



PRESIDENT'S PERSPECTIVE

Many of you are aware of the American Association of Orthodontics meeting. This annual event is a great opportunity for doctors and teams to learn, get CE credits, network, and enjoy some great sights. This year is no different with the AAO taking place in New Orleans, May 3-6. For Ortho2, this isn't just a three-day event, but rather a yearlong endeavor. But don't take my word on it, read below for insights from Wesley DeShaw, Ortho2 Marketing Manager, and Drew Humphrey, Ortho2 Sales and Enterprise Manager.



Marketing Manager's Perspective

From a marketing perspective, the AAO is arguably the greatest opportunity in all of orthodontics. From booth placement and signage to understanding the different buyer segments, the work starts almost as soon as the previous AAO ends. Internal discussions and meetings begin that summer where we pick our booth location and sponsorship opportunities and begin work on marketing designs and concepts.

When we seek to prepare for an upcoming AAO, we analyze data to better understand our customers and trends so we can learn how

to connect with you better. Throughout the years, the sale cycle at the AAO has also changed and this has a huge influence on our marketing efforts. The AAO is no longer a single event occurring over a long weekend. From our seat, the AAO's influence begins well before and extends months beyond the actual event itself.

The marketing strategy we design for the AAO isn't a string of linear events, but a carefully curated campaign aimed at reaching the right group of buyers for our product at the right time.

Sales and Enterprise Manager's Perspective

It cannot be underestimated how important the AAO is for the Sales Team and Ortho2. While we spend a good portion of the year traveling to great conferences and study clubs, the AAO remains the gold standard in terms of sales activity. Here are a few quick beats on how the Sales Team approaches the orthodontic industry's biggest conference of the year.

Let's start by looking at the makeup of the team we bring on-site. In addition to the entire Sales Team, we bring along key members of the Support, Development, Implementation, Networking, Marketing, and Executive Teams – all supported by some of our amazing power

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Referral Rewards

Share the Spark. Ignite Success. There's no better time than right now to take advantage of referring your colleague to Ortho2 with our referral rewards program. We frequently hear from doctors that they wish we had contacted them before they purchased their current system. We wish we had too, but we didn't know they were looking. You can help us help your colleagues by letting us know when they are considering a change in systems.

You can earn a \$500 credit for each referral that results in an Ortho2 system purchase within six months. You can apply the credit toward any current or future charge or purchase—it never expires. Enter referrals online at www.ortho2.com > Our Company > Referral Rewards, or call 800.678.4644.



AAO ANNUAL SESSION
Voodoo Voodoo
- CREATING MAGIC SINCE 1982 -
NEW ORLEANS

OUR SHOP IS OPEN
VIEWPOINT TO EDGE CLOUD SALE

\$2,000 OFF
ONBOARDING AND TRAINING

No need to wait until the AAO Annual Meeting - ViewPoint users can score this deal on Edge Cloud NOW! With Edge Cloud you can give your patients a magical experience they won't forget.

Contact your Regional Manager to make the switch today!

Limited time offer. Sale not applicable on orders/deposits received prior to March 26, 2024.

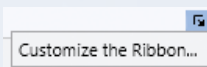
WORKING SMARTER WITH EDGE CLOUD

In February, we held our virtual Users Group Meeting with classes covering a variety of topics in Edge Cloud. There was a lot of discussion during the event about how Edge Cloud is used in various offices to make everyone's jobs easier. Here are just a few ideas from the meeting.

Customizing the Ribbon Bar

The ribbon bar in Edge Cloud can be customized to fit your exact needs. You can hide sections or buttons, or make buttons larger or smaller depending on what you use the most.

Click any corner icon of an Edge Cloud ribbon bar, and select **Customize the Ribbon**. The *Customize Ribbon* window opens with that section selected.



Choose the Edge Cloud ribbon bar you want to work with from the left side of the *Customize Ribbon* window. Once you select a ribbon bar, the middle section of the window lists all the sections in the selected ribbon bar, and all the icons available in each section. You can expand/collapse the sections as needed. Click to select the icon you want to work with.



Use the right side of the *Customize Ribbon* window to define how the selected icon should appear in your ribbon bar.

- Show or hide the icon in the ribbon bar using the **Is Visible** checkbox. Hidden icons will still be accessible from the corner icon of the ribbon bar.
- Select the icon size for your ribbon bar with the **Image Size** option. The image size changes automatically when you apply a ribbon bar template.
- Select to position the icon to the left, right, above, or below the caption in the ribbon bar.

Application Widgets

An application widget displays your chosen widget in its own window, so it remains available to you no matter what else you are doing in Edge Cloud. To open a widget as an application, choose the widget you want to work with, and select **Application** in the *Select Widget Type* window. The widget appears in its own window on your screen.



You can move and resize the widget window as needed, or you can pin it to a location within Edge Cloud. To pin a widget to your screen, drag it until your screen shows you the purple highlighted area where you want to place the widget. Once in location, click the pin icon to keep that widget in place. To see the widget again, simply hover over the tab with the widget name, or click on it.

If you decide to move the widget again, first unpin it. You can then click the heading and drag it again to where you would like the widget to be.

Workflows and Quick Actions

You can use workflows to automate Edge Cloud actions whenever something happens in your Edge Cloud system. Workflows can be set up for a variety of actions including creating a treatment chart record when an appointment is processed as kept, merging a letter after a specific appointment is kept, or even adding a patient to a stack. The possibilities are nearly endless.

You can find more information about setting up workflows in the Edge Cloud help menu, or visiting the visual help section of support.ortho2.com.

You can fire workflows with one click with Quick Actions. In the top right corner of Edge Cloud, click the blue gear icon.

Then click **Add/Edit** to add workflows to this list.

You can create workflows such as merging a letter or posting a charge by clicking the green plus icon. Simply fill out the wizard to add the Workflow to the Quick Actions.

You can create more advanced workflows, such as merging a letter and posting a charge, by clicking on the **Advanced Editor** option. Once you've added the workflows you use the most, click **Save**.

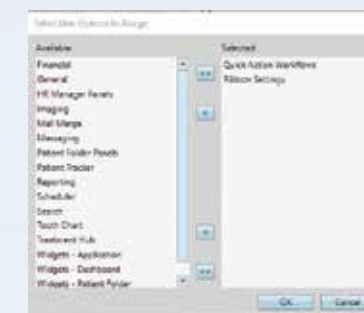


Assigning Options to Other Users

When you have Edge Cloud set up to your liking, you can push your settings to other users. This can be helpful so all the settings are the same when the orthodontist is moving from chair to chair during the day.

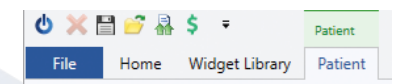
Click **Other Tools** in the **Tools** tab of the **Home** ribbon bar. Then click **Assign User Options**. You can assign a variety of options, including the items already mentioned in this article.

To assign options to another user, simply select the user option you want to assign and click the right arrow in the middle column. Then click **OK**. Now select one or more users to assign these options to, and again click the right arrow in the middle column. Click **OK**. A new window will appear letting you know the options have been assigned successfully.



Quick Access Toolbar

Do you frequently do a specific task in Edge Cloud that takes a few clicks to get to? Perhaps it's opening a patient folder, opening the mail merge, or importing images. You can add icons to your Quick Access toolbar to open these actions with just one click.



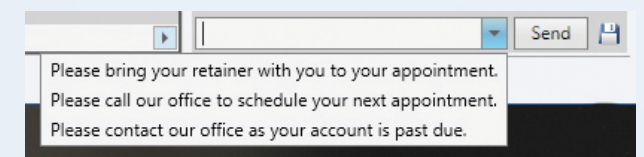
You can see your Quick Access toolbar above your **Home** ribbon bar. Simply click the drop down arrow in the Quick Access toolbar to see the options you can add or remove.

Optionally, you can move the Quick Access toolbar below your **Home** ribbon bar. Right click anywhere in the Quick Access toolbar and click **Show Quick Access Toolbar Below the Ribbon**.

Quick Text Messages

If you find yourself sending the same text message again and again, save some time by saving text messages as quick messages.

In the patient's folder simply right click the cell phone number and click **Text**. Type the message you want to save for later. A common example we see from offices is "Please contact our office as your account is past due." Click the save icon at the bottom of the Text messaging window, or right-click and select **Add Quick Message**. Now when you go to text again, simply click the drop down arrow beside the message box and choose the message you want to send.



To learn more about any of these topics, watch the recorded sessions from the Users Group Meeting at support.ortho2.com > Visual Help > Edge Cloud > Users Group Meeting. ◉

INVITATIONS TO THE ONE-STEP ORTHODONTIC CONSULT

Nothing stops a new patient conversation in its tracks more quickly than the following words: "I need to go home and discuss it with ____." If we fail to invite all the decision makers, then the exam, naturally becomes a multiple step process again and they leave without making a decision. We can carefully make slots available in the schedule for a scan, records, or even starts after each exam, but those slots will go unused unless we make some other changes. If we want to create a one-step treatment decision, then we have to redesign our new patient process to include the possibility that there might be more than one decision maker in an individual family dynamic.

The first change in your process is to add the initial invitation of any additional decision makers to your NP phone slip. "If orthodontic treatment is indicated at this time, is there anyone other than yourself who will be helping to make the orthodontic decision?" If they say yes, "Will he/she be able to attend the initial appointment?"

If the answer is no, then you have several options available. Schedule a phone/Zoom consultation:

- To begin just before the orthodontist discusses the treatment concerns and the treatment plan.
- At a different time later that same day.
- For another day in the next three working days.

The slight addition to your scripting could be, "We need about 15 minutes of time toward the end of the appointment to discuss treatment options, the benefits of orthodontic treatment, payment arrangement, and to answer any questions you both might have. Could he/she possibly be available by phone/Zoom for 15 minutes on the day of the appointment?"

If yes, "I can call and make those arrangements. What is the best phone number to reach him/her?" You would contact the additional decision maker and explain that you will send a Zoom link just prior to when the actual treatment discussion happens.

If the answer is no, then you would say, "We can set up a quick phone/Zoom consult on the same day or another day.

I will call him/her directly and set that up." If the additional decision maker prefers a phone/Zoom consult on another date, I would recommend scheduling that time as soon as possible and certainly within three working days.

If your office has never used Zoom you will want to get it set up for your office. In the meantime, you can begin scheduling the additional decision maker with a phone consult. If you have never run a Zoom meeting, the team can practice that together. It is important that several or all team members know how to set up a Zoom meeting in the event that the TC is not able to come in. Learning anything new always slows down your process a little until the new technique is learned. Do not get discouraged.

One day prior to the meeting you should send an email explaining that a phone call will be made, or the Zoom link will be sent. On the day of the exam, you should send the digital photographs and the panorex as soon as they are available. You can decide whether you want to share the computer screen or just let them look at the photos and X-ray that were sent. The orthodontist will then proceed with the orthodontic concerns and the treatment plan explanation. After that the orthodontist will say, "Is there any other treatment information you need from me to make a decision about starting orthodontic treatment? <TC Name> is our expert on financial arrangements and I will

Orthodontic Consult *continued on page 14*

About the Author



Natalie Beaton has more than 30 years of hands-on experience as a Treatment Coordinator and Financial Administrator. She works exclusively with Ortho2 clients to maximize their use of the Edge Cloud and ViewPoint systems in all critical practice areas.

Contact Info: joyfulchange@comcast.net • 804.310.2361

THE LEAKY MARKETING BUCKET: ARE HOLES IN YOUR MARKETING STRATEGY COSTING YOU PATIENTS?

Are there gaps in your online marketing strategy? There is little margin for error in today's digital landscape. With production stagnant or declining for many orthodontic practices in 2023, doctors and their teams are battling rising costs and myriad staffing issues. A well-rounded approach to your marketing will help your practice weather this storm and position you to tackle future challenges head-on.

Finding New Patients Where They Spend the Most Time

In the modern economy, local businesses must leverage digital channels to "blitz the market" where your prospective patients are the most active. A large portion of practices that are currently growing, despite unfavorable economic conditions, have been investing in their digital marketing for years. Smaller offices and older practices that always relied heavily on word-of-mouth referrals have gotten hit the hardest.

Are you actively posting on Facebook and Instagram? If not, that's a hole in your marketing bucket. Social media is a critical part of running any local business in this day and age. At the very least, it is a necessary evil. At its best, social media can make your practice a ubiquitous marketing force on every phone and computer in your local area.

Neglecting your social media can cause a lot of problems. Here are two of the biggest problems you create when you aren't actively posting on social media:

Perception. If prospective patients visit your Facebook or Instagram and see you haven't posted in a while or that you barely ever post, they tend to make assumptions about other areas of your practice. They might ask themselves, does this doctor ignore their patients in the office like they do on the Internet?

Potential. The content algorithms favor the accounts that post regularly (at least three times per week). If you barely ever post on social media, your content can get suppressed – no matter how good it might be! In other words, posting more content allows you to reach a wider audience.

Google Reviews Are More Important Than Ever

This strategy requires buy-in from the whole team. Failure to actively accumulate Google reviews could be another hole in your bucket. The practices with the most Google reviews didn't just get lucky: they invested time and resources. There are several ways to support an initiative to build your review count on Google.

You've got to make it as easy as possible for your patients (and their parents) to find your Google Business Profile. Does your practice management system have a feature to text review requests to patients after their appointments? If not, look for a 3rd-party review program that integrates with your existing systems to inject some technology into your efforts.

One strategy is to print a QR code that goes to your Google Business Profile and leave it at the front desk or on postcards in the treatment areas. Some teams wear them around their necks on lanyards. You can also now purchase Google review cards that work like a digital business card. You simply tap the card against a patient's phone, and they get a prompt to visit your Google Business Profile (like a QR code that skips the camera function).

Pro tip: Did you know that Google sometimes uses the keywords in reviews as a ranking signal? If you have the chance to coach someone on their review, explain the

Marketing Bucket *continued on page 15*

About the Author



Jeff Slater is the Vice President of Operations at Kaleidoscope. He is a local business expert with more than 10 years of experience in online marketing, SEO, website development, reputation management, Google Maps, and digital advertising for orthodontics.

Contact Info: jeff.slater@thekaleidoscope.com • 877.295.5611

MASTERING THE NEW PATIENT EXAM

There is a reason; some are more obvious than others. A parent, an adult, or a child has reached the point where self-esteem, peer pressure, a mirror, a photo, a Zoom meeting, a dating app, a missed career opportunity, or an unbitten leaf of lettuce means a decision point is on the horizon. They have reached out to you, scheduled time, and now it's decision day.

Whether by the more traditional in-office exam or the newer virtual screening, this is the day we find out if our marketing was effective. We learn if our new patient welcome call and process was an enticing or turn-off experience, especially in cases of second and third opinions. And we see if our affordability and solutions resonate with their budget and desires.

To use a football term, when a new patient shows up for their screening or exam, we have moved the ball down the field and are now in the red zone. Let's ensure we serve as their mentor and guide to help them reach their goal of a great smile! A win for them and us!

“Nobody cares how much you know until they know how much you care.”

Attributed to Teddy Roosevelt and popularized by John Maxwell

Five Parts of the New Patient Exam

With the advent of the streamlined single-visit new patient process, the initial visit has five standard sections. They are:

- Meet and Greet
- Doctor Exam
- Final Treatment Discussion
- Financial Discussion
- Next Steps and Appointments/Contracts

Even with the option of a virtual screening visit or a doctorless exam, we follow the same pattern. Let's walk through each section and then note the adaptations for the virtual or doctorless variants.

Meet and Greet

We all know first impressions are so important. While there

have been several first impressions with your brand and your team, this is often the TC's first impression with the patient and/or family.

We need to continue the movement begun by our SCs on their excellent new patient welcome call that starts transforming the practice from being a stranger to one of an ally and mentor to them.

This means that from the moment of the first meeting, whether live or online, lead with WARMTH before COMPETENCE. (The Big TWO of Communication, <https://blog.ortho2.com/posts/2023/the-big-two-of-communication>) Most TCs are very comfortable starting with a warm smile and greeting. And the best TCs naturally strike up small talk appropriate to the patient and family.

Then, we need to learn THEIR objectives and goals. This is done by asking good open versus closed-ended questions. We are not guaranteed an open book response

simply by using a good question, but we increase our opportunities by doing so.

For a child/teen, an example is, "If I had a magic wand and could instantly change anything about your smile, what would it be?"

For an adult, an example is, "How would you define success, and what would that mean for you?"

As a closure to this section, provide an agenda for the rest of the visit. (This echoes the details I teach SCs to provide on a new patient welcome call.) Finally, ask a "yes" inducing question such as, "Does that sound good to you?"

Doctor Exam

Let's begin with a live doctor's exam. Just as the TC did, the doctor should also lead with a warm welcome before demonstrating their competency.

Both adults and children form evaluations of warmth and competence after 100 millisecond exposures to a person's face!*

For TCs, while this is where the doctor's diagnosis and plan are highlighted, it doesn't mean you can be heads down into a computer. While you are not generally verbally communicating as much, your body language speaks volumes.

During the exam, while taking notes and preparing information, be sure you demonstrate that you are still part of the conversation. This means avoiding turning your back on the patient/family and doctor to be on the computer. Back in the day, when we took notes on paper, it was easy to remain facing the action. If adapting your keyboard and screen orientation isn't entirely possible, do your best to turn at least one shoulder more toward the active conversation.

After the exam, doctors must have a structured walk-through of their findings to avoid circular and confusing ramblings. When ready to exit, have a three-sentence exit speech. It can be, "We are ready/We will continue to monitor development. We'll take great care of you. See you in the clinic."

Variations – For those instances where the doctor is not visiting live, TCs need to provide verbal confirmation of the fact that a doctor HAS reviewed photos and/or records and provided recommendations. This is important to demonstrate value.

Final Treatment Discussion

This exam section is important but does not need to be extended. I notice this is a portion of the visit that can quickly become bogged down and move into too much information, especially if a TC has a clinical background.

The overarching goal here is to ensure there are no other questions or concerns about the recommended treatment. Sometimes, patients/families will not fully disclose apprehension to the doctor, so a final confirmation is wise. Another "yes" inducing question works, "Have we answered

your questions about how we can reach your goals?"

The other goal is to dismiss the attention of a child before presenting financial information. This is a high-level customer service action. It is thinking of a concern before the customer even formulates a thought about it.

We will give a thank you and a soft dismissal cue to the child, which allows parents to follow our lead or opt to continue having the child involved. Finally, for those parents who are concerned about impressions and respectfulness, giving permission for their child to play on their phone means they don't have to coax them to pay attention and stay off their phone.

Here is a way to transition the end of this section when there is a child present:

"Johnny/Suzie, you did a great job today, and you are all done. The rest is for your Mom/Dad, so with their permission, you are free to get on your phone (go to the game room)."

Financial Discussion

Oh, here is the tipping point in most visits. Without practice, I have observed TCs treat these last two sections like a hot potato. Or, going back to our football terminology, we get stopped in the red zone and turn the ball over on downs.

New Patient Exam *continued on page 13*

About the Author



Amy Demas is the President of Communicate Excellence. She empowers teams and individuals for the Triple Win to "Win the Call. Win the Start. Win their Loyalty". She coaches SCs, TCs, and doctors in their phone and consultation interactions.

Contact Info: amy@communicateexcellence.com • 203.266.1881



INSIDE ORTHO2

Information about the people of Ortho2 and the resources available to you as a member

ORTHO2 ANNIVERSARIES

Congratulations to these Ortho2 staff members who celebrated anniversaries during the first quarter of 2024.

Forty-Two Years

Dan Sargent

Thirty-Three Years

Diane Lyon

Twenty-Six Years

Coreen Magnuson
Mike Vest

Twenty-Five Years

Doug Olsan

Twenty-Three Years

Joe Levenhagen

Twenty-Two Years

Danetta Hiatt
Amy Schmidt

Twenty Years

Michael DiSalvo
Chad Kellner
Tony Kooima

Eighteen Years

Chris Bennett

Fifteen Years

Jim Powell

Thirteen Years

Mike Gude

Twelve Years

Mark Hoffmann

Ten Years

Lori Backous
Linda Cooley
Amia Sult

Five Years

Joe Randazzo

Three Years

Kimberly Betke

Two Years

Noah Parks

One Year

Monica Duarte
Teresa Gutierrez
Montana Horras
Leslie Mehalek
Jordan Neumayer

AVAILABLE FROM ORTHO2

Contact an Ortho2 Regional Manager at sales@ortho2.com or 800.678.4644 for details on any of these products and services.

EDGE CLOUD

Our cloud-based management system.

Your Edge Cloud System Can Include:

(Scheduler, Electronic Insurance, HR Manager, Patient Tracker, Treatment Hub, and Edge Proposal always included)

- Additional Edge Cloud User Licenses
- Edge Specialist (pediatric dentistry module)
- Edge Animations (patient education and case presentation)
- Edge Portal Premium (online account access for patients/parents/professionals)
- Edge Reminders (automated appointment reminders)
- Premier Imaging (ceph and morphing)
- Third Party Product Integrations

INVISIT

Virtual Appointment & Consult Solution

- Generate new patients with virtual consults
- Virtually monitor ongoing treatment and retention
- Communicate with patients through two-way text messaging or email
- Customize patient questionnaires
- Configure your management dashboard to fit your needs
- Integrates with Edge Cloud's Treatment Hub to quickly review submitted material
- Import submitted photos into Edge Cloud
- No app to download for patients
- Sign up at www.getinvisit.com

Equipment & Networking (For both Edge Cloud and ViewPoint systems)

- Computers, Printers, and Other System Components
- On-Site Installation and Configuration

ViewPoint™

Our local server management system.

ViewPoint Software Modules

- Additional ViewPoint User Licenses
- Edge Imaging for ViewPoint (enhanced imaging functions)
- Edge Animations for ViewPoint
- Edge Reminders for ViewPoint
- Premier Imaging (ceph and morphing)
- Treatment Chart (electronic charting)
- On-Deck Appointment Control (patient sign-in and operatory display)
- HR Manager (securely store employee information)
- Electronic Insurance
- Grid Scheduler
- Third Party Product Integrations
- DataMove Utility (transfer ViewPoint data from location to location)

Ortho2 Services

More Than Just Software

- On-Site Training and Refresher Sessions
- Web-Based Training and Refresher Sessions
- Credit Card Transaction Processing
- Edge Cloud (off-site, secure data hosting)
- VP Backup Online Storage
- Data Split (split Edge Cloud/ViewPoint databases)
- Data Merge (combine Edge Cloud/ViewPoint databases)
- Data Conversion (put non-Ortho2 data into Ortho2 file format)
- Image Conversion (convert your images to Edge Imaging)
- Custom Reports
- Custom Online Forms
- Custom Premier Imaging Analyses

ON A PERSONAL NOTE

Sara Harbacheck, Ortho2 Help System Developer, welcomed her third grandchild (and first granddaughter) Letty Joan Goodman, into the world on December 15, 2023. Best Christmas present ever!



Sara and Letty



INSIDE ORTHO2

Information about the people of Ortho2 and the resources available to you as a member

MEET THE TEAM - SALES

This quarter we are featuring the Sales Team. Kim Barker, Admin Specialist II/Meeting and Event Coordinator assists the Sales Team and is the guru of all things meetings. Drew Humphrey, Sales and Enterprise Manager, oversees the Sales Team and works directly with our OSO partners.

What do you really do here at Ortho2?

KB: UGM extraordinaire, assistant to the Sales and Marketing Teams, and work with all teams in the company to help with various tasks/duties.

DH: I am the Sales and Enterprise Manager. I obey whatever my calendar summons me for.

What's fun/what do you enjoy about your current job?

KB: The fact that this month, I will have been working at Ortho2 for 32 years. As you can see, I love everything about working here.

DH: There's always room for experimentation and adjustments. Trying new things and gauging how it can make our customers' and our teammates' lives better is an endless chase that is always rewarding.

What do you want our users to know about the Sales Team?

DH: The Sales Team truly wants what's best for the customer. They're consistently advocating on behalf of their customers and pitching creative ways to solve problems, taking a more consultative and service approach.



Kimberly Barker

Vacation destination: I would love to go on a world cruise stopping at several ports and countries. As an event coordinator I found that cruises are the best vacations for someone like me...no schedules!

Three people I would like to have dinner with: My mom (deceased), my son (lives far away), and all future grandkids.

My role model: My mom and mother-in-law. They are both the strongest women I ever knew!

I can't go a day without: Diet Pepsi

What are you listening to right now? 70s music.

Favorites

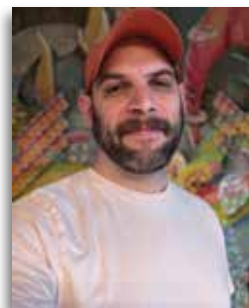
Hobby: I love making quilts and embroidery projects so I can give them away to family and friends.

Flower: Daisies because they come in several different colors and are very beautiful.

Movie: *Top Gun*

TV Shows: All of the different NCIS TV series and HGTV

Phone App: Jimmy John's



Drew Humphrey

Vacation destination: Banff

Three people I would like to have dinner with: Norm McDonald, David Foster Wallace, and Jimi Hendrix.

My role model: Lots of people and for lots of reasons. My wife and my mother for the "how is that even possible" factor

I can't go a day without: Taffy

What are you listening to right now? I'm a metalhead at heart, but I've been listening to Green Day's third major release "Nimrod". It scratches that pop itch with the Brit Punk anarchy that was all over those first few records.

Favorites

Team: Iowa State Cyclones, of course!

Software Program: Spotify

Movie: Gotta be *The Big Lebowski*. Really ties this questionnaire together.

Book: *Ender's Game*

Phone App: Amazon Fire TV Remote App. My kids lose the actual remotes nonstop.

New Patient Exam *continued from page 9*

We must remember we are there to HELP them versus CLOSE them. With a mentor mindset, the financial discussion becomes more cooperative versus emotional.

Transition by saying you will be going over the investment. Yes, it is an investment, not a fee or cost. As you begin, provide three to four things that are included with the investment. And as you walk through the numbers, point to them versus saying each number out loud. This helps their brain avoid being overwhelmed.

Then, walk through and demonstrate THREE options and their corresponding benefit – EVEN if you use a slider option. The three traditional options are pay-in-full (to maximize savings), a larger down payment and monthly payments (for those who like to complete payments sooner), and a small down payment and monthly payments (for the greatest flexibility to monthly budgets).

Finally, gain closure and transition from this section by ensuring that a financial option is doable by asking, "Which option works best for you?" Or "Have we provided an option that will work for you and your budget?"

And if they need to go home and think about it, we can reply, "I fully understand. I would, too. To check, as you take this home, do you expect there is an option here that your [partner] would find doable?" Asking this is one more opportunity to uncover a hurdle by allowing them to speak through the voice of the non-present person.

Variations – For remote/virtual exams, you can still gain agreement on payment terms with the understanding that at their first on-site visit, an exam will finalize the total investment. That means they know what their down payment and monthly payments will be, and what is left to be determined is the actual number of monthly payments.

Next Steps and Appointments/Contracts

Our goal in this final section is to guide them to a commitment – be that large or small. We start with the larger commitment, and if resistance is encountered, we step back to a smaller commitment.

We begin by turning to the calendar and stating, "Our next step is to look for the appointment Dr. Smile has recommended." A "YES" here is the large commitment of a start appointment/contract.

Variations – For remote/virtual exams, the big "YES" is a start appointment with extra time to incorporate a final doctor evaluation and investment total.

Should they balk and not want to schedule and want to think about it, we then use our calendar to place a reminder to ourselves. We say, "I understand. Is a week enough time to discuss this with your partner?" Then, "Great. I'll put a reminder on my calendar to reach out in a week to see what questions you may have." Then, confirm a general time and mode of communication (call, email, text).

The closure of this section is to thank them for coming in and confirming the next appointment or follow-up.

Summary

I love the efficiency and options we have provided our patients and families to gather information and get started. With practice, you can make the process seamless and pleasant as you meet your patients at their point of interest and need. ☺

* Willis J, Todorov A. First impressions. *Psychol Sci* (2006) 17(7):592-8. doi:10.1111/j.1467-9280.2006.01750.x

* Cogsdill EJ, Todorov AT, Spelke ES, Banaji MR, Inferring character from faces: a developmental study. *Psychol Sci* (2014)25(5):1132-9. doi:10.1177/0956797614523297

President's Perspective *continued from page 1*

users! By showing up in full force, we hope to empower our prospects and current customers alike to help them navigate the complexities of software transition.

Entire systems, protocols, and, as Wesley mentioned previously, marketing campaigns are thoughtfully built in preparation for each AAO. As year-over-year sales trends point to another fantastic year at the AAO, our experienced Sales Team is focusing on using these tools to qualify prospective buyers and see how Ortho2 can solve problems their practice may have. We typically close sales well into summer from relationships built at the conference.

As I previously mentioned, talking with you, our existing users, – getting your perspective on the system, learning how you use specific features in your office, or just shooting the breeze – is one of the best parts of the weekend. We're eternally grateful every time an Edge Cloud (or ViewPoint!)

user walks a colleague or peer over to our booth, and we're amazed every year at the sheer number of times it happens throughout the meeting. I'd like to preemptively thank you for trusting us to have that conversation. See you on the show floor!

Thanks for that peek behind the curtains Wesley and Drew! As they mentioned, the AAO is an incredibly important event for Ortho2, both in cementing and growing existing customer relationships and in pursuing new ones. As Drew mentioned, just like you, we love referrals. To that end, if you have any colleagues shopping, please send them our way in New Orleans or check out page 2 for how to submit a referral online. We truly appreciate your trust in us and hope to see you on the show floor! ☺

Amy Schmidt

Amy Schmidt, Ortho2 President

Orthodontic Consult *continued from page 6*

leave you in his/her very capable hands."

In a one-step orthodontic exam I think it is critical to get three separate YES answers. One YES to orthodontic treatment, one YES to the financial arrangements, and one YES to getting started. Once the TC discusses the treatment options he/she could say, "Do you feel all your treatment questions have been answered and that you understand the benefits of having that beautiful new smile for <patient name> (if patient is a child)?" If they answer YES, the TC would proceed.

"Before we discuss payment options that we offer, I would like to briefly review what is included in your orthodontic treatment." The TC would summarize a handout on the value of orthodontics and review the payment options sheet. (I'd be happy to send an example of this worksheet by request via email.)

"I'm going to step out so you can discuss the orthodontic treatment. Do you have any financial questions before I leave? Please just open the door when you are ready for me to come back in. Were you able to make a choice from the payment arrangements we discussed?" YES.

If a decision was made, "(Additional decision maker's name), I appreciate you taking the time to be here. I can set up any appointments needed with (other decision maker) so I can end the call. Thank you for being here for this visit."

"The next step is records/start. We have time available today to get started with the rest of the records (or start treatment). Can we go ahead with the additional appointment now?" YES.

In summary, it takes much less time to include all decision

Orthodontic Consult *continued on next page*

Orthodontic Consult *continued from previous page*

makers then you would spend trying to follow up and chase down that additional decision maker. Without the participation of the additional decision maker, a treatment decision CANNOT be made, and a same day treatment decision is impossible. Once you establish this new process it becomes second nature to provide phone/Zoom

contacts and soon, you won't remember that you ever did it differently. Remember how we struggled about including financial information and photos and X-rays at the exam? Now we would never go back to having all those separate appointments. ☺

Marketing Bucket *continued from page 7*

importance of describing their experience in detail and identifying the treatments or services they received at your office.

Don't Wait Until You Need Marketing to Start Marketing

It is critical to invest in your marketing as you go, steadily building a well-rounded approach. If you wait until things look dire and you need an Internet advertising program to save your business, it may already be too late.

Start by assessing your current Internet marketing foundation. Get your building blocks in place and move up from there.

- Is your website design up-to-date with good SEO and targeting the wants and needs of millennials?
- Are you publishing content about your products and services on your Google Business Profile?
- Is your business brand (name, address, phone number) consistent across all your digital listings and properties? AI programs are now monitoring local business information for accuracy.

Many practices wonder how much to spend on marketing. Small practices and startups should plan on committing 10-15% of their gross revenue to growth marketing. Medium-sized practices should reinvest 6-10% of their gross revenue in their marketing. At least 3-6% of gross revenue goes back into the marketing efforts of the largest practices.

Keep the Big Picture in Mind

You wouldn't be alone in having tunnel vision on one or two marketing initiatives that you know best. Maybe they have worked in the past; perhaps you're just staying in your comfort zone. Are those strategies still bringing new patients to your door?

Big picture, will they still be effective in three to five years? By exploring different opportunities and trying new things in your target market, you increase the potential for positive outcomes in the future. Like the old saying, "Don't put all your eggs in one basket."

Has your competitive landscape changed? What about your local target audience? As our communities evolve, the characteristics of prospective patients can change. Keeping the big picture in mind means regularly analyzing your local market for opportunities that maybe weren't there before.

Another big picture element that practices often struggle with is tracking. Failure to assess the return on your marketing strategy is another dangerous hole in your bucket!

It can be tedious, but do the dirty work to set up a system that tracks where your patients are coming from. If you are not tracking your marketing initiatives, you won't know what to keep doing or replace with a different tactic.

By plugging the holes in your marketing bucket, you funnel new patients to your office while making it even harder for your competitors to gain an advantage. ☺



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1107 Buckeye Ave., Ames, Iowa 50010

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EMPOWERING PRACTICES