Building The Esthetic Aspect Of Your Practice: Part I
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“Offer patients the very best, make the financing of the treatment comfortable, and get out of the way so that patients have a chance to say ‘yes’ to the very best. Don’t do your presentations without careful preparation. Plan the case, prepare your presentation, and then present to the best of your ability. This is some of your most productive time. If a patient walks out your door saying they have to ‘think about it,’ everyone loses.”
-Dr John Jameson

Most people, when asked, would like to change something about their smile. The operative word here is “ask.” Open the door for conversations about smile enhancement by asking questions and listening without judgment. Most people have not had specific courses on the skill of listening even though they agree that it is a vital part of communication.

Some people are too embarrassed to bring up any questions about their smile. Therefore, when you learn to ask open-ended questions, when you use photography appropriately, and when you show respect for people’s personal opinion about their smile, doors may fly open.

Here are the 6 steps of case presentation/case acceptance:
1. Build the relationship
2. Establish the need
3. Educate and motivate
4. Ask for the commitment
5. Financial arrangements
6. Schedule the appointment

Step 1: Build the relationship
Without a relationship built on trust and confidence, no one will purchase your product or service. Trust and confidence is necessary with each member of the team. Each person on the team can make or break the relationship with the patient.

Telephone etiquette
On the initial telephone call, listening is as important as speaking. Nothing is more important than building the relationship. Do this by asking questions and listening. Through effective listening, determine wants and needs. Here is the key to case acceptance: determining a patient’s wants and needs and focusing on these during your presentation.

An in-bound caller will give you about 30 seconds to “sell them” on the benefits of coming to your practice. The person answering your phone must never seem too busy to make an outstanding first impression. You never know – the caller may be that person who is seeking you as the dentist who will remodel their smile. Marketing research says that 7 out of 10 people will make a decision as to whether or not they will make an appointment with you or keep an appointment with you by how they are handled on the telephone.

The goal of this initial call is to schedule an appointment for either a comprehensive oral evaluation or a complimentary cosmetic consultation. Track the number of people who schedule a new patient appointment and track the number of people who call and ask about your practice but never schedule. This data may give you an indication that telephone skills could benefit from improvement.

Your main goal of this initial call is to find out the primary interest of the in-bound caller and to “sell” the person on your dentist, your practice, and to schedule an appointment.

Write brief, thirty-second scripts about the esthetic options you offer in your practice. Then, practice these scripts. Team members will answer the telephone properly and productively if they have practiced the scripts with the correct verbal skills. If there are normal questions raised regarding money, insurance, time, and so on, determine how to respond to these questions. Practice these verbal skills. Then use them!

The important factor in any initial call is to find out what the patient wants before you dive into an “oration” about anything. Reflect back to the in-bound caller what you think they are saying, making sure that you are hearing them accurately.

During the initial call, gather necessary information so that the clinical team can be introduced to the new patient before their arrival. Once again, the goal of the initial phone call is to start building the relationship of trust and confidence and to schedule the first appointment. Everything you do should have the ultimate goal of encouraging the person to accept your treatment recommendations. If people do not say “yes” to treatment, no one wins. Tom Hopkins says, “The closing starts at the beginning of the transaction, when you first make contact with your prospect.”

Greeting
Upon arrival, the person greeting the patient needs to stop what they are doing and stand up to greet the patient. Introductions are appropriate. Personalize this time so that people feel comfortable and welcome.

The next person to meet the patient would be the clinical assistant. The clinical assistant should also introduce herself. The patient must have a good relationship with her, too.

The patient is then escorted to a non-clinical area for the initial interview. The clinical assistant could review the health history form, patient information form, and smile evaluation, making note of anything that needs to be brought to the dentist’s attention. Of course, if the material has been received digitally prior to the patient’s appointment or if the patient has mailed in the information in advance, the dentist will have already reviewed the information.
A Smile Evaluation Form can be used to open the door for conversations regarding both aesthetic and restorative opportunities and interests. Contact us for a copy of this form to use in your practice.

The clinical assistant will also inform the new patient about the procedure of the initial appointment. The patient will be more relaxed and comfortable, if they are informed.

When you know in advance that a patient is interested in esthetic care, including a smile makeover, show them a patient information video or a photo album of your dentistry. A patient education video can answer many questions that may be on the patient’s mind.

When the dentist arrives, the clinical assistant makes an introduction and the initial interview begins. The dentist reviews the information with the patient and may carefully refer to comments made by the patient on the initial evaluation form or Smile Evaluation Form regarding the patient’s smile. Their answers will give the dentist important insight and could open the door for esthetic conversations.

**Step 2: Establish the need**

Now it is time to establish both the perceived or “felt” need and to establish the clinical need. Perform the initial interview in a non-clinical area, if possible. You do not know how a patient might feel once they are seated in a dental chair: they may be anxious or nervous. If this is not possible due to facility constraints, do the initial interview in the clinical area, but keep the patient sitting upright in an adult to adult position.

Most people make a buying decision emotionally and will back that decision up with logic. In order for you to help a person make a decision to proceed with care, including any esthetic care, you need to be clear about their own “felt” or perceived need. People will buy what they want long before they will buy what they need. Your responsibility in your initial interview is to determine that “felt” need. You do this by asking questions and listening.

**Ask questions and listen.**

During the initial interview, open-ended questions relating to a person’s feelings about their teeth and smile need to be gently and caringly asked. An open-ended question cannot be answered with “yes” or “no”. Many negative emotions that people have about dentistry can be resolved when a patient realizes that you and your team are willing to listen to their point of view. The best way to dissolve fear or anger is to listen. There may be no communicative skill more important than the skill of listening.

“I have learned that the most critical aspect of any case presentation is creating a sense of urgency. But, I cannot create a sense of urgency for a patient without knowing their main motivation. I learn this by listening. If I have listened carefully, performed an excellent comprehensive evaluation, and studied the data, we can design a treatment plan that offers an optimal way for the patient to accomplish their goals.”

-Dr Mark Hyman

Now that you have completed the initial interview, escort the patient to the clinical area for the comprehensive oral evaluation. Provide a thorough evaluation on each new patient or on all returning patients, and do so in the same way every time.

At the end of your comprehensive evaluation, set the patient up, roll your chair around, establish eye contact and invite them back for a consultation:

Dentist: “Rachel, we have collected a great deal of information about your situation today. You’ve given me some important information regarding your expectations. I need time to evaluate this data so that I can design a treatment plan that is ideal for you, and one that would support your goals. I’d like to invite you back to the office in about a week so that we can sit down together uninterrupted to discuss my recommendations. Would that be acceptable to you?”

Find out if there are other decision makers involved. There is no reason to call for a decision if the decision maker is not there.

Dental decisions are not made sitting around the dining table, they need to be made at your dental practice where you have the visual aids and the professional information.

Schedule the consultation appointment within one to a maximum of two weeks following the initial evaluation. The patient’s interest will be at its highest level. Letting too much time pass before the consultation could lead to waning interest.

Once a person says yes to the consultation, ask them one more very important question:

Dentist: “Rachel, other than yourself, who will be deciding how you proceed with your treatment?”

**Treatment planning**

Once you have completed the comprehensive evaluation, schedule time to design a treatment plan that is optimal for the patient. Plan your cases while the information is fresh in your mind and before the patient comes back for their consultation appointment. Careful planning and documentation will support your care of the patient throughout their time with you. Your team can only perform well in all of their roles if a carefully designed treatment plan is a part of the patient record. Team members cannot make excellent financial arrangements nor can they schedule appointments properly if they don’t have a carefully documented treatment plan. Failing to plan will reduce your rate of case acceptance.

In Part 2 of this series on Case Acceptance, we will see how to prepare and present recommendations for dental procedures.