

# Surefire Ways to Get In Your Own Way

by Howie Horrocks & Mark Dilatush

Warning: This is a shoot straight from the hip article. The tone of our writing is purposely antagonistic to make a point. We do so, not because we are antagonistic. The tone is there because we want to motivate you to take action.



## **Be as demanding as you can be during the initial phone call.**

If a new patient calls asking to have their teeth cleaned, is there a legitimate reason you can't clean a new patient's teeth during their first visit? You can always educate the patient of their need for soft tissue treatment after you clean their teeth (satisfy their initial reason for calling in the first place).

Is there a legitimate reason why you might require a deposit over the phone to reserve their appointment time? Did you institute that barrier because you had a high percentage of new patient no-shows? It was likely your promotion at fault – not the patients. Don't build more walls! Take the walls down!

Is there a legitimate reason every new patient must go through a 1.5 hour new patient workup and come BACK to the practice to find out the dentistry they need? Can't you do a limited exam and present the comprehensive exam as part of your future treatment recommendations? In other words, can't your new patient exam protocol be more fluid rather than more rigid? Can't you adapt after the initial phone interview based on the patient's stated needs/objectives?

## **Let your ego drive your design and deployment decisions.**

Is the goal of your promotion to attract great new patients? Or, is the goal of your promotion to create a monument of your professional achievements?

We're not saying that graduating from a certain dental school isn't important, it is. We're not saying that completing oodles of post graduate education isn't important, it is. We aren't saying that the dental work you did on a supermodel wasn't terrific dental work, it was.

What we are saying is that these are not important to the dental consumer. If you take it too far, you can actually turn off the dental consumer! There is a fine line between promoting your practice and seeming full of yourself. You know what resonates far better with the majority of dental consumers? The candy buy-back program you sponsored at Halloween, where you bought the candy back from kids in the local community and sent the candy overseas to our troops!

The discerning dental consumer is fickle. What you think makes you a great dentist doesn't necessarily make you a great dentist in the consumer's minds.

## **Let your staff, spouse, family, friends, or a generic graphic designer dictate your design/copy/targeting choices.**

The scenario is all too common. Your staff, spouse, family, friends, and a generic graphic designer have NEVER promoted a dental practice before. The chances that they will stumble upon effective design layout and copy are slim – very slim. This adds significant risk to your advertising dollar.

The same thing can be said about targeting. Every dentist, spouse, and staff wants to promote only to the visibly perceived high income areas in town. They want to ignore all of the areas that aren't as visibly upscale. That's a mistake, potentially, a very costly mistake. All of the population in the US does not live beyond their means. There are plenty of potential high quality new patients that do not use their home as their primary source of wealth. There are plenty of high income earners in this country that live in modest housing.

We understand this is a tough one. The best solution is to simply delegate the promotion of your practice to a reputable firm. Let the professionals dictate design, copy, and targeting.

## **Whatever you do, don't bother tracking the number of inquiries by promotion source.**

Every dentist in America thinks their referral source data in their practice management software is accurate. So, they run a report once a year and use the data on those reports to gauge whether a promotion was successful or not.

We have another shocker for you. In twenty one years, we have NEVER experienced ONE dentist with pristine referral source tracking – not one. So, dentists everywhere make ill informed business decisions with (at best) partial information to guide them.

It doesn't have to be that way. What you want to do is set up a unique telephone number and call tracking system with each of your major outbound promotions. What you get in return is

astounding. You will have quantified evidence of every inquiry from each promotion. You will get to listen to each phone call to determine the training level of your team (or share it with your management consultant/staff training specialist). You will KNOW when your phone rings during business hours and nobody answers it. Basically, you will know and be certain of everything related to your promotions, if the inquiries are being handled, and how inquiries are being handled.

## **For goodness sake, don't ever call your new patients the day they call to make their first appointment.**

All new patients have a level of nervousness before visiting a new dental practice for the first time. Some new patients are 10% nervous, some are 100% nervous. All you have to do to get your cancelled new patient appointments down to zero is simply call the new patient on the same day they call to make their first appointment. Yes, the dentist should make the call. Call them, ask them if they are currently experiencing any dental pain of any kind (they won't be or they'd be in your emergency schedule), ask them if they have any questions at all about their appointment on [day] at [time]. Remind them of exactly where you are located and exactly where there is ample parking. Communicate that you are very much looking to meet them on [day] at [time]. BINGO! You will see an immediate decrease in new patient appointment cancellations.

## **Make sure you totally ignore the back door of your practice.**

Are you of the mindset that enough new patients will solve all of your problems? Well, a good number of great new patients will solve a few of your problems – but not all of them. In order for an effective promotion circle to be truly successful, patient retention and patient advocacy must be nurtured and measured.

If you bring in 25 new patients a month and 25 existing patients are falling through the cracks, is your practice growing? Well, temporarily it might.

Maybe if all you do is full mouth rehabs. But, for the vast majority of dental practices out there, the ultimate goal is to bring in more new patients than the attrition through the back door. This is really the only way a dental practice will grow revenues consistently.

We want you to go do this exercise right now to determine if you indeed need to spend some time and energy working on your patient retention and patient advocacy.

1. Go run a new patient report from 3-1-09 through 3-01-2010. Tally the total number of new patients between those two dates. This is your front door.
2. Go run an overdue recall report from 3-1-09 through 3-1-2010. Tally the total number of existing patients that have or are in the process of walking out your back door.
3. Compare the two numbers.

Best scenario is that your incoming number is about twice as high as the outgoing number. Unfortunately, only about 10% of you reading this will get that result. Most of you will get almost even numbers. Some of you saw fewer new patients than those that are those leaving your practice.

This is a simple measurement that should be run monthly and logged onto a spreadsheet.

Summary: If you really want all you can get from your marketing dollars, commit yourself to making some internal changes. Long term successful promotion of a dental practice requires change. Some of that change may certainly be your promotion, design, message, targeting, deployment progression, etc. These can be handled by a reputable firm. But many times, the dental practice needs to change a bit as well. If you do need to make some changes, make them. You will be a happier dentist in the long run.

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