member.

For example, when the Doctor discusses amalgam or composite restorations, they may use terms such as “silver” and “tooth colored” fillings. The team should shadow or observe one another, recognize the verbiage used and mirror those same statements. The more the patient hears the same statements, words, and education the more they will trust us and recognize the need to accept our care.

Pre-Op Instructions

Once again it is important that the entire team is giving the same instructions to the patient. It could be home care, arrival time, food, or beverage consumption.

For Example:

Business Team:

“Mrs. Patient, you are scheduled for scaling and root planning tomorrow afternoon with our hygienist. Please make sure you arrive 5 minutes prior to your appointment, allow for 90 minutes in the office with our team. You may be sore after your appointment; you can take an over-the-counter pain med or anti-inflammatory that is approved by your medical doctor. Also, your portion for tomorrow’s visit will be \$XXX. What questions do you have about your appointment tomorrow with the hygienist, that I can answer for you?”



Yes or No Questions

There are two types of questions. Open ended, which welcomes feedback or close ended, which means you are essentially looking for a one or two word answer. By asking open ended questions, the patient has a moment to think about any questions they truly find important. It takes practice but work to ask open ended questions regarding money, timing or the actual diagnosis and procedure.

Instead of "Do you have any questions?"

Business Team

"What questions can I answer for you regarding your appointment that we scheduled?"

"What questions can I answer for you regarding the financial arrangement in our office?"

"What questions can I answer for you regarding your insurance plan and the benefits they have offered you?"

"What questions can I answer regarding how the insurance will assist you with this visit?"

Clinical Team

What questions can I answer regarding doctor's diagnosis and the treatment we will provide to you?"

"What questions can I answer for you regarding your treatment today?"

Hygiene Team

“What questions can I answer regarding your oral health and our discussions today?”

“We went through a lot of information today regarding your periodontal health. What questions can I answer for you about treatment and future appointments?”

Doctor Team

“What questions can I answer for you regarding your exam?”

“We went through a lot of information today. What questions can I answer for you regarding any diagnosis or how we will treat your oral health?”

“What questions can I answer for you regarding your treatment today?”



Chapter 3

Dynamic Verbal Skills for the Entire Team

Dynamic Terms

An effective communicator will use dynamic words because we know words matter. We have some distinct words and phrases we use in our industry. Such as, referring to people as a front desk or the back. Our patients have been trained to use such words as “Just a cleaning” and when we refer to it in that manner, that is what they believe they are receiving, “just a cleaning”. We, too, have been trained with certain phrases and words, however, we can learn, and we can change our words. Correct grammar and word usage sound more professional and allow us to give a better patient experience.

Instead of	Words to Use
Front Desk	Front Office or Business Office
Back	Clinical Area or Operatory
Staff	Team
Insurance will pay	Insurance will assist
Check out	Finish up your appointment
Discount	Courtesy
Just a Cleaning or A Cleaning	Appointment with the hygienist
Bleaching	Whitening
	Additional Terms to Use:
	Disease
	Infection
	Inflammation
	Whitening
	Health Care Providers
	Dental Care
	Systemic Oral Care
	Diagnosis

Diagnosis and Treatment Plan Discussions

The terms and the verbal's we use when talking about and presenting treatment can lead to your success or it can lead to denied cases and less appointments. It is important to disclose all the information but to also use words the patient will understand and relate to. It is also important for us to discuss any previous treatment the patient has had and of course the diagnosis.

In dentistry especially, it is so important for us to reveal and discuss the diagnosis with our patients. Think of the diagnosis as the "WHY". And patient's certainly ask us about the "Why" often. Also make sure your treatment plan layout reflects your conversation with the patient.

Always assume the patient will pay the fee and they will schedule the appointment. Speak with confidence, clarity and at a concise rate of speed.

Let's present a plan:

"Miss Mary, doctor has completed his exam and we have some information to review with you regarding your future treatment and financials in our office. First let's discuss the upper right-hand side of your mouth, as Dr feels that is the most important. You have a silver filling in the 2nd to last tooth, a molar. It looks like that silver filling is old. Dr has diagnosed cracks in the filling as well as decay around the edges of the filling, which can also mean decay under the filling. He/She feels the best treatment for this is to replace that silver filling with a tooth-colored restoration. Our hope is it will be the same size you have now, however, there is no way for us to see the extent of the decay until we start removing that old silver filling. Let's look at the financial side of this. Our fee for this restoration is \$XXX, your insurance has communicated they should assist with XX%, which will leave your portion as \$XX at the time of the appointment."

Be silent for a moment to let them see it all. Next,

"What questions do you have regarding the treatment Dr has diagnosed or the associated costs?"

Answer any questions presented. If you do not know the answer, let the patient know you will get it immediately, or by end of day. Once you have answered all questions,

"Miss Mary, Dr. feels the upper right-hand side is the most important, I have an appointment Tuesday at 11am or Thursday at 3pm. Which one of those works best for you?"

Once you schedule the patient, "Miss Mary, I have you scheduled Tuesday at 11am for XXX. Your portion will be \$XXX and will be due at the time of service. What questions do you have regarding our payment options?"

Referrals

Asking patients to refer their friends and family does not need to be difficult, it can be very simple actually. Once you have developed a rapport with your patient, you will know many things about them. Such as their family and work status. You can use this knowledge to ask for a referral to the office.

It can be as simple as

“Miss Mary, we just love having you in our practice. If you have any family or friends that are as great as you are, we would love to see them also!”

You can also invite a family member to bring their entire family to the practice.

“Miss Mary, I noticed you stated you are married and have talked about your kids, but we don't see them in our office. Do they have a dentist? We would love to make your family are part of our dental family.”

You can also take this concept with employees.

“Miss Mary, you work for XXX? Since we partner with your insurance company, we would love to bring your coworkers to our practice also. If you talk to any of your coworkers and they are looking for a dentist, we would love to meet them.”

Simple & Easy Verbal Skill

“Thank you for trusting us with your health. If you have any family or friends in need of a great dentist, we would love to gain their trust as well.”

Methods for Reviews and Referrals



There are several different methods to asking for a review. You can use an electronic method when sending a quick follow up questionnaire regarding their appointment in your office.

Examples

- ❖ Utilize our third-party communication system.
- ❖ Video Testimonials
- ❖ Professionally printed signage for the office, as well as type on business cards and communication to patients:

“

Dr. Dentist and our entire team appreciate your trust with your dental health needs. If you have a friends and family with dental needs, we would love to gain their trust as well.

”

The Business Team

We start with the business team because you are often the first line of communication with the phones, however, you also have many other people and companies to communicate with throughout the day. You are on the front lines of the dental practice. Anyone can walk through your door at any time, and we know the phone rings nonstop. We must be prepared to engage in any conversation, continue patient education, make payment arrangements, schedule appointments, talk IT issues, get information from other doctors, and much more. At times it can be overwhelming, but it all starts with listening. Once we listen to hear and understand, we will be able to start or continue with any conversation.

Let us start with the phone calls.

Phone Calls

You will experience multiple calls throughout the day. Your day and your calls will go much smoother when you have the verbal skills to handle any situation that comes your way.

Introduction to Every Call

Even with the million other things you are doing at one time, it is important to be friendly and prepared with each phone call. Take a deep breath and give each call a fresh start.

“Thank you for calling the office of XXX, this is (name) how may I help you today?”

Answering Multiple Calls, Needing to Put Someone on Hold

“Thank you for calling the office of XXX, I am on another call right now. It will take me a few minutes to finish up this call. Would you like to hold, and I will be back as soon as I can, or would you like me to take your information and call you back?”

On a Call and a Patient Needs Your Attention

To the patient on the call:

“Ms. Patient, I do appreciate your time and this call. I have a patient here in the office that needs my attention. I want to give you both my attention and time. May I take your information, assist the patient in front of me and then call you back, so I can give you my direct attention? I do appreciate your help.”

The New Patient Call

“Thank you for calling our office, Mr. New Patient. I have a few questions for you to help me establish what would be the best first appointment for you in our office. We are dedicated to making sure you have a great experience. Your first appointment is the start of this relationship, and we want it to fit your needs.”

Use the NPE Call Slip.



Patient Asks If We Take Their Insurance Almost Immediately

“We work with most dental insurance plans. Before we begin talking about insurance, I would like to learn more about you and what your dental needs are, and then we can get to your questions regarding your insurance plan and any financial arrangements in our office.”

Scheduling a New Patient with the Doctor First

“We understand most of our new patients would like to see the hygienist first; however, in the state of (XXX) a service by the hygienist must be prescribed by a dentist. Therefore, in our office we do schedule all new patients with the Doctor the first time they are seen. However, we do understand an appointment with the hygienist is important also. We will work hard to schedule a dual appointment with our hygienist on the same day you see the dentist. If I am not able to make that happen, I will get you scheduled with our doctor for your comprehensive exam, and then in with the hygienist as soon as possible after that. I will also put you on a short call list, so if we do have a change in our hygiene schedule, I will be able to get you in sooner.”

Once You Are Ready to Make the Appointment

“Ms. Patient let us get you scheduled for your first visit in our office. I have an appointment (give them two [2] options for appointments.) You will be seeing both the Doctor and one of our hygienists on this day. The first thirty (30) minutes of your appointment will be discovery and grabbing important information such as x-rays and photos. You will then be seen by our hygienist and by our doctor for an exam.”

Setting the Stage for a Non-Prophy Appointment

“Our hygienists stay very educated in this office, they tell us that an adult patient that is healthy does not have any precursors such as heart disease or diabetes, will have their teeth cleaned twice per year. Since you have not seen a hygienist in XX years, you are behind (4, 6, 8) cleanings and it may take us more than your two (2) normal cleanings to get you healthy again. We will work our hardest to accommodate your schedule; however, your health is our biggest concern.”

Emergency Call, New Patient

“Hello (New Patient Name). I am sorry you are having this issue. And I am glad you have called our office. I do have a time this afternoon you would be able to see the Dr. Since we have not seen you before, we will need some information from you. We will possibly take a few x-rays of the area of concern and Dr. will do an emergency exam. Depending on the Dr’s diagnosis, we will most likely need to make an additional appointment to treat your problem.”

Patient “I have great insurance.”

“That is great news, I am glad you have an insurance plan that will be able to assist you with your financial needs in our office. We do partner with several companies, however, please do know, we do ask for payment at time of service for all co pays. We will be able to give you all that information once you arrive for your appointment. I have this afternoon at 2pm available.”

The Emergency Call, Existing Patient

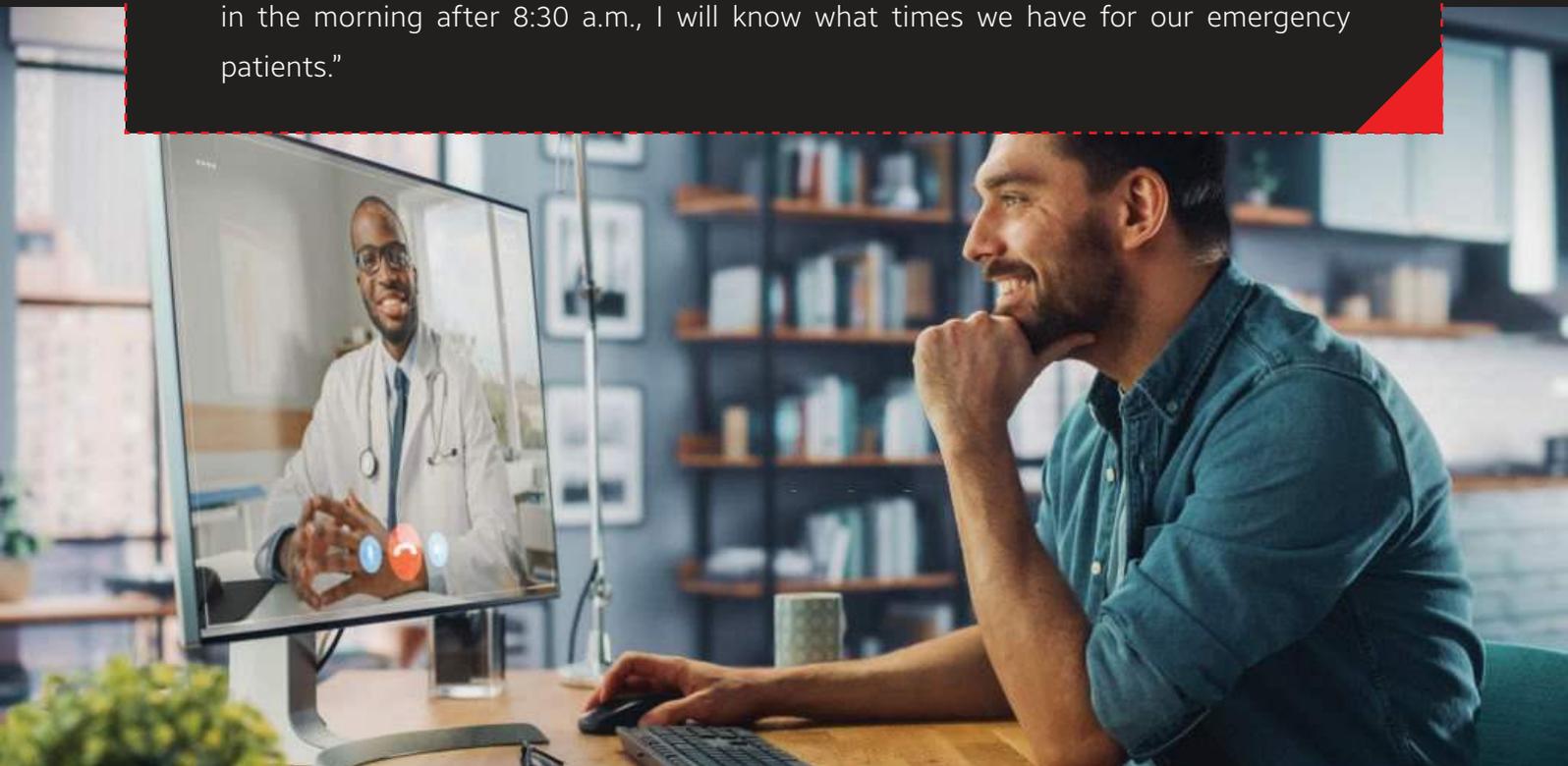
"Thank you for calling our office, Mr. Smith. It sounds like you could have a serious problem, and I know Dr. XXX would want to look at that right away. The health of your mouth is directly connected to the overall health of your body, so it is good that you called us. We specialize in helping patients get and stay healthy. Our doctors have set aside a few times for emergency patients today. We can see you at (offer the times available that were discussed during the AM Huddle)."

None of those times work for the patient:

"I am sorry our times do not work for you. We can do one of two things; we can schedule an appointment that works with your calendar. Or you can call back again, first thing tomorrow morning and I can give you the emergency times we have available."

Recommended Verbiage When Taking the Call with an Emergency Patient: After 3:00 p.m.

"Thank you for calling our office, Mr. Emergency. All our chairs are full of scheduled patients right now. We are unable to take any further appointments today. As of right now, we do not have any available appointments tomorrow; however, if you will call back in the morning after 8:30 a.m., I will know what times we have for our emergency patients."



Out-of-Network Inquiries

"**Ms. Patient**, I can absolutely help you with your insurance! We are considered an out-of-network provider with **INSERT NAME OF INSURANCE PLAN**, and you can use your dental benefits in our office. As a matter of fact, we have quite a few patients who have this same insurance. They prefer to select the dentist they personally trust and felt was right for them and their family. We pride ourselves on working hard to maximum assistance available through their insurance. Here is how it works in our office.

Most patients find that what used to be covered at 100%, such as hygiene appointments, exams, X-rays, are still covered at 100%. For restorative work, such as fillings, periodontal procedures, and root canals, it is an additional \$20.00 to \$50.00. And for any major work, such as crowns, bridges, dentures, or partials, it is an additional \$200.00 to \$400.00. We have not seen a large increase in what the patient needs to pay out of pocket. As a matter of fact, we have some insurance plans that pay quicker and reimburse more money when we are not in their network. This gives us the ability to provide the very best care for you rather than have the insurance company dictate the care you receive."

Inquiring About Cost

"That's an important question, Ms. Patient, and I want to be sure we give you accurate information. The only way we can do that is to have the doctor look at that area you are concerned about, discuss your treatment options, and decide together on the best course of action. Then we will sit down and talk about the precise out-of-pocket costs as well as the easy payment options we have available to help you afford the care you need and want. We are really good at helping our patients fit the cost of their treatment into their lifestyle in a way that's comfortable for both of us."

The Patient Did Not Show Up for Their Appointment

Call to patient:

"Hello **Mrs. Patient**, this is **XXX** from (**Office Name**). We had you scheduled for an appointment in our office this morning at 10:00 a.m., we missed you."

Be quiet and let them explain.

"Dr. **XXX** has diagnosed (**XXX**) on the (**location in the mouth**), your appointment today was to (**treatment plan**). We do want to get this problem resolved to ensure you do not have not pain or it does not get larger and cost you additional money."

Let them speak.

Offer two (2) choices to reschedule the appointment.

"I have tomorrow or next Tuesday available, which would work better for you?"

"In regard to today's appointment, we are sorry you missed this appointment. We do have a cancellation policy which is in our registration packet. We have a fee for appointments that are broken or cancelled within 24 hours of the appointment. This amount will be added to your account, and we can finalize that with your next appointment.

If in the future you cannot make an appointment or are running late, please do give us a call so we can help you accordingly."

Filling the Dr.'s Schedule

Business Team:

"Hello Patient, this is (**Your Name**) from Dr. **XXX**'s office. Dr. diagnosed 2 cavities on your upper right-hand side a few months ago. I noticed you do not have an appointment to restore those teeth. Dr. has an opening tomorrow at 9am and would like to see you so we can ensure your dental health is taken care of." Stop talking

Patient:

“Tomorrow will not work with my schedule.”

Team member:

“I understand this is short notice. What days work best for you? Great, let’s get you scheduled on a XXXX”

Filling the Hygiene Schedule

Leaving a voice message.

“Hello **(patients name)**. This is **(your name)** with Dr. **(name)**. I am calling regarding your account. Please give our office a call at **(XXX)XXX-XXXX**. We look forward to visiting with you.”

The Patient answered the phone:

“Hello, **(Patient Name)**, this is **(your name)** with Dr. **(name)**. We received a payment from your insurance on the **(procedures)** from **(Date of Service)**. Your insurance did pay **\$XXX**. Therefore, your balance is **\$XXX**.”

Following up on an outstanding claim to the Patient

“Hello, this is **(your name)** from the office of **(Dr. Name)**. I am calling regarding a claim we filed to your insurance for date of service **(date)** in the amount of **(\$\$)**. We have not been successful at getting your insurance company to assist with this payment. We find it is very helpful when the patient contacts the insurance company. Can you give them a call to check on the status of this claim and then give me a call back?”

When Receiving a Call from a Patient Regarding Forwarding Their X-Rays

- Find out why they are leaving. “Hello Patient, thank you for calling today. Let me pull your chart up to get some additional information. May I ask you a few questions in the meantime?”
 - ❖ Will you be leaving our office or getting a second opinion?
- If they are leaving, “I am sorry to hear you will be leaving us. May I ask why you are leaving us?”
 - ❖ At this point listen to the patient. Do not take this call personal. Our entire goal is to help.
 - ❖ If they are getting a second opinion, ask why. Again, our goal is to help the patient. To help them understand we want the best for them. If they are price shopping, you cannot fix that. If we have done something wrong, we want to fix it.
- Try to repair the situation if it is something we can fix. Once you know the reason, if it something that we can try to repair, immediately attempt to handle the issue with the patient and/or escalate the call to an employee that can.

“COMMUNICATION IS ONLY EFFECTIVE WHEN WE COMMUNICATE IN A WAY THAT IS MEANINGFUL TO THE RECIPIENT, NOT OURSELVES.”

~RICH SIMMONDS

Voicemail Scripts

Voicemail Message during Office Hours

“Thank you for your decision to call the dental office of Dr. **XXX** in **Town**, where we specialize in **INSERT YOUR VISION OR MISSION HERE**. If you have reached this message during business hours, we are with patients, but look forward to giving you our attention soon. Please leave a message of any length including your name, phone number, and, how we can best serve you. We will return your call today. Again, thank you for calling and we look forward to helping you!”

After Hours Voice Message

“Thank you for your decision to call the dental office of **XXX** in **INSERT TOWN**, where we specialize in **INSERT YOUR VISION OR MISSION HERE**. You have reached us after business hours. We will be returning all calls once we return to the office. Please leave a confidential message of any length including your name, phone number, and, how we can best serve you. If this is an emergency, we are concerned about you and ask that you please dial our after-hours phone at **XXX-XXX-XXXX** so that one of our team members may respond to you quickly. Again, thank you for calling and we look forward to helping you!”



In Person Conversations

New Patient Arrival

“Hello (**NP Name**). It is nice to meet you, I’m (**state your name**). Thank you for filling your forms out online today. May I get your photo ID and your insurance card, I will make a copy for our records. Thank you. Also, I’m going to take a quick picture of you for our charting system. Wonderful. Please have a seat and one of our clinical team members will be with you shortly.”

Existing Patient Arrival

“Hi (**patients name**). So good to see you today! I will let the clinical team know you are here. They should be with you just shortly”

Showing Up Late

“We are so glad to see you Mrs. Patient, we were concerned when you were not here at 10:00 a.m. for your appointment.”

Be quiet for a minute and let them explain.

“Let me just step to the clinical area and see if they will still be able to see you today.”

Clinical team will see the patient, but will not be able to get everything done:

“Ms. Patient, the clinical team will be able to see you today, however, due to the time restraints, we will need to adjust what we are able to accomplish. They will go through all the details with you once they move you to the operatory.”

If they cannot see patient today:

“Mrs. Patient, I apologize but we are not going to be able to see you today. We had you scheduled at **(Time)** and it is now **(Time)**. We no longer have the amount of time needed to provide you with the best care. Let me get you rescheduled. In the future, please do give us a call if you need to reschedule or if you are running past your appointed time.”

The clinical team is running late, explaining to the patient.

Walk out to the patient or ask them to come to your desk.

“Hi, **(Patient Name)**. I do apologize, our clinical team has run into an issue, and they are running **(minutes)** behind. I will keep you updated with any information, and they will be here to help you as soon as they can.”



Financial/Insurance

Presenting the Treatment Plan

Hi (Patients Name). Thank you for coming in today. Dr. (**Name**) has created a treatment plan for you, and we have it in order of importance.”

Go through the any existing conditions, the Diagnosis and the Treatment suggested.

Example:

“You have a silver filling in the upper right-hand side. Dr. has diagnosed an open margin and recurrent decay in that tooth. He feels the best way to restore that tooth is with a tooth-colored restoration.”

The treatment plan should be set up so you can relay the following:

“Our office fee for this treatment is \$**XXX**, your insurance will assist you with \$**XXX**, your portion for the (treatment) will be \$**XXX**.”

Once you have finished the presentation of procedures and fee’s,

“We do accept Cash, Credit, Check and Care Credit. Dr. feels it is important to address the (location in the mouth) first. I have an appointment (**offer 2 appointment times**).”

Once the patient schedules the appointment, reiterate the Day, time, the procedures to be completed, and the patient portion.

Responding to High Fee's Comments

Patient “Oh wow, that is very expensive. I don’t think I can afford that.”

“Ms./Mr. Patient, I can understand your concern. We know healthcare can be expensive, however, we believe your health is the most important aspect here. We want to ensure you receive the best dental care and we will work with you to make this a part of your lifestyle. Let’s review the Dr’s diagnosis, the need for the treatment. And then let’s discuss the financial options we have available for you.”

Insurance Will Assist with Procedures

“Mrs. Mom Dr. **XXX** would like to do the restorations on the lower right side for the next visit. Your insurance company should assist you with XX% and you have a \$**XX** deductible. Your portion for that visit will be \$**XX**. I have an appointment Monday at 7:45 a.m. or Wednesday at 11:30 a.m., which one of those will work better for you?”

Insurance Will Not Assist with Procedure

“Mrs. Patient Dr. **XXX** would like to place the implant at the next appointment. Your insurance plan has an implant clause in the policy. We will file the claim with your insurance company; however, the implant will not be a covered benefit. Your portion will be \$**XXX**.

I have an appointment Monday at 7:45 a.m. or Wednesday at 11:30 a.m., which one of those will work better for you?”

Fee For Service Conversations

“Mr. Patient, thank you for trusting us with your oral health. Dr. has a comprehensive treatment plan for you. We have several financial options for you to help make this treatment a part of your lifestyle.”

Inquiring About a Pre-Determination

“We understand our patients want to know what they should expect when it comes to their insurance, and we are glad. We have great technology here in our office and we can communicate daily with your insurance company. They gave us a breakdown of your benefits, which we have entered in our software. We use all this information together to give you the best estimate of benefits we can give prior to insurance sending the reimbursement. We will always give you an estimate prior to your appointments. Once we receive your EOB and insurance reimbursement from your insurance company, if anything was paid differently than they informed us, you will be our first call.”

Asking For Payment at Time of Service

Hi **(Patient Name)**. It looks like Dr performed **(procedures)**. The total today was \$XXX, your insurance should assist you with \$XXX, your portion today is **\$XXX**.”

If the patient stalls:

“We do accept Cash, Credit, Checks and Care Credit.”

Stop talking.

The patient states they did not know they had to pay.

“It looks like we presented the treatment plan to you on **(Date)**. At that time, we did discuss the treatment and the associated costs. I have a signed financial agreement here and I am happy to review it with you to answer any questions you may have.”

At this point, remember to listen to the patient to help with a solution. Do not take it personal. Think outside of the box, such as calling with a credit card once they get home.

Overcoming Objections When Scheduling

Patient "I don't have my calendar with me right now. I am not able to schedule."

"I understand. May I give you a call before I leave today to find a time that works best for you? Based on Dr's diagnosis, I want to make sure we get the treatment scheduled and that you do not have any additional problems."

Collection Calls

Team Member: Hi, Mrs. Smith. This is Janet from Dr. XXXX office calling. How are you today?

Patient: I'm fine.

Financial Coordinator: I wanted to reach out to you about your account. I'm sure this was an oversight, but we have yet to receive a payment. Have you received a statement from us?

Remain silent and let the patient respond.

This may feel uncomfortable at first, but it is an effective tool.

Team Member: I wanted to let you know as soon as possible so you can bring this up to date. If it's more convenient for you, we can place it on Visa or MasterCard.

Patient: I don't want to put it on a credit card. I'll send you a check this afternoon.

Team Member: That's fine. When can I expect to receive a payment from you? I will follow up with you if we haven't received your payment. Thank you for choosing us as your oral health provider.

Collection Calls for 30, 60 & 90 Day Accounts

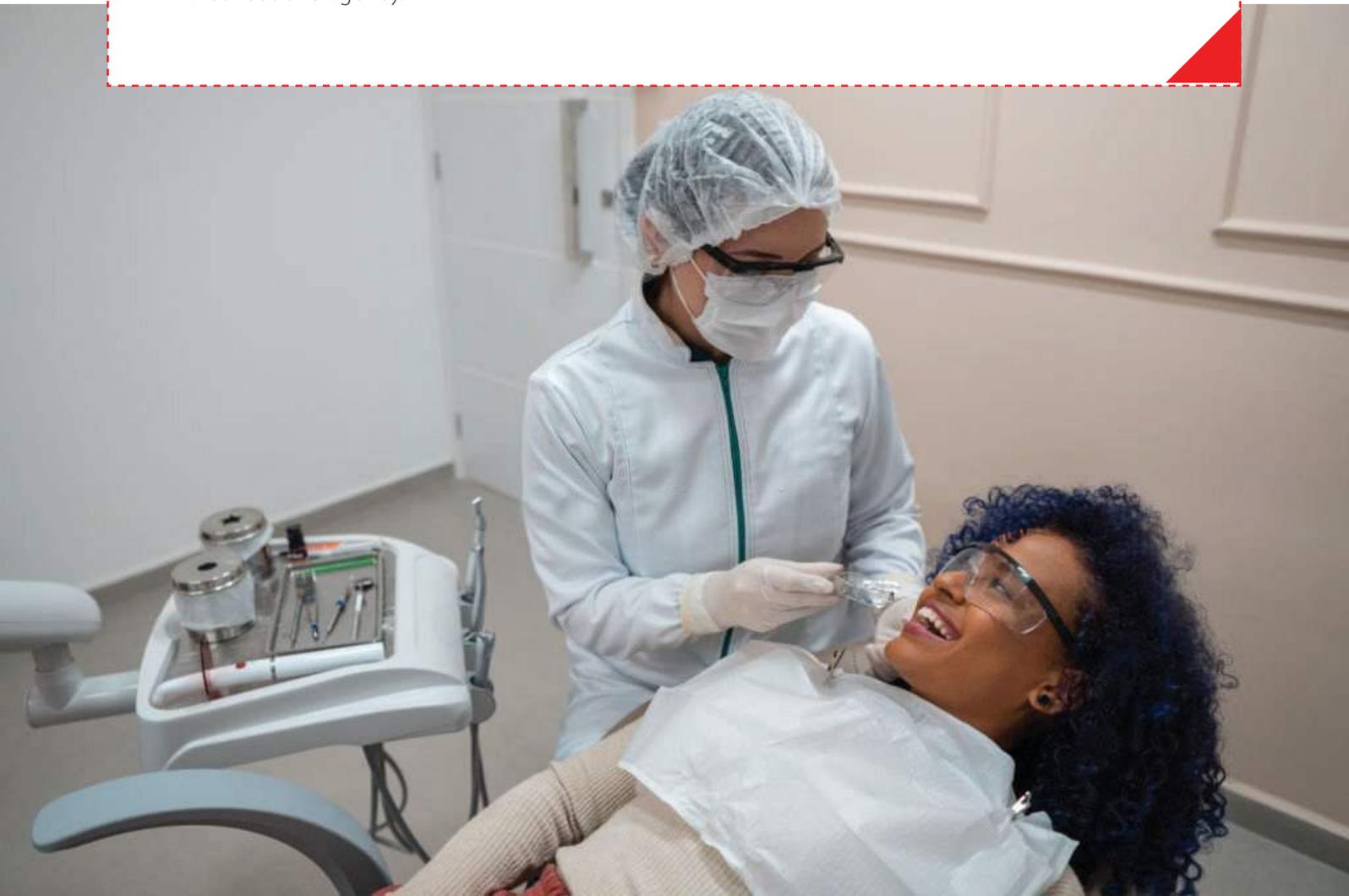
“Hello Patient, this is **XXX** from Dr. **XXX**’s office. I’m calling today to discuss your account with us. You were seen in our office (**DOS**) for (**procedures**). You have a past due account that is now 30 days past due. I can collect this amount today to stop further action on this account.”

60 Days, Second Call

“Hello Patient, this is **XXX** from Dr. **XXX**’s office. I’m calling today to discuss your account with us. You were seen in our office (**DOS**) for (**procedures**). You have a past due account that is now 60 days past due. We have sent 2 billing statements, and this is my second call to you. I can collect this amount today to stop further action on this account.”

90 Days, third and final call

“Hello Patient, this is **XXX** from Dr. **XXX**’s office. I’m calling today to discuss your account with us. You were seen in our office (**DOS**) for (**procedures**). You have a past due account that is now 90 days past due. We have sent 3 billing statements, and this is my third call to you. I can collect this amount today over the phone. Unfortunately, our next step will be to send this to a collections agency.”



Webutation Management

It is imperative you review and respond to each review you receive.

Responses to Reviews

Positive Review from a Patient

"XXX, thank you for taking the time to give us a review. We are so glad to hear you had a positive experience in our office. That is exactly what we strive to provide to our patients daily. We look forward to seeing again soon."

Negative Review from a Patient

"I am sorry to hear this was your experience in our office. It certainly was not what we strive to provide to our patients. May we contact you personally to resolve this issue?"

Negative Review from a Non-Patient

"Thank you for reaching out. We are unable to find your information in our system. Please do give our office a call so we can resolve this issue."

Negative Review from a Disgruntled Employee

"Dear XXX, we are so sorry your employment in our office did not work out for you or for us. We wish you nothing but the best in all your future endeavors."

The Clinical Team

Dental assistants will find themselves communicating with many individuals throughout the day, the patient of course, the business team, the doctors, and the hygienists, as well as other dental practices. Great information exchange is a key component to the dental assistant's daily job success. With the right verbal skills, you can make the doctor aware of the patient's information, you can make the business teams job more efficient, and you can ease the patient's anxiety.



“COMMUNICATION, THE HUMAN CONNECTION, IS THE KEY TO PERSONAL CAREER SUCCESS”~PAUL J. MEYER

In Person Communication

Receiving the patient from the reception area

Walk up to the patient.

“Hello **(patient name)**, I’m **(your name)** I will be working with Dr. **(name)** today during your appointment.”

Take them to the operator. Start your triage.

“Today we have your schedule for **(procedure)** this will include **(explain procedure)**. Before we get started, I am going to ask you a few questions regarding your medical and dental health history, medicine lists. Also, are you having any issues we should be aware of?”

X-Rays

Informing the patient x-rays are due today.

"X-rays are a diagnostic tool we use in dentistry. For Dr. XXX to properly identify and diagnose your needs, we take X-rays on all new patients."

The patient does not want x-rays

"We appreciate that some patients are concerned about receiving dental x-rays. What is your main concern?"

Listen to what is holding them back. Offer facts to help them understand the importance. If the patient still does not want them:

"I will let the Dr know your concerns. He/She will discuss them further with you."

Change of Treatment during the Appointment

Stop what you are doing, set the patient up and inform before you perform.

"Miss Patient, as you know we had you scheduled for **XXX** today. However, now that we are working on those teeth, the (cavity, infection...) is worse than we originally thought. To restore those teeth, I am going to need to (new procedure). This will probably change the fee for today as well. I can have a business team member come speak with you prior to moving forward if you would like."

Rescheduling the Patient

"Dr. has diagnosed additional conditions which need attention. It looks like our next appointment should be for (procedure). Let us get you scheduled for that appointment."

IF the patient does not want to schedule due to their schedule:

"I understand. Dr. is concerned this area could cause you problems. I would love to get this on the schedule. When you get to your calendar, feel free to call me directly if you need to move the appointment. We just ask you to give us 24/48 hours' notice to change it."

IF the patient does not want to reschedule due to money:

"I understand you have some concerns. When we walk to the business office to complete your appointment, we will make sure our team answers any questions you may have regarding the financial side of the next appointment."

Overcoming Objections When Scheduling

Patient "I don't think I want to schedule right now."

"Okay. What concerns do you have regarding Dr's diagnosis and the treatment he/she feels is best for you can I answer for you? I can also ask your assistant to come back and answer questions for you. I want to make sure we get the treatment scheduled and that you do not have any additional problems."

Quality Dentistry

"Dr. **XXX** is dedicated in meeting your dental needs. We will always provide the very best dentistry that our Dr's are trained to provide. (Business Team Members Names) are experts with insurance. They will be discussing your insurance with you at the business office."

Nitrous

"We find some of our patients are anxious when they see the dentist. We have nitrous oxide available to our patients to help ease their mind and to make them more comfortable."

"Dr. XXX will be happy to discuss the use of nitrous and your child's needs."

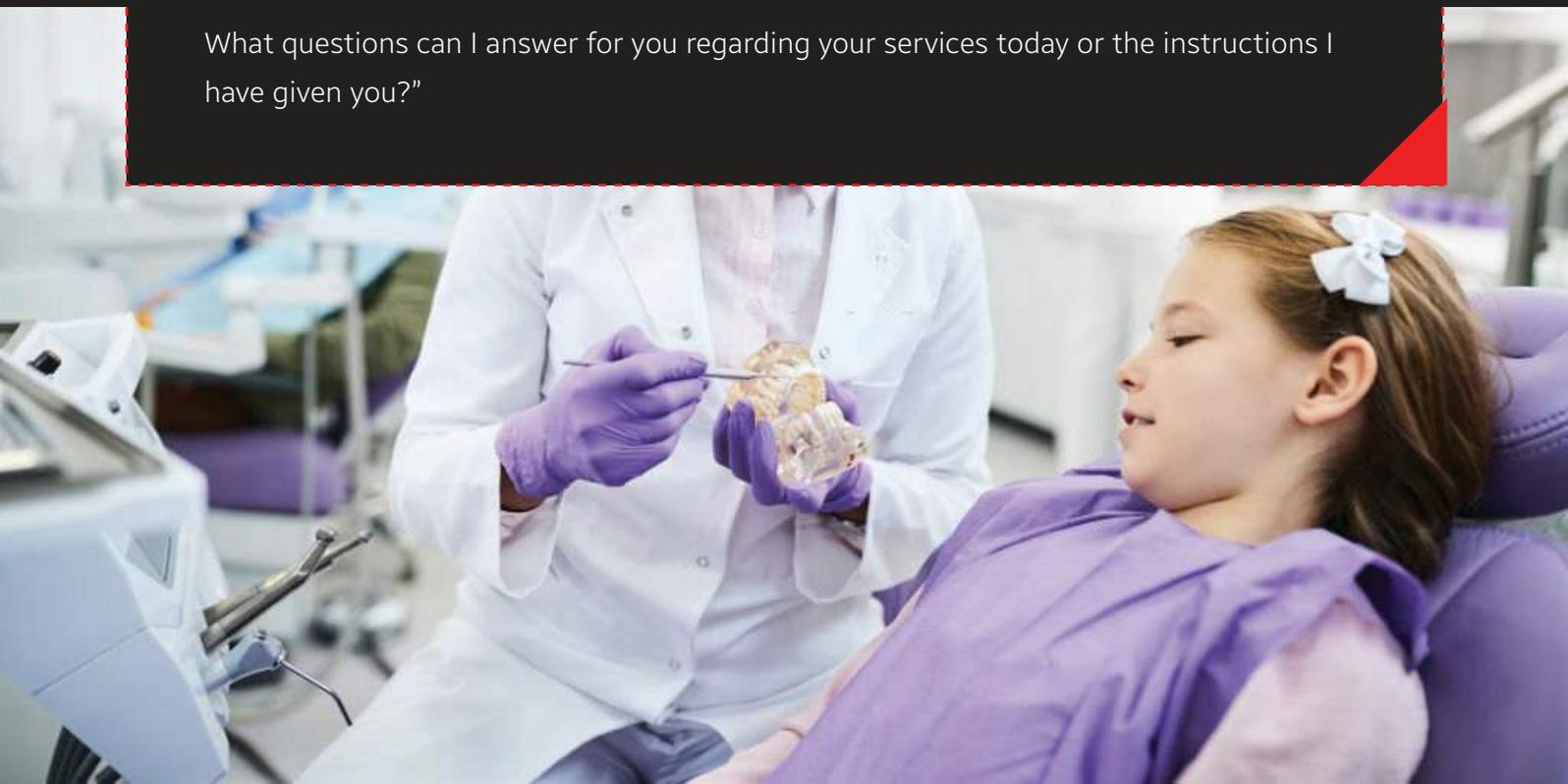
Post Op Instructions:

"Mr. Patient, you did great today during your visit. I am going to give you some instructions for the rest of the day to ensure you are as comfortable as possible."

Give your post op instructions.

"We will be calling you this evening to check in on you, however, if you have any questions or concerns in the meantime, I am going to give you my email address. You can also call the office and ask for me. I will be happy to help.

What questions can I answer for you regarding your services today or the instructions I have given you?"



The Hygiene Team

Receiving the patient from the reception area

Walk up to the patient.

“Hello (**patient name**), I’m (**your name**) I will be your hygienist today.”

Take them to the operatory. Start your triage.

“Today we have your schedule for (**procedure**) this will include (**explain procedure**). Before we get started, I am going to ask you a few questions regarding your medical and dental health history, medicine lists. Also, are you having any issues we should be aware of?”

X-Rays

Informing the patient x-rays are due today.

“X-rays are a diagnostic tool we use in dentistry. For Dr. **XXX** to properly identify and diagnose your needs, we take X-rays on all new patients.”

The patient does not want x-rays

“We appreciate that some patients are concerned about receiving dental x-rays. What is your main concern?”

Listen to what is holding them back. Offer facts to help them understand the importance.

If the patient still does not want them:

“I will let the Dr know your concerns. He/She will discuss them further with you.”

Presenting Fluoride

“Fluoride benefits everyone, particularly older adults. Adults have unique risk factors for cavities such as dry mouth from medications, gum recession, sensitive teeth from worn enamel, and restorations. By placing fluoride, we can help protect the investment of the crowns and restorations you have and help to avoid root cavities and sensitive teeth.”

Presenting Fluoride Varnish

“The varnish we use is on the cutting edge of fluoride delivery. The stickiness is one of the properties that make it so effective, by giving it a longer working time. The good news is that you do not need to wait thirty (30) minutes before eating or drinking; you only need to avoid hot liquids.”

“Fluoride is like a vitamin for your teeth. We recommend it because it strengthens the tooth, and the varnish absorbs more efficiently than other types of fluoride.”

Rescheduling the Patient with doctor

“Dr. has diagnosed additional conditions which need attention. It looks like our next appointment should be for (**procedure**). Let us get you scheduled for that appointment.”

IF the patient does not want to schedule due to their schedule:

“I understand. Dr. is concerned this area could cause you problems. I would love to get this on the schedule. When you get to your calendar, feel free to call me directly if you need to move the appointment. We just ask you to give us 24/48 hours' notice to change it.”

IF the patient does not want to reschedule due to money:

“I understand you have some concerns. When we walk to the business office to complete your appointment, we will make sure our team answers any questions you may have regarding the financial side of the next appointment.”

Scheduling Recare from the Op

"Let us get you scheduled for your next visit with me. We have you on a 6-month recall, that puts us (date). Does this time-of-day work best for you?"

Patient Does not know what they are doing that far in advance:

"I completely understand, scheduling in advance, who knows what we will be doing. However, it is best to get you on my schedule, as it fills up quickly. If you get home and find for any reason this appointment does not work for you, just give us a call and we will find a day and time that work better for you. We do ask for 48 hours' notice to move an appointment."

Concerns regarding financials

"Our top priority is to get you healthy. We offer six (6) to twelve (12) month no interest payment plans, or we can spread the treatment out some to ensure you can afford it. Our business team are experts at helping your dental care fit into your lifestyle. Tooth replacement and gum surgery is far more expensive than non-surgical periodontal treatment."

Periodontal Education

Responses to Reviews

Pre-Assessment

“(Patient Name), I am going to evaluate the health of your gums and bone around your teeth. I will be using this small, rounded instrument with millimeter markings on it from one (1) to ten (10). It is called a periodontal probe. I will gently measure the pockets around each of your teeth. I will be calling out several numbers, as well as areas of bleeding. Bleeding is a sign of active infection. When I call out the numbers 1-2-3, these are considered good readings, but anything above that, such as 4-5-6-7 or higher, means there is a breakdown of the tissue and bone, and you may have an active bacterial infection present.”

“Emerging research suggests a potential link between periodontal disease and major health problems. We now know that bacterial infection and inflammation may be related to other major health problems, such as diabetes, heart disease and stroke. Gum disease is chronic and cannot be cured.”

“The good news is that we can treat this conservatively with a non surgical treatment. We will place an antibiotic directly in the most infected areas (+5mm) to treat the infection.”

“(Patient Name) I am going to complete an exam that will determine how healthy the foundation of your mouth is.”

Post-Assessment Some Disease

“As I was doing your assessment, you probably heard be call out several areas of bleeding. Bleeding is a sign that there is a bacterial infection in your gum tissue. Based on our assessment you have (Diagnosis).”

Gingivitis

“The good news is that the infection has not spread to the bone surrounding the teeth. By treating gingivitis, we can prevent further infection from spreading into the bone.”

Arestin

“Scaling and root planning does not remove all the bacteria under your gums. Research indicates that placing antibiotics soon after scaling greatly improves the chances of successful healing of your gums. Treating the disease conservatively now with antibiotics could save you money on costly gum surgery or tooth replacement in the future.”

Discussing Periodontal Maintenance

“(Patient Name), we have come a long way with treating your periodontal disease. As we discussed before, periodontal disease cannot be cured and can become active again at any time. Regular maintenance is the one way we can help keep it in “remission” and treat flare-ups immediately when they come up. Research has shown that a three (3) month interval is effective at keeping the bacteria under control.”

“A periodontal maintenance is performed for those who have been diagnosed with periodontal disease. Once the bacterium below your gums is removed and treated with antibiotics, the germs under your gums can begin to return in about ninety (90) days. A “cleaning” does not allow us to go below the gum line and eliminate the germs. By coming in every ninety (90) days, we can keep the gum disease under control. Gum disease is chronic and cyclic. We cannot cure gum disease, only manage and control it.”

Patient Here for Prophy and Diagnosis is Periodontal Disease

“(Patient Name), I understand your concern. As I look at your record, I notice that for the past few years we have noted that you had bleeding and we have attempted to correct this with a simple cleaning. However, today we see no more improvement in those areas; in fact, the level of infection in your mouth has spread to additional areas. (Patient Name), what we have been doing is not working and it is time to do something different. We need to treat this active bacterial infection with periodontal therapy.”

Nobody Has Ever Told Me I Have Periodontal Disease

“We now know that periodontal disease can contribute to heart disease, stroke and other health problems. We are committed to educate our patients about this new information and to provide the best care possible.”

Discussing a Free Cleaning

“(Patient Name), if your gums were healthy, I would be happy to “clean” your teeth today. However, they are not. Doing a simple cleaning today would not be appropriate and would not address the infection in your mouth. We need to do a very thorough and extensive therapy to eliminate this infection. I would never want to provide treatment that is not appropriate for what you need.

You have been diagnosed with an active infection and inflammation in your mouth. Research now links this infection with other diseases, such as heart disease. A “cleaning” is designed to prevent infection, not treat it once it exists. We need to treat your infection by going below the gum line to the source of infection and place an antibiotic in that area to kill remaining germs, so we can get the infection under control.”

Scheduling

Periodontal Explaining Treatment

"The treatment could take approximately 1-2 visits with our hygienist. During this time, we will be removing bacteria and irritants from your teeth. You will notice your gums will become firmer and tighten up. We will also be instructing you in use of a plaque-removing instrument for home care. Studies have shown this instrument to be more effective than manual brushing for removal of plaque and control of gingivitis. Our treatment will succeed only to the extent that your home care succeeds, so we want you to have the best instrument available for your home care."

"Mr./Mrs./Ms. , before we start your fillings and other treatment, we first need to get the supporting structures - gum tissues - in good health.

I'm sure you've heard of periodontal disease. As you gathered when we were evaluating your gums, we identified some/many areas that need help. We need to first address the periodontal issues. We use a non-surgical approach that usually requires about 1-2 visits. It's the best way I've found for the two of us - you and me working together - to get your gums healthy and then keep them that way. It is important that we get started as soon as possible. I know I have given you a lot of information. What questions do you have for me?"

"Mr. Patient, gum disease is often painless until the final stages. Do you know anyone that has high blood pressure? That condition is often painless and until detected by your doctor may go unnoticed, yet it is certainly a very serious condition! Just as you would be concerned about your blood pressure and getting it under control, the same applies to the health of your gums and supporting bone. If undetected, the first sign of high blood pressure is often a heart attack! I would not want the first sign of gum disease to be the loss of my teeth!"

Another example might be:

"(Patient Name), there have been many recent advances in research, resulting in the development of new and exciting procedures in dentistry! One of the most beneficial is the screening process that enables us to detect gum disease in the earliest stages. As a result, a conservative therapy can be performed before the disease and infection is allowed to progress. Although we monitor your gums at your Recare appointments, many factors can affect their health. If you have been experiencing stress or your immune system is depressed, the progression of the disease may be affected. It is our commitment to screen all our patients on a regular basis since treatment in the earliest stages is the most successful".

Occasionally a patient may say, "But I thought you'd been cleaning my teeth every six months." Two suggested responses to that statement follow and can be used depending upon the clinical situation.

“The most recent clinical research on this disease has shown that often it will go into remission for extended periods and then the symptoms will reappear unpredictably. When the disease is under control, none of the symptoms are present or can be observed. Coupled with the fact that the disease is often painless, it can progress without you being aware of it.”

“Recent clinical studies show that the best results can be achieved with interceptive therapy, exceptional oral hygiene efforts and a more frequent interval of Recare for continuous monitoring of the disease.”

For the patients who are presenting with pockets of 5mm or more, it would be good to add:

“There’s a slight/moderate/good possibility that you’ll need some surgical procedures after we complete the therapy. If we get good results, that may not be necessary. That’s often the case. But even if you do need surgery, it should be less involved if your tissues are in better health. You will heal faster and be more comfortable. We need to start with this conservative approach and see if, between us, we can avoid or minimize the need for surgery.”

For The Existing Patient

“Mary, I have been treating you for several years and have been observing and monitoring the conditions of your mouth and frankly I’m concerned. We have taught you how to floss and brush, and the hygienist has worked with you on these techniques. Still the conditions are not improving, as a matter of fact, they appear to be getting worse. We have treated patients with similar problems with periodontal therapy and we are seeing great improvements in their condition.

“It is important to eliminate the infectious disease and restore the gum tissue to normal health. In a short period of time, you will **see** and **feel** a change and an improvement. Not only can we eliminate the tenderness and the inflammation in your gums, but also these other symptoms you checked off on the form that you completed. (Don't Wait Until It Hurts) With this treatment and your cooperation in home care, we can go a long way toward eliminating any further destruction of the bone support.

Post Op Instructions

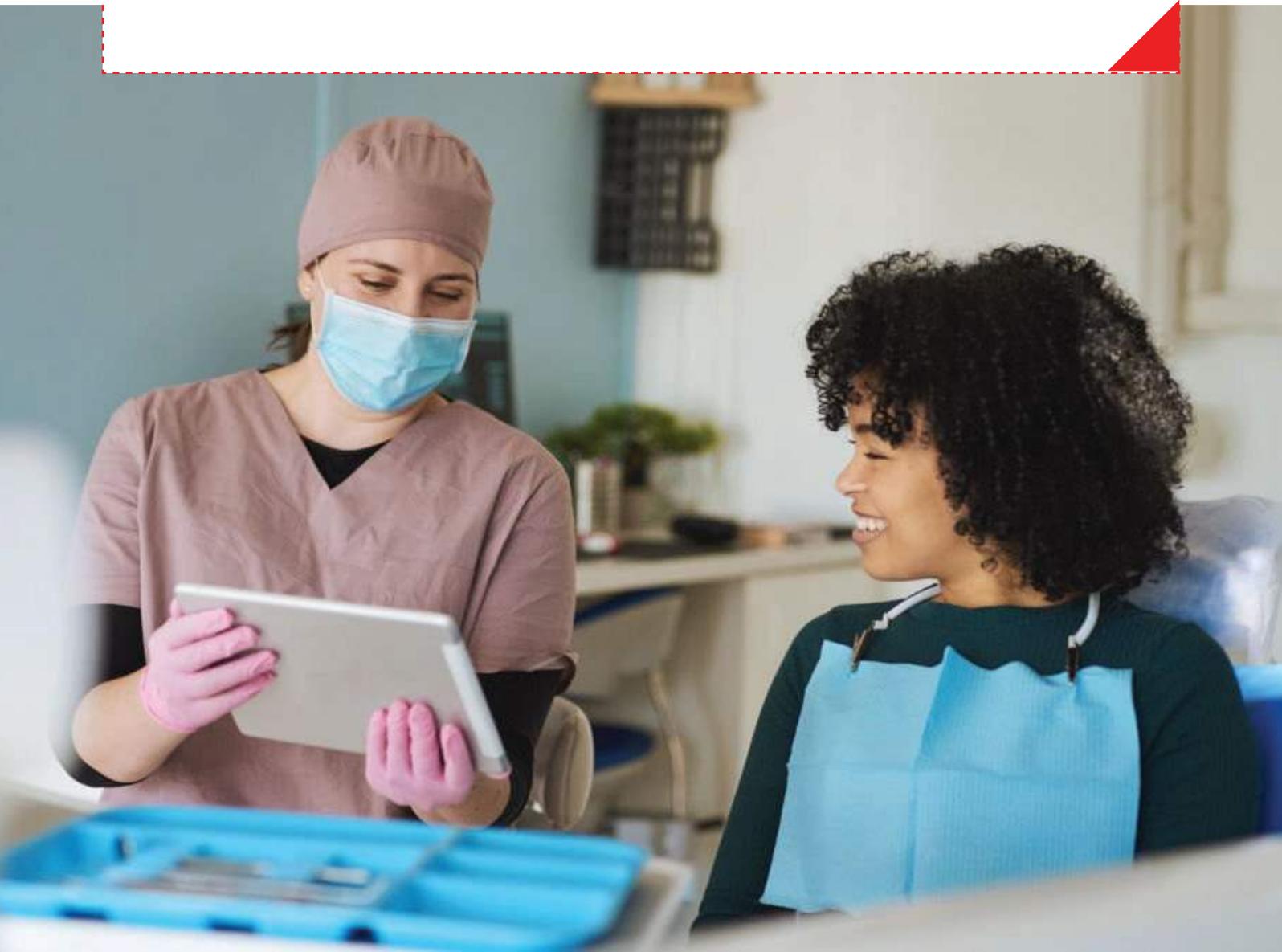
Hygienist to Patient

“Mr. Patient, you did great today during your visit. I am going to give you some instructions for the rest of the day to ensure you are as comfortable as possible.”

Give your post op instructions.

“We will be calling you this evening to check in on you, however, if you have any questions or concerns in the meantime, I am going to give you my email address. You can also call the office and ask for me. I will be happy to help.

What questions can I answer for you regarding your services today or the instructions I have given you?”



The Doctor Team

Introduction to the Patient

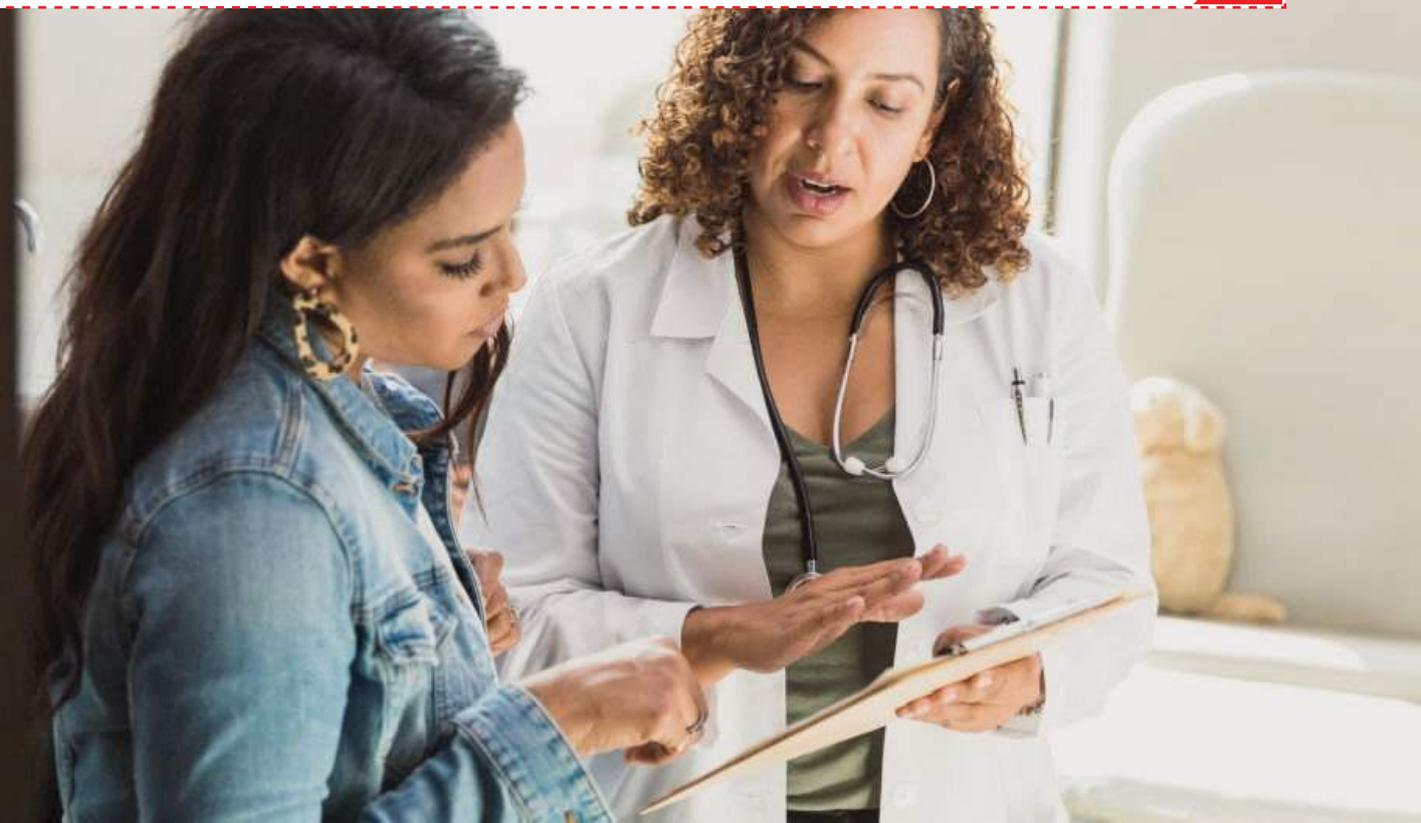
Hello **(Patient Name)**, I am Dr **(name)**, it is nice to meet you. Thank you for trusting us with your dental health today."

"I see here that **(assistant or hygiene name)** has updated your medical history and performed **(procedures)**. We have your schedule for **(procedure)** today. Are you having any issues I should be aware of at this time?"

Explaining Treatment

Okay, **(Patient Name)**, I am going to set you up to discuss your diagnosis and treatment needed."

Make sure to explain to the patient the diagnosis associated with the treatment you are recommending.



Patient Asks about Insurance

"I am glad you asked (**Patient Name**). Our business team are experts at financial and insurance questions. They will work directly with you and with your insurance plan to maximize your benefits. (**assistant or RDH**) please make sure the team is aware (**Patient name**) has questions regarding financials today".

Evening Follow Up Calls

"Hello, this is Dr. (**Name**). You did great today with your appointment. How are you feeling now? What questions do you have that I can answer for you?"

"COMMUNICATION IS POWER. THOSE WHO HAVE MASTERED ITS EFFECTIVE USE CAN CHANGE THEIR OWN EXPERIENCE OF THE WORLD AND THE WORLDS EXPERIENCE OF THEM. ALL BEHAVIOR AND FEELINGS FIND THEIR ORIGINAL ROOTS IN SOME FORM OF COMMUNICATION."~TONY ROBBINS



Chapter 4

Dynamic Handoffs

Hygiene Hand-Off to Doctor for Exam

Hygienist

“Hi Dr. **XXX**, Mrs. Patient is doing a great job with her home care. We took four (4) bitewing X rays today. She is having some discomfort on the lower right hand side; I did notice an area of concern on the X ray also.”

“Doctor, last time Mrs. Patient was in your diagnosed two (2) restorations on the top left, she does have some questions regarding those, can you answer those for her now. “

If the patient needs to work on home care, make sure you tell the dentist you discussed this so the doctor can reiterate your instructions. We want all messages to be congruent between clinical team members and the front office team as well.

Hygiene to Financial and Insurance

“(Patient Name), (Business Team Name) will be finishing up your appointment today.

Business Team Name, we completed exam, X rays, a cleaning and nitrous oxide today for (Patient Name). Dr. **XXX** identified that **XXX** needs to come back for restorations on the lower right and the lower left. Doctor would like to address the right side first. We will be using Nitrous with **XXX** for that visit.

Mrs. Mom, you're in great hands, **XXX** will answer any questions you may have.”

Assistant to Doctor-New Patient

Dr. **(Name)**, this is **(patient name)**. He/She was referred to us by **(referral source)**. **(Name)** last saw her/his dentist in 2018, and the hygienist in 2020. She is having some pain on the top right-hand side. I took a full mouth set of x-rays, an intraoral tour of the mouth and I have charted existing other. Miss/Mr. **(patient name)** this is Dr. **(Name)**."

Assistant to Doctor-Existing Patient

Dr. you remember **(Patients Name)**. We are moving forward with the upper left-hand side today, however, he/she is having some discomfort on the upper right."

Assistant to Business Office

"**(Patient Name)**, **XXX** will be finishing up your appointment today. **XXX**, we completed three (3) restorations on the right side today. Dr. **XXX** identified that **(Patient's Name)** needs to come back for restorations on the lower left. I did make her appointment for next Thursday at 1:00 p.m., can you just review that with her please?

Mrs. Mom, you're in great hands, **XXX** will answer any questions you may have."

Use the patient's name! Repeat any pertinent conversations that took place in the clinical room, so patient does not have to repeat themselves and they feel heard.

Scan Here for recoding to enhance your dynamic handoffs

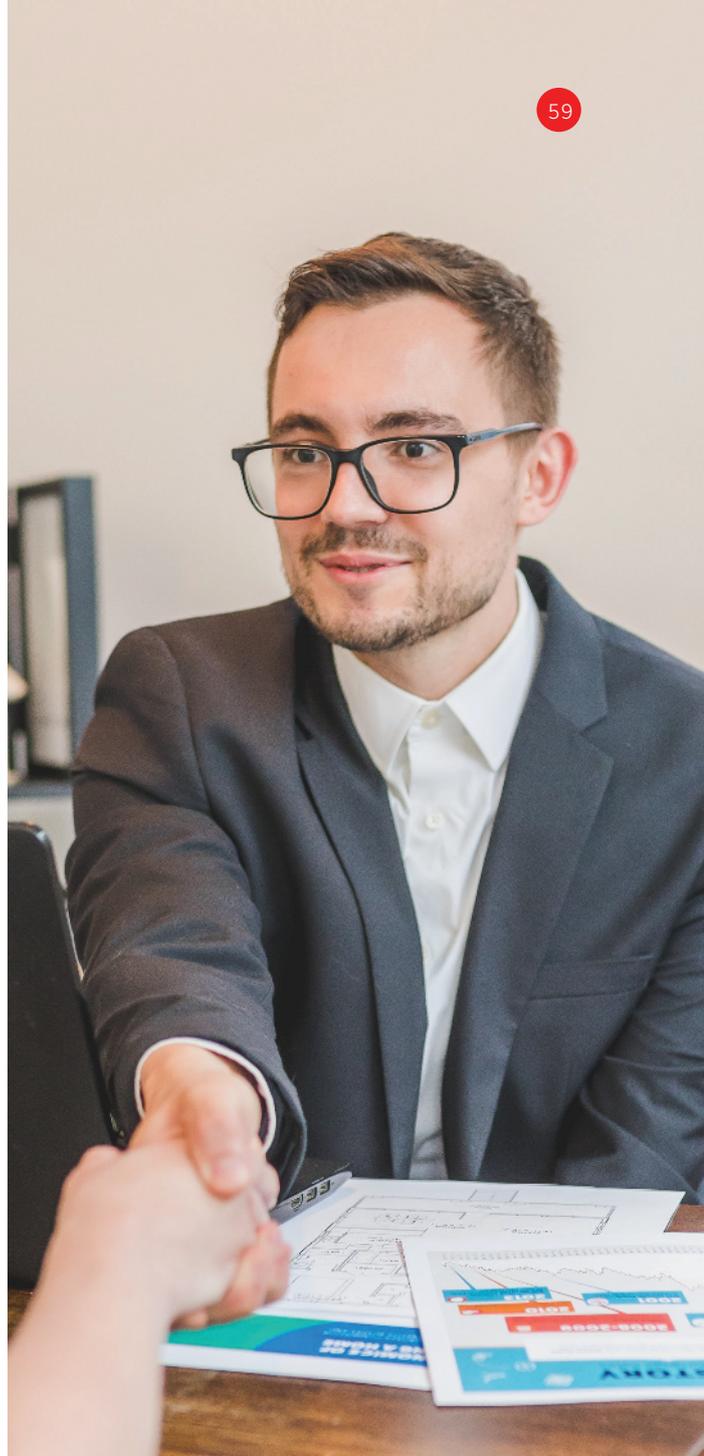


Chapter 5

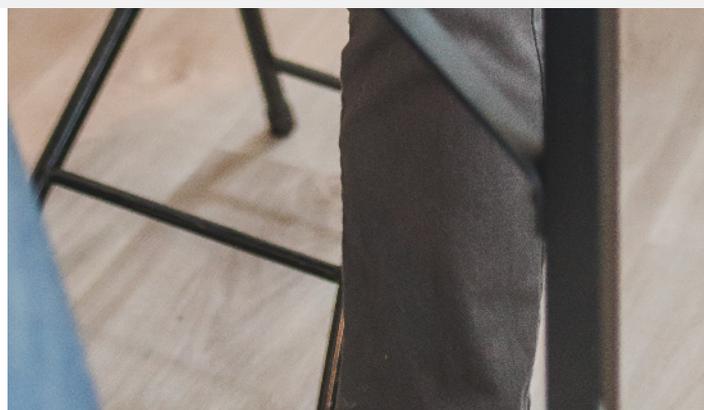
Conclusion

Congratulations! You have taken the first step to effective communications. To become a master of this trait you must practice daily. Hopefully, you bookmarked the pages that mean the most to you. Don't be afraid to read it again and to role play.

Practice makes perfect and effective communicators. Continue with your listening, which is a true art. Move on to the knowledge and the ability to adapt your communication skills to match others. Remember empathy and the understanding where the other person is speaking from. And finally utilize great verbal skills for any situation. Great leaders have several attributes with effective communication being at the forefront.



**“COMMUNICATION
WORKS FOR THOSE
THAT WORK AT IT”
JOHN POWELL**



Prologue

Many times, we receive calls, emails and even text messages asking for verbal skills or how we would handle certain situations. We love these interactions; the questions and we love hearing verbal skills improve. We have worked hard to create a Culture of Communication in Practice Dynamics, with all our clients and teams. Without communication, we are not a team. Without communication, we are lost, there is chaos, and we all fail. Communication, Great, Effective and Dynamic Communication is one of the basic foundations we built Practice Dynamics on in 2012. When we sat down to create this company, we discussed our Why. Why would we leave steady paying jobs to venture into the unknown, owning our own business? We both agreed, if we can make a difference, if we can effect change, if we are still passionate about coaching others to be their best, we are succeeding, and we are living our Why. Making a difference, effecting change includes how others communicate with one another. It affects the team, the patient experience and the success of a practice, the business.

Thank you for joining us in the journey to great communication. Here is a short video for you to learn more about our why.



<http://www.practicedynamics.net/>



888-425-3235

