

Transcript

Episode 34: Case Presentation Tips

Naren:

Hello everyone welcome to another amazing episode of the less insurance independence podcast show. I'm joined today with my dear friend, Gary! This is Naren, your co-host. Welcome to the show and before we start, I want to thank every single one who has who has been listening to us, who has been writing a review for us. Welcome Gary!

Gary:

Naren, I also want to thank those that have jumped over on our I love dentistry Facebook, ilovedentistry.com Facebook forum. A lot of our listeners we now see in the Isle of Dentistry forum. If you haven't done that, there will be a link in the show notes here. Click on that link and come join us in iLoveDentistry.online. So it's a private Facebook group it's a closed group you will it will it will ask you some information. It will ask where you heard about it. Be sure to say you heard about it from the less insurance dependents podcast and will let you into that group, but we'd love to communicate with you on Facebook between our episodes here on the podcast.

Naren:

Absolutely and we have been getting a lot of comments from people about the ideas you give Gary and many of those ideas some of them have actually used it and, and, they love it because they make tens of thousands of dollars from it, and one of the questions that came into our community is about case presentation and of course they know you are like the master at it so I would love to talk to you about case presentation you know how do you, you, know this not only helps with people who have insurance and don't have insurance but pretty much for every patient right how can you present ideal care in a way that you know patients want, want, it?

Gary:

You know in there and I might even suggest that if you're going to be successful dropping PPO plans, then you need to raise your game, doctors I'm becoming more effective at case presentation, because no longer is this going to be well it's covered by insurance, you know because we're outside of insurance. So you have to become even more effective and I hope that every

one of our listeners is on a lifelong pursuit like lifelong learning so that you're better tomorrow you know then you are today when it comes to your case presentation skills, so regardless of where you are in your career journey if you're a young doctor, if you're a mid-career doctor, if you're a late doctor, where late career doctor, regardless of where you are in your journey, I hope that one of your goals is to become more effective when it comes to communicating your patients to your patients about recommended treatment either that's necessary or desired, on their part. So I would like to share with you some tips that you guys can use tomorrow when it comes to case presentation tips, and first of all, I don't think there's any magic scripts or you know magic pixie dust we can sprinkle over your patients that will have them magically accept you know every recommendation. Rather I want to provide you kind of a framework to start thinking about this and thinking about how you might change the way you're presenting how you might evolve your presentation tips so that you become more effective and one of those I do want to sort of provide a foundation to and that is that we want to be careful about the language that we use with our patients. Let's make sure we're communicating in lay terms you know terms that the patient can understand. Naren! Can I give you a very simple example of that? So, so, for example, don't use tooth numbers, you know tooth numbers are something that we you know always use among you know in the dental profession you know we will talk to our team members about tooth numbers and you know talk to another dentist about tooth numbers. Something as simple as tooth numbers is confusing to the patient because they don't know what those tooth numbers are. They don't know what they are. So instead of using you know number eight number eight nine you know be sure to use you know your front teeth, talk about the area of the mouth, your upper left, your lower right and just something very simple but I find that Dentists often revert back to their habits and you're in the habit of using tooth numbers. Well I would like to share kind of a construct that might be very useful for you we use this all the time in our practice and it's called the permission statement, the permission. So as we start to talk to patients about what the condition of their mouth is we use what would I like to call the permission statement. Let me explain how this might work. So if my patients name is Bob, I might say something like this. I'm role-playing as if I was the dentist. I might say something like this Bob! I've had a chance to study the records and we've taken some records today we've taken some radiographs, we've also taken some photos. I've had a chance to study those records, and I've had a chance to understand from you what's important to you and now I'm going to share with you some recommendations, but before I

do that I would like to ask you a question. Bob, as I'm sharing my recommendations, do I have your permission to identify every area of concern in your mouth that I see? So that's the permission statement. As as I'm and actually we do this in the context of looking at photos with them. We take six digital photos. So we say Bob and what I would like to do is I would like to share these photos with you. As I'm sharing these photos with you, do I have your permission to point out every area of concern that I see? And guess what every patient says! Of course! Yes of course, please! that's why I'm here please! So now you have permission to be thorough.

Naren:

So you're flipping this right Gary! You are turning this into them identifying what the problem is?

Gary:

They are asking what you know they're identifying the problem through the photos

Naren:

And you got their commitment!

Gary:

And you got their idea

Naren:

and you got their commitment that you can you know have them discover this so they said,

Yeah! Absolutely! I want to figure this out

Gary:

In fact I think this solves the biggest problem that dentists have when it comes to case presentation and that is should they just present the necessary treatment on the one tooth that hurts or there should they present all of it and what I want to share with you doctors is that if you prejudge the patient, Oh well they don't have any interest in their mouth or they can't afford it. As soon as you prejudge them you run the risk of being a hundred percent wrong you have no idea what they might be interested in. It's that Wayne Gretzky you

know you're being a Canadian there and you will appreciate my reference to Wayne Gretzky! Right?

Naren:

Yes

Gary:

The famous quote is, "You miss every shot you don't take".

Naren:

Yeah I mean imagine walking into a restaurant and because the, the, waiter thinks you don't have money, you have money all these assumptions. They don't give you the menu. They don't tell you, you, know there a seventeen things we have for you and oh by the way this is my favourite and etc, etc, you know like imagine if they prejudge that No , no, no no, you don't know, I can't give you the menu ! sorry! I can't give it to you! It's crazy

Gary:

It's crazy and that's what that's what happens you know often in dental practices is we is and I think it's happening at the subconscious level. You're subconsciously prejudging and you're not giving the patient the opportunity. But if you just ask that permission statement and Naren I will role play. Naren, as you and I are going through these photos, do I have your permission to point out every area of concern that I see? What are you going to say?

Naren:

Absolutely!

Gary:

Now as we do that I want to soften it. I want to soften and here's the softener. So we start with the permission statement and then we soften it. We say as I share the concerns with you Naren, I want you to know that whatever happens next you have complete control. We can go as fast as you like if you'd like to get healthy right away or we could phase it in over time if that was either necessary or of interest to you. Now I'm going to repeat that again, Naren! As we do this I want you to know that whatever happens next is up to you. Now, what have I done there? I've given a control back to the patient which is what they want.

Naren:

And the other thing you have done, Gary is the unsaid, right the unsaid is the guys trying to sell me stuff, you immediately kind of

Gary:

I defuse it

Naren:

Defused it, exactly. You pretty much said you know remember you are in charge. I'm just here to share with you my thoughts on what I see that's it.

Gary:

Well if we have a younger patient, it's kind of playful in their personality. Paul or Tim will say, You are the boss of your mouth, you get to decide, you know I wouldn't necessarily do that with an older more mature patient but someone young that's playful and we have a good relationship with, Naren! You are the boss of your mouth, does that sound, okay?

Naren:

Absolutely

Gary:

Absolutely and then you know what this has been very useful for us and I want you to really get your arms around this. When you present comprehensive care one of the things you have to be careful about is accidentally communicating that it's all or nothing all or nothing. You don't do that intentionally, but if you're not careful, the patient might think they have to do everything or nothing and by the way Naren if we accidentally present it that way, guess what a lot of people do between all or nothing what will a lot of people do?

Naren:

nothing

Gary:

Nothing so next Paul will say something like and Naren, I'm going to make this up as if you're the patient I'm going to make up kind of common situations that we see may I have your permission to do that Naren?

Naren:
Absolutely!

Gary:
So you're the patient and I'm making it up this is fiction but, but, to give you an example. Naren, what I want to do next is share some recommendations with you and I'm going to divide these recommendations into two buckets. One bucket is what I would call necessary dentistry and there are necessary dentistry is that which deals with disease decay and the health of your gums. The other bucket over here let's call it things to consider. Things to consider. Now Naren, on the necessary side that tooth on the upper-left that's been keeping you awake at night, I would like to get that treated right away so that you can sleep comfortably again and here's what we would do to take care of that and I would share the recommendation, it might be a crown, it might be fillings, it might be whatever. Here's what we would do to take care of that and actually on the necessary side, Naren, that's it. You do a really good job with home care the health of your gums is very healthy. So in terms of necessary care it's this recommendation on that tooth. Now over here on the things to consider bucket, Naren, you have shared with me that you don't like the crowding in your lower teeth. You are a perfect candidate for Invisalign and Invisalign would correct those that crowding in your lower teeth and we would be able to do that without brackets or braces. So in terms of necessary dentistry, it's this treatment on that tooth on the upper left in terms of things to consider, it's this Invisalign option. Now before you leave today, Naren, I'm going to have Carly, she's our financial coordinator kind of our detail person. She's going to go over all the details with you about fees scheduling and that sort of thing. Her job is to make payment comfortable for you. Before I turn you over to Carly, do you have any questions for me about the recommendations that I've made? So now we stick back to the clinical stuff so before I turn you back over to Carly, do you have any questions for me about the treatment that I've recommended and again sometimes they do and sometimes they don't but I've already diffused it that Carly is going to cover all the details with the fees you know payment options that sort of thing. Naren! How does that sound?

Naren:
Yeah I love it. Gary, I think I mean like I just going back to that analogy of going walking into a restaurant and the guy doesn't show me the menu because he thinks I can't afford it. It's crazy but that's kind of what happens. Here you are

presenting everything but you are reminding them they are in charge. They don't have to order everything in the menu. They can pick and choose the things they want when they want it your job is to just guide them based on your years of experience.

Gary:

I want to share two other examples here because case presentation is never a one-size-fits-all, there is you need to have like think of yourself as having a tool built belt doctors with different tools on your belt that you can pull out when appropriate. So what I just described to you is a number of concepts let me repeat them real quick. The permission statement, as you and I are looking at these photos do I have permission to cover every area of concern that I see. Next I gave them control. When they say yes to that say and just understand that whatever happens next is completely up to you. We can go as fast as you like and get you healthy as soon as possible or we could phase it in over time if that was either necessary or desired and then we do the two buckets. Necessary bucket and I like the buckets cause it's just kind of fun and playful. It takes a topic that's kind of heavy it makes it lighter. Hey one bucket over here necessary dentistry. That's dentistry that deals with disease, decay, and the health of your gums. This other bucket over here, we will call it things to consider. So think of that as one framework that you can use. Now I'm going to share with you another framework. Naren, sometimes simple questions are actually very powerful and I'm going to present a scenario. Let's say that you feel like you're in very good rapport and relationship with this patient. Very good maybe it's someone that's been in your practice for a while they trust you you you love them they love you. Maybe it's a new patient that you've developed rapport and relationship quickly. May I go ahead and role play this with you Naren, we haven't we haven't talked to others ahead of time may I role play this with you?

Naren:

Absolutely!

Gary:

So Naren you're my patient. I'm the dentist and I'm going to say something like this, Hey Naren, I have had a chance to look at the records and we've taken records day, we've taken some radiographs, taken some photos had a

chance to look at those. I've also had a chance to listen to you in terms of what's important to you when it comes to your mouth. I would like to make some recommendations but before I do that may I ask you two questions, they're simple but they're important, may I ask you two questions?

Naren:

Yes!

Gary:

The first one is Naren, how healthy do you want to be?

Naren:

How healthy do you want to be?

Gary:

How healthy and literally notice the pregnant pause I literally stop don't say they will, how healthy when it comes to your mouth how healthy would you like to be?

Naren:

I want to score a nine out of ten if not ten.

Gary:

I mean here's what we usually say and again I you know and I are completely doing this extemporaneously. What most people say is, well all the way I want to be healthy.

Naren:

Yeah!

Gary:

Okay the next quiz so when they say that all the way and remember I'm not doing this on all patient, I'm doing that patients that I've got a strong rapport with. So the next question is remember you said all the way

Naren:

yeah

Gary:

By when?

Naren:

As soon as possible

Gary:

Now Naren, again we did not talk about this ahead of time?

Naren:

Yes!

Gary:

What did you say?

Naren:

As soon as possible.

Gary:

That's what everybody says

Naren:

Right!

Gary:

Every time and then we say okay based on those two questions you want to be healthy completely healthy and as soon as possible, let me share how we can accomplish that. Now there's another way. Now it that's a little bit bold I wouldn't do this with the patient I didn't feel like I had good rapport relationship. With those two simple questions how healthy would you like to be, I mean people don't say a little bit, like just like a little bit, not like not all the way I just want to be kind of healthy.

Naren:

Yeah!

Gary:

Everywhere, every time, I say the same thing all the way and fully healthy and then when you ask by when they say soon as now sometimes they might qualify that as soon as possible if I can afford it.

Naren:

Yeah!

Gary:

That's a great, well great I'll make sure Carly goes over all the details with you before you leave. Now there's one other question that I want you doctors they have on your hip pocket as you're talking about more comprehensive care, more comprehensive care and you define what that means in your practice for us it means you know significantly we significant reconstructive dentistry, but here's a good question to ask? Naren, I see a lot of concerns you've shared with me you know some problems you're having with your mouth and as I look at it further I see a lot of concerns and I'd like to suggest some recommendations on how we can take care of those concerns but before I do that I want to ask you a question? Is now a good time for you in your life is this a good time to address these concerns, is now a good time? and then just zip it up, because sometimes I said well you know Gary the truth is, we've got three kids in college right now I'm you know bleeding to death paying the college tuitions, not the best then we can phase treatment in we could say oh you know what we could phase this in and when you're done paying the college tuition bills then we can revisit it, but oftentimes people will say you know there is reasons well those said no no you know right now. I'm involved in a big project to work I don't think I can carve out the necessary number of appointment time to come in and do this. Well that's a fair, fair, answer but you want to know is now the right time, is you know the treatments going to be fairly significant, is now the right time in your life with what's going on you know I don't know everything about your life I know about your mouth. I don't know everything else, is now the right time to address taking care of this. Is is this the right time? People really respect that you've asked the question, and almost always you could phase treatment in. So you can say okay, well I totally understand with those kids in college right now. Why don't we start with this which will put us in a good position to be ready to do the more comprehensive stuff when you're not experiencing the high tuition bills?

Naren:

Right! So, what I got out of this is you're getting their permission, that's the first tip you shared, second is you gave them control back, right? You told them it's your mouth you are the boss of your mouth. I'm independent depending on the age you can use different language, and then finally what's the third point Gary?

Gary:

Well you know, we then switch gears over to those two questions for someone you feel really in rapport with.

Naren:

Right

Gary:

Which is how healthy would you like to be and by when, talking on your hip pocket this question of asking about timing, significant dentistry is often about timing, is this the right time in their life to address it and very often it is but even if it isn't the patient feels highly respected that you asked the question. You're not trying to pound a square peg in a round hole you know you've all heard me on this show talk about the golden rule. The golden rule is to take care of patients the way you would like to be taken care of. That's the golden rule, but there actually is a higher rule than that and it's called the Platinum rule. May I share with you the Platinum rule?

Naren:

Yes

Gary:

The Platinum rule is to treat patients the way they would like to be treated instead of the way you would like to so the way they would like to be treated and the application of the Platinum rule is simply asking the patient is now the right time in your life to address this.

Naren:

Right

Gary:

And that's the that's the ultimate and the patient feels highly respected even if they're not ready to move forward. Well I hope that these tips you know the the the the permission statement given the patient control the two buckets necessary and things to consider, the two questions to ask if you're in high rapport with a patient, how healthy would you like to be and by when, and I hope that that last question is now the right time in your life to address that. I hope you start incorporating those into your arsenal. You will think of it as a

tool belt, it's another tool to put on your belt and I hope that that those tips help you significantly increase the case acceptance with your patients. They've worked very well for us. They worked very well with our clients around the country and if you adapt these I would expect to see the same results as well.

Naren:

Absolutely! I think these are wonderful tips Gary, because like you said it's a Platinum rule, it's just treating them the way they want to be treated and I think that's kind of one of the biggest lessons that I got from this you know people the more they feel like you are on their side the more they you know treat you like you're on their side.

Gary:

And Naren to bring a full circle back to our topic, when you're treating patients with the Platinum rule,

Naren:

Yeah!

Gary:

You are treating them the way they want to be treated and you go out-of-network they stay with you because you've established that you're treating them the way they want to be treated and it's profound they stay with you when you go out of network because they aren't going to risk going somewhere else where they might have their own wishes disregarded.

Naren:

Brilliant, brilliant, thank you so much Gary. I learned so much today and I'm sure we are going to get a lot of people contacting us with you know comments and thank-yous and reviews, so appreciate your wisdom and for 39 years of experience?

Gary:

Yeah it's been a fun journey and it continues and I love sharing this stuff and my my most profound wish is that our listeners put it into action. Thanks Naren!