



Team Activity

Team Activity

Series 5 Personal Growth and Practice Development

Session 10 Creating and Presenting Cases and Building Complete Pathways to Health

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1. Make a copy of this worksheet for each team member to use.
 2. Complete the Team Activity.
 3. Fax or email one “Master Worksheet” containing your team’s collective efforts.
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Send Us Your Master Worksheet

Fax
615-807-3301

Email
Champions@DentalSuccessToday.net

Team Activity

Step 1 Review the Three Parts of Case Building

Begin by developing a shared, foundational understanding of case building before moving into discussion with your team on how to refine your systems, processes and protocols that help you create your patients' pathways to health.

The Three Parts of Case Building and Creating Your Patients' Pathways to Health:

Reverse-Engineering

Going from the big picture, down into the details, and back out to the big picture again will be the best conversational flow when case building with your patients.

Start with the end in mind: communicate what your vision of optimal health is for every patient in your practice, then compare the current state of your patient's mouth to that state of ideal and build backwards from there, using possibilities as your bridge between the two realities.

This is the secret to complete and comprehensive diagnosis, and when you begin with your vision of optimal health, all the heavy-lifting is done before your patient opens their mouth.

Patient Engagement

Once the vision is cast, the patient must step in to take ownership of their own health. The patient has already taken the first step by coming in to your office, so all you have to do is leverage your interactive diagnostic experience to foster your patient's ownership of their pathway to health.

Remember, it's not your diagnosis, it's theirs. It's not your vision, it's theirs. It's not your mouth or pathway to health, it's theirs. Maintain that frame throughout your patient's experience and they'll have the strongest platform from which to leap toward health.

The Clinical Yes

This is the spark that starts it all: closing the conversation with the clinical yes solidifies the sacred agreement between doctor and patient and brings your vision of optimal health to life.

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At this point, you've reviewed, defined and agreed upon your vision of complete health and your practice's pillars of health.

Now it's time to use those discussions to inform how you're going to improve your approach to diagnosing and building comprehensive cases.

Tip

Begin by visualizing: choose a patient in your mind and imagine reverse-engineering from your team's vision of complete health, back through each individual pillar of health, and finishing at that patient's current state of health.

Is your practice starting at the end goal and reverse-engineering comprehensive treatment plans, or are you starting at ground level and building cases up from there, becoming prone to compromise along the way? I.e. breaking up treatment, appointments, stages or steps.

When it comes to diagnosing and building cases, what are you doing now?

When it comes to diagnosing and building cases, what can you do better?

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Step 3 Get Specific

Go into the details and your actual movements: systems, processes, protocols.

Begin with a new patient visit, and together as a team, walk through everything that's supposed to be done, describing how you're creating the most complete pathways to health using your tools, technologies and resources.

What is your diagnostic process and protocol for new patients?

Tip

Detail every step of your clinical experience from before the doctor walks into the room, to the clinical tag team triangle, to after the doctor leaves.

Note

This should be centered around a systems-based approach: who does what, when, how, why and in what order?

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When are audibles to your process and protocol encouraged for new patient visits?

Do the same for four more types of patient visits, only this time, you choose what's most relevant and pressing for discussion in your practice.

Patient visit examples could include:

- Cosmetic
- Emergency
- Hygiene in need of updates and not

What is your diagnostic process and protocol for _____ patients?

When are audibles to your process and protocol encouraged for this type of patient visit?

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Step 4 Closing Gaps and Making Commitments

Finish this activity by reflecting upon and building on your work up to this point.

Answer the following questions and conclude with creating personal commitments.

When it comes to building the most effective, powerful and life-changing comprehensive cases you possibly can, where do you see gaps and discrepancies between how you're actually building cases right now and how you'd like to build cases going forward?

Why do these gaps and discrepancies exist?
