About 70 percent of the profits that Dr. Steven Tuttle personally generates for his successful family dental practice in suburban Richmond, Va. come from only 10 percent of his patient base. These patients pay Dr. Tuttle in full, in advance of treatment, which shrinks his accounts receivable to about one-third of typical practices his size.

Many of the 20-plus new patients Dr. Tuttle attracts each month sign up for treatment plans that generate as much as $5,000, $6,000, or even up to $14,000 worth of treatment. What drives these high-margin clients to his practice, says Dr. Tuttle, is Oral Sedation Dentistry (OSD). His staff and his patients love this methodology, which has transformed his office into a vastly more profitable and satisfying practice.

“When you see these [OSD patients] come in and smile from ear-to-ear like they’ve never smiled, it just gets us pumped up on a daily basis,” says Dr. Tuttle. Dr. Tuttle’s financial results are amazing, but what is even more remarkable is that by his own admission, the 57-year-old general dentist is really no different than thousands of other general
Attracting high-anxiety patients can reap substantial benefits for your practice. In part two of his three-part series, the author shows how, with Oral Sedation Dentistry (OSD), the path to increased profits is a road any general dentist can easily navigate.
since his team adopted the DOCS method.

Consistency throughout the dental office is of paramount importance, beginning with the receptionists and including those team members who handle financial arrangements, all hygienists, and all dentists.

Upon his return from the Miami course in February 2000, Dr. Tuttle purchased the specialized sedation equipment and supplies we recommended and began slowly to test his team’s newfound skills. His first OSD candidates were several of his existing patients who, because of fear, had been avoiding more extensive work. Although Dr. Tuttle initially performed OSD on a very limited basis — about one patient a month — the results, he recalls, were instant and powerful. “We were getting such satisfaction with the patients we were treating ... we decided we wanted to take the next level course.”

Dr. Tuttle and two members of his team subsequently signed on for our three-day, 20-hour live course, “The Complex Sedation Patient.” The course offers both didactic and live-patient experiences with an emphasis on handling particularly challenging cases. Now fully committed, Dr. Tuttle returned a third time a few months later to take our Advanced Cardiac Life Support class. ACLS is a stimulating safety course that familiarizes dentists with how to handle most “worst-case” scenarios, including the operation of automated external defibrillators. The course is a major confidence builder for all dentists, whether or not they practice OSD.

To transform his practice from one that was not prepared to offer OSD into one that confidently provides safe, high-quality dentistry to high-anxiety patients, Dr. Tuttle estimates his investment to be about $18,000 over a three-year period. This amount may seem steep at first, but it includes the initial training classes for his entire staff, the two subsequent optional courses, all travel for both doctor and team, and state-of-the-art sedation equipment and medications. By comparison, many of our DOCS-trained members — especially those with smaller staffs — are able to complete the training and buy the equipment for well under $10,000.

Indeed, Dr. Tuttle, who is by nature very conservative in his thinking and actions, was willing to make optional investments of time and money to be absolutely certain that OSD is safe, effective, and workable. His prudence has been extremely well rewarded. To date, Dr. Tuttle has performed about 150 oral conscious sedation appointments and is averaging 12 OSD procedures a month. Moreover, his average treatment plan for a new patient has more than doubled to over $5,000. As for his patient accounts receivable (something no dentist relishes), by mid-year, his had happily fallen from an average of about $72,000 to $28,000. He adds that even that low number is “dropping all the time” thanks to the prepaid nature of OSD.

While some oral surgeons view the OSD empowerment of general dentists as a threat to their turf and livelihood, Dr. Tuttle’s experience (and that of hundreds of other general dentists like him) has demonstrated quite the opposite. Dr. Tuttle regularly refers his new OSD patients to an oral surgeon when the treatment plan calls for procedures that he is less comfortable performing. “We’re not real interested in replacing oral surgeons,” Dr. Tuttle says, who stresses that his relationships with oral surgeons in his area are actually very good.

A recent example is an oral sedation case worth $14,000 that Dr. Tuttle shared with a local oral surgeon. The treatment plan called for a female patient with high dental anxiety to have a cleaning under sedation in Dr. Tuttle’s office, a second sedation visit for crowns in the lower right quadrant, followed by an appointment with the oral surgeon to remove three upper teeth and to prepare for implants. Finally, the patient would return for a third sedation visit to allow Dr. Tuttle to load the implants and do additional crown work on the upper surrounding teeth.

Keep in mind that the patients Dr. Tuttle refers to oral surgeons, such as the woman above, are individuals who would not be seeing any dentist had Dr. Tuttle not brought them back into the fold by offering OSD.

Dr. Tuttle refers all patients whose medical conditions or medical histories make their treatment high-risk. All DOCS-trained dentists are taught to establish extensive medical histories before accepting a patient for treatment and to refer any patient who falls outside carefully designed safety parame-
ters. (DOCS does not recommend using OSD on children, nor do we provide training for it.)

Perhaps because some oral surgeons and dental anesthesiologists fear that OSD will rob them of patients — which is patently false — a few have strongly questioned the safety of OSD and called for stricter regulation. Others have spread false, and frankly, malicious rumors about children and patients who died while being treated by our trained members.

These mistruths anger me not only because of the malice demonstrated by those who spread them, but because they put doubts into the minds of some dedicated general dentists who otherwise would be providing this valuable service to their patients.

Dr. Tuttle had to fully satisfy himself as to the safety of OSD before he would even remotely consider offering it to his patients. Indeed, I, and virtually every DOCS member I know, have dedicated our entire careers to safe dentistry.

Dr. Tuttle doesn’t hesitate to contact the physician of any patient when a question arises over medications or a medical-related issue. Sometimes a physician recommends that a patient be taken off a certain medication for a day or two to avoid a possible interaction. All patients are instructed to avoid caffeine, alcohol, herbal medicines, and grapefruit juice beginning 24 hours before their dental appointment.

To add an extra measure of security, Dr. Tuttle and all DOCS members are well trained on what to do in the rare event that a patient has an adverse reaction to the sedation medication. Thus far, about the most serious reaction Dr. Tuttle has had to grapple with are two cases of hiccups.

Although it is barely three and a half years since Dr. Tuttle took his first OSD steps, the journey has transformed him, his practice, and the lives of his patients. Thanks to the success of his OSD practice, Dr. Tuttle says he had the confidence to reinvest heavily in his practice. That includes upgrading to a new location and adding digital radiology to his array of equipment.

Most promising, Dr. Tuttle is bringing an associate on board. It is Dr. Tuttle’s goal to mentor the younger dentist and then, in seven years when Dr. Tuttle plans to retire, to allow the new associate to take over his practice.

In the third and final installment of this series next month, I’ll elaborate on the financial opportunities and get you thinking about what you might do with the extra money and time that OSD will afford you.

I’ll also tell you about the excellent strategies that so many DOCS members use to drive new, highly profitable patients to their practices. Indeed, before DOCS exposed him to these marketing powerhouses, Dr. Tuttle’s entire advertising strategy consisted of a yellow pages ad. But, convinced that he had to get the word out on how great OSD really is, Dr. Tuttle stepped up and adopted one of our more aggressive and far more effective marketing strategies.

“I felt so strongly that this was the right thing to do for people,” he recalls. “I just had to let people know that I was doing this.” Within the first week of his new campaign, Dr. Tuttle and his team were fielding 10 to 15 calls a day. On one day, the office logged 20 calls from new prospects.

If Dr. Tuttle can get results like that, so can you.