IMPLANT PRACTICE

THOMMEN Medical



SUCCESS REPORT

from Thommen Medical and Levin Group



Welcome to Issue #4 of **The Implant Practice Success Report**, a monthly newsletter on implant practice success. Levin Group and Thommen Medical are very pleased to provide business education to implant doctors and their teams. Each month *The Implant Practice Success Report* will feature leading-edge education for managing, marketing, and maintaining a robust and successful implant practice.

In this issue we focus on the implant process.





The Implant Ballet

By Roger P. Levin, DDS

This may sound like an unusual analogy, but it works. If you have ever seen a ballet, you learn quickly that the choreography dictates that every move leads to the next move. This same concept can be applied to the implant process. From the first new patient phone call to the postoperative appointment, the process is a deliberate dance.

Just as in a ballet, surgical practices should choreograph each step in the implant patient process. As soon as the patient contacts the office, the new patient phone call should be the first step. What is communicated? Did you build value? Did the patient receive the impression of Five-Star Customer Service? Were they given information about dental implants and how to visit the website? These are all examples of questions that should be asked in developing the new patient phone call script.

Then there is the new patient implant consult confirmation. Did the implant treatment coordinator (ITC) call to introduce themself and welcome the patient again, which advances the relationship? Was the ITC able to reach most patients with implant consults? Did he or she make notes to remind themself about any questions or concerns the patient may have voiced in this conversation? Did they confirm the day and time? Has a solid script with key points to communicate been developed?

This is followed by the day the patient presents to the practice. How are they greeted? Does the patient feel energy, enthusiasm, and caring from the ITC? Was everything properly explained and were they guided through any preliminary process? How long will it take the ITC to meet the new patient and get the implant consult process started? Does ITC reaffirm and reinforce implant treatment excellence? Has a script been developed to help educate and motivate the patient about implant treatment?

Next, they meet the doctor. Do doctors pick up where the ITC left off? Do they spend time getting to know the patient and building a relationship? Do they perform an exam while

educating the patient about the excellence of dental implants and how they can improve the quality of life? Is there a relaxed time for questions and answers? Does the ITC have a guide for frequently asked questions (FAQs) that may come up after the doctor exits the consult room?

Then there are the final questions and answers, payment discussions, scheduling, and any other issues or concerns that a patient may have. Once again, this falls back on the ITC who is the liaison to this patient through the process. Has the entire process been positive? Does the patient understand why dental implants are the best choice for them? Is there a comfortable discussion around financial options that can help patients to afford treatment?

Finally, there is the confirmation call for the surgical appointment. This isn't simply a confirmation, but a chance to answer any additional questions that the patient may have so that they retain their confidence to keep the appointment and follow through with treatment. Has that call been scripted and is it made by the ITC (as the member of the practice team that has the most important relationship with the patient)?

Each of the above steps, and even the steps that get broken into other steps, are part of the ballet. We go from the new patient phone call, to the confirmation call, to the ITC presentation, to the doctor exam presentation, back to the ITC about fees, payment options, and scheduling, and onto the surgical confirmation call and day of patient surgery.

So, it really is a ballet of choreographed steps. Nothing is left to chance and the dancers (the ITC, doctor, etc.) don't go off and do whatever they want. They spend years practicing the moves to make sure they get it right. Otherwise, it could be a disaster. Practices should work through all the steps of the implant patient process as if it were a delicate balance of making sure that every step leads to and supports the next step.





How Well Do You Know Your Referring Doctors?

By Roger P. Levin, DDS

This is a very powerful question.

Most surgical specialists will state that they know them fairly well and you probably would as well. Okay then, let's take a quiz.

Think of your top referring doctor. Do you know if the doctor is married? Do you know their spouse's name? Do you know if they have children? Do you know their children's names? Do you know if they have a pet? Do you know the pet's name?

The odds are that you could answer yes to almost all these questions with maybe the query about the pet being an exception. In most cases your top referring doctor, and even the next three doctors on the list, have become personal friends. It is unthinkable that they wouldn't refer to you. You like each other, you spend time with them, and you know a lot about them.

Now think of the name of a referral source that's further down on your list and answer the same questions. You probably won't do as well. In fact, rarely can most referring doctors answer personal questions about referral sources that rank lower than their top referring doctors. The reason is that you don't spend as much time with these referral sources and they're typically not your personal friends. However, don't think of this as a criticism, but an opportunity.

Get to Know Your Referring Doctors

One of the concepts we teach to our specialist clients about referral marketing is to learn as much as you can about each referring doctor. We start by giving our clients a document called Levin Group's 46 Questions to Success. We then explain to the client that they should gradually work on being able to answer these questions which are about their referrers' practices, personal lives, insurance specifics, and treatment preferences. The more you know about each referring doctor, the faster referrals will increase. It happens almost every time.

This concept is based on human psychology. When people believe you're interested in them, know them, and care about

them, they respond positively. By learning more and more about each referring doctor, you create an opportunity to build a stronger relationship even though you will not be able to put the same amount of in-person time in with every referring doctor. But by getting creative with texting and email, you can still maintain communication with referring doctors and build and maintain stronger relationships.

Keep in mind that you will not see a difference in referrals overnight. However, when this concept is applied to 10, 20 or 30 practices, it works consistently. And after about four to six months, you will notice that referrals are going up.

There are endless opportunities to learn about referring doctors and create increasingly positive relationships. As the story goes, President Bill Clinton (no politics involved here) had thousands of index cards with information about the people he had met. The cards were used to help him include personal information in his phone conversations with these people. By all accounts, Clinton was an excellent communicator and developed very positive relationships. He credits this system as a crucial part of his path to the presidency. In my opinion, it was a brilliant way to maintain information on the seemingly never-ending number of people that he would meet throughout his career.

Today's technology allows the convenience of keeping a record of information on referring doctors on your computer. You might not remember that your #10 referring doctor has a child that is a great athlete, but having that information at your fingertips the next time you speak to them will show that you really care about them.

It's been proven time and time again. The more you know about your referring doctors and their personal lives and clinical preferences, the more referrals you will get. This also goes straight to the heart of making life easier for your referring doctors. Not only can you build a powerful relationship, but they don't have to keep reminding you about their criterion for their patients that you meet regularly.

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Summary

How much do you know about your referring doctors? If you're like most specialists, not as much as you might think. The good news is that you can look at this as a wonderful opportunity to take corrective action and start getting to know

your referring doctors on a deeper level. All you really need to do is begin asking them about themselves, paying attention, and capturing the information. It's not a complete referral marketing program, but it is a strong part of the foundation.

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Roger P. Levin, DDS is the CEO and Founder of Levin Group, a leading practice management consulting firm that has worked with over 30,000 practices to increase production. A recognized expert on dental practice management and marketing, he has written 67 books and over 4,000 articles and regularly presents seminars in the U.S. and around the world.

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