



# Marketing the Endodontic Practice

PART I: Referral Outreach



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## Introduction

The *Marketing the Endodontic Practice* series offers guidance in everything from how to develop relationships with new dentists and retain existing ones to how to broadly market your practice in a way that also reaches patients. Each initiative directly or indirectly is meant to lead to a common goal – to drive more referrals to your practice.

The strategy in marketing to dentists in your community is to differentiate your practice and show how you, as a specialist, can partner with the dentist to better serve patients and create a greater cost-benefits for the dentist and patients in the process. A key component of marketing is developing stronger relationships to gain dentists' trust, which leads to increased referrals. As you consider marketing approaches outlined here, remember you will want to develop a marketing plan that is customized to your practice.

Key to the guidance you will find here are the AAE's nationwide **GP REFERRALS STUDIES**, first conducted in 2009 and repeated in 2012 to identify factors that affect dentist referrals to endodontists. Both studies found that general dentists want and appreciate communication from endodontists – the focus of our recommendations and guidance.

**“Be in communication with the general dentists constantly. It could be about clinical subjects or simply social calls.”**

*– General Dentist in 2012 GP Referrals Study*

For additional resources designed to help you better communicate with your dental colleagues, visit the **PRACTICE MARKETING CLASSROOM**. You can watch recordings of AAE-sponsored Annual Session courses about building partnerships and referrals, and download presentations you can use to speak to dental groups, study clubs and students. Advanced marketing concepts are outlined in **MARKETING THE ENDODONTIC PRACTICE PART III**.

If you have questions or comments about this content, please contact the AAE public relations staff at [pr@aae.org](mailto:pr@aae.org). Staff is available to provide guidance and advice about your marketing efforts, or serve as a second set of eyes in reviewing materials. You also are encouraged to share your marketing success stories and best practices.

While general dentists should be your main focus of outreach and relationship building efforts to increase referrals based on what the research tells us, some endodontists may be interested in direct outreach to patients and general consumers. You can find guidance and materials to help with those efforts in **MARKETING THE ENDODONTIC PRACTICE PART II: PATIENT OUTREACH**.

## 2012 GP Referrals Study Findings

In December 2012, the AAE completed its second **GP REFERRALS STUDY** in order to identify drivers that lead general dentists to refer patients to endodontists. Along with the original 2009 study, the findings have been very helpful in shaping points of emphasis as well as specific topics and methods to consider in endodontist-to-dentist outreach.

Overall, general dentists think very highly of endodontists with 94 percent saying they have a positive perception of endodontists. Yet, general dentists say they refer just 43 percent of their total patients to an endodontist in a typical year, and 60 percent are likely to perform an endodontic procedure that is moderately complicated. Further analysis of the results revealed that all general dentists would be more likely to refer to an endodontist if he/she:

- Perceives endodontists to be partners in delivering quality care
- Believes the work of an endodontist is worth the cost

**General dentists will be more likely to refer to endodontists if they perceive them to be partners in patient care and believe their work is worth the cost.**

When considering niche groups within the greater dental professional audience, the studies found female dentists and dentists with six to 10 years in practice represent the highest areas of growth potential. These two demographics are most likely to refer more than 10 percent but less than 90 percent of root canal treatments to an endodontist.

Other results from the GP Referrals Study that factor into our marketing recommendations include insights around:

- When general dentists refer a patient (*e.g.*, based on clinical conditions)
- Why dentists refer to a specific endodontist (*e.g.*, skills/expertise)
- What is most important in a general dentist-endodontist partnership (*e.g.*, endodontist sends reports and film in a timely manner)
- How general dentists want to learn about an endodontist (*e.g.*, from colleague)
- What topics general dentists are most interested in (*e.g.*, pain management)

More information about the factors that drive referrals to endodontists by demographics is in **UNDERSTANDING YOUR TARGET**. To see detailed survey results, go to **GP REFERRALS STUDY**.

## Marketing Overview & Best Practices

The overall objective of any marketing effort is to favorably communicate the benefits of your service and/or product to various target audiences. Primary among those targets in this case are other dental professionals, since they commonly are endodontists' primary referral source.

Marketing is not a series of random, uncoordinated activities conducted over a short-term period but rather a plan of inter-related activities to be carried out on an ongoing basis. A marketing plan serves as a roadmap to help you achieve your professional relations goals, which may include increasing or sustaining referrals.

The key to successfully marketing your practice begins when you **ASSESS** your practice dynamics, which means pausing to consider the marketplace and competitive dynamics as well as what has worked or not worked or what should be considered or not in your marketing.

That sets you up to develop a strategic marketing **PLAN** in which each activity is complementary and targeted. Your marketing plan fundamentally should include these components:

- Your business objectives
- What to do (*e.g.*, a website, practice brochure, etc.)
- How much to do of each thing (*e.g.*, how many dentist lunches?)
- Staffing and hours that will need to be dedicated
- What the timeline is (typically 12 months of activity, such as on a calendar year January to December)
- How much it will cost

It also will be critical to develop key messages that serve as the basis for everything you say in talking about the practice and for the materials you **DEVELOP**. You are then ready to **EXECUTE** through direct-to-dentist outreach such as:

- **Feedback** (*e.g.*, patient and dentist surveys)
- **Individual contact** (*e.g.*, call, visit, lunch)
- **Getting personal** (*e.g.*, gift/food, personal activity)
- **Group gatherings** (*e.g.*, open house, small group dinner)
- **Networking** (*e.g.*, study club, dental society meeting)
- **Education** (*e.g.*, CE course)
- **Written correspondence** (*e.g.*, newsletter, article with note)

Know that a marketing effort requires a commitment of time and resources on an ongoing basis. “Stop and start” marketing will diminish your effectiveness not only in the sometimes absence of marketing but in not leveraging and building upon your efforts over time. Returns on investment for marketing very much can be measured if you build that into your marketing plan [see **MEASURING SUCCESS** in *Marketing the Endodontic Practice Part III*].

Effective marketing has proven to increase awareness and drive traffic to businesses. It comes down to an increase in referrals, an increase in patients, and, in turn, an increase in your bottom line if you are consistent and take into account best practices.

## Your Practice “Brand”

Many confuse a “brand” with a logo, advertisement or slogan, and also may consider it to be more relevant to a consumer product than to an endodontic practice. In fact, a brand is a set of expectations and associations evoked from an experience with a company, product or service.

To that extent, your name and practice is your brand. All of your actions and the way you represent yourself to others – whether patients, dentists or the community at large – should be designed to support your brand. This is one reason marketing is so important – it is a means of sending and reinforcing positive messages to targeted audiences about endodontics, your knowledge and skill as a practitioner, as well as the level of care and attention you dedicate to patients.

Your brand and what it represents is signaled in everything from the design of your logo to office signage – even the way you decorate your office. If you represent your brand consistently, whether in written materials or in the way you verbally communicate and explain procedures to dentists and patients, you will be doing a much more effective job of building a brand with a series of positive associations.

“This guide ... helps you identify and develop marketing strategies that your practice should pursue, and provides guidance to evaluate your efforts in attaining your desired place in the market. The greatest feature with this guide is the way it simplifies a very difficult marketplace—a business model dependent on professional relationships in a competitive market where your customer is also your competitor.”

- John G. Hischar, Business Manager, Associated Dental Specialists, Pittsburgh, Pa.

You need to know where you are before you determine where you're going. In this section we'll talk about how to gauge dentists' opinions about your practice and evaluate your current marketing efforts.

### **Practice Assessment Survey**

For new general dentist relationships as well as dentists with whom you conduct periodic checks, sending a brief feedback form during the course of the year is an effective way to get immediate feedback you can respond and react to as well as factor information you're getting into your marketing planning process. As part of your annual practice assessment and planning, a more thorough survey to be completed by a representative sampling of your referring dentists will give you even more nuanced and detailed feedback.

To determine participants for the more encompassing practice assessment survey, take into account a cross-section of your dental partners based on: 1) years in practice, 2) gender, 3) longevity of relationship with your practice, and 4) differing degrees of past satisfaction with your partnership.

Pose questions that address quality of care, patient service, partnership and responsiveness/communication, all of which are key elements the AAE's *GP Referrals Studies* found to be important to the greater dental community. Be sure to include optional comments for each question.

*"I have a good working relationships with the endodontists that I refer to. They have excellent communication skills and are able to see patients in a timely manner. If they have a question on a treatment plan they are quick to call, and they are always available when I call with a question or comment."*

*– General Dentist in 2012 GP Referrals Study*

See the [PRACTICE ASSESSMENT SURVEY COVER NOTE](#) and the [PRACTICE ASSESSMENT SURVEY](#).



## Practice Assessment Follow-Up

Once you receive responses to your practice assessment survey, consider aggregate responses by question. The following is a guide for how to evaluate your practice scores:

- If the majority of responses are “strongly agree” and “agree,” you have positive consensus that you’re doing well in this area.
- If responses run the spectrum or fall heavily in the “neutral” category with some responses falling in “agree” and “disagree,” this is an area that should be more closely evaluated in terms of your business practices and addressed to diminish ambiguity and strengthen positive reactions.
- If the majority of responses fall in the “neutral” to “strongly disagree” range, this is a red flag area that immediately should be reviewed and a corrective action plan should be put in place as soon as possible.

Conducting the survey annually also will allow for trend analysis. By the second year, you have an opportunity to see how areas that were addressed have shown (hopefully) improvement or areas that may have been given less attention that need to receive more focus.

One of the most valuable portions of the survey are the two open-ended questions regarding what works best from and what could be improved by your practice. Look for insights into nuances in how your practice is perceived and trends in comments of things for you to address broadly across your practice.

For those respondents who chose to include their name on the survey, send a personal thank you to the dentist within one to two weeks of receiving their response. Let him or her know how you intend to use the information and apply it to your practice. Should the dentist have shown areas of concern (anything less than agree or in the comments), select a few areas that had the highest negative response and acknowledge those as areas to address. When possible, note if you have a specific explanation as to how you plan to address this for the dentist, or note what practice plans are in the works to address concerns.

See **PRACTICE ASSESSMENT FOLLOW-UP LETTER**.

## Marketing Assessment

As discussed in the **PRACTICE ASSESSMENT SURVEY** section, a formal annual assessment with a sampling of your referring dentists will provide an initial and, ultimately, year-to-year trend analysis of your practice. Building off of those findings or otherwise in lieu of a practice assessment survey, sit down with your staff and have an open, candid discussion about various aspects of your practice. Here are some sample questions to get the discussion started with an **AUDIENCE AUDIT** worksheet you can use with your practice that fully outlines key questions:

“This really allowed us to take a step back and look at the behavioral reasons for referral. The AAE research and guides set you up to be smart about your practice marketing and makes you more efficient in the long term.”

*- Julie Handy, Professional Relations Administrator,  
Endodontic Associates Dental Group, Sacramento, Calif.*

### About patients:

1. How would we describe our current and target patients by demographics, psycho-graphics and geography?
2. What have our practice patient trends – such as quantity of patient base and demographics of new patients – been like in the past year? In the past five years?
3. What do we hear patients say they most and least like about our practice in areas such as treatment/procedure, staff and the practice?

### About referring dentists:

1. How many dentists refer to our practice? How many dentists are repeat referrers?
2. How would we describe the different types of dentist who refer the most? Least?
3. What do we hear dentists say they like most and least about our practice in the areas of our expertise, patient service and how we partner with them?

Once you have taken this look at your targets, audit how you currently are conducting professional relations and general marketing. Consider the elements in the following categories and ask yourself the following types of questions, which are outlined fully in the **MARKETING AUDIT** worksheet:

### Marketing efforts overall

1. Broadly speaking, how would we describe how extensive and effective our current marketing efforts are?
2. What specific efforts would we deem more or less effective and why?
3. Have we set up an approach to gauge results? If so, what does that entail?

### Materials

1. How well are our practice messages coming through in the materials? For example, are the messages clear and uniformly applied in all materials?
2. How consistent are our practice materials? For example, does the content (*i.e.*, messages) and design of my brochure complement my website? Do materials look like they come from a single source based on look/feel/content?
3. How well do the materials reflect our practice brand? For example, do they project the personality and differentiation we're trying to get across?

### Outreach

1. In each of the following areas, how would we describe the 1) types, 2) frequency and 3) effectiveness of our dentist outreach?
  - a. **Feedback** (*e.g.*, patient and dentist surveys)
  - b. **Individual contact** (*e.g.*, call, visit, lunch)
  - c. **Getting personal** (*e.g.*, gift/food, personal activity)
  - d. **Group gatherings** (*e.g.*, open house, small group dinner)
  - e. **Networking** (*e.g.*, study club, dental society meeting)
  - f. **Education** (*e.g.*, CE course)
  - g. **Written correspondence** (*e.g.*, newsletter, article with note)
2. In any of the above areas, what are the 3 things we should be doing more of based on how they have been received by dentists or other perceived results? Are there any things we should place less emphasis on?
3. How tech-savvy are our target referrals? (*i.e.*, Are they using social media such as LinkedIn and Facebook?) Are there ways we should be leveraging social media more?

Answers to the Audience Assessment and Marketing Audit will be enlightening for your marketing plan. Refer to your answers as you are completing your **MARKETING PLAN WORKSHEET**.

Planning is the key to any successful program and this section will walk you through using survey feedback and assessments to determine your practice marketing focus.

## Your Marketing Plan

### Plan Enactment: Staff and Specialists

A practice's principal, chiefly the endodontist(s), is integral to guiding your practice marketing strategy, reviewing core messages and approving subsequent tactics to ensure they reflect your practice's goals and approaches. Consider beginning your efforts with an assessment as outlined in the **PRACTICE ASSESSMENT SURVEY** section.

Survey feedback will help you define where your practice should focus marketing efforts. The **AUDIENCE ASSESSMENT** and **MARKETING AUDIT** worksheets referenced in the **MARKETING ASSESSMENT** section also will provide critical context to set you up to write your marketing plan using the **MARKETING PLAN WORKSHEET**.

The endodontist provides oversight of the practice marketing but should consider assign office staff or hiring a marketing specialist to take the lead on outreach.

Once you have an idea of where you will focus marketing efforts, you can determine how much staff time is needed to enact the plan and develop the tactics. Ideally the endodontist provides strategic oversight of marketing tactics but primarily defers to one or more staff to coordinate all efforts. Many endodontists assign an office manager and/or another staff member to be responsible for devoting a portion of his or her time to developing the practice's marketing, designating someone as the "professional relations coordinator." How much time this person (or people) dedicates to marketing will be dictated by the extent of your marketing plan.

At times, your internal staff may not have the skillset to carry out some of the professional relations tactics. For example, you may not have someone who has a strong understanding of website development. In these cases, hiring an outside specialist, such as a website developer (the AAE endorses PBHS as one option), may be a sensible alternative. If you choose to hire an outside specialist, resources include the local chapters of the Public Relations Society of America or the American Marketing Association, who can provide names of cost-effective freelance writers and graphic designers. You also might consider hiring a student from the journalism or communications department of a local college or asking the placement office for names of new graduates who may charge less than more established writers. Check with art schools for graphic and web designers. These options will help you keep costs down.

### **Timeline**

Your timeline of activities will be dictated by how aggressive you choose to be with your marketing efforts. The amount of time necessary to carry out each tactic will vary by practice. To get a better understanding of the time needed, the **MARKETING PLAN WORKSHEET** will be your tool to determine a tactic, identify all the components associated with that effort, assess the time the tactic requires, and then build that time into a marketing plan timeline.

Your marketing plan will be an evolving document, but it is important to commit yourself to what you consider to be critical activities then plot those on a year-long calendar to ensure you stay on track. For instance, you might commit to doing an annual practice assessment and marketing plan. Determine when those will happen each year, such as in the fall before you're about to start a new year. You might commit to doing some form of presentation or practice seminar once a quarter. Plot those out for the months you expect them to happen, and work back from there to develop milestones needed to make them happen.

### **Budgeting**

Once the plan is in place, you're ready to determine a budget for each activity. As referenced above, use the sample **MARKETING PLAN WORKSHEET** to aid you in estimating a budget for your marketing plan. These guidelines will help you create a "roadmap" to reach your marketing objectives. Marketing experts recommend investing anywhere from 5 percent to 20 percent of your revenue and time resources into marketing. For purposes of the endodontic profession, we recommend 5 percent as a starting point, where you can then evaluate against that benchmark spend for effectiveness and need in your market. (For instance, you might be in a highly competitive marketplace that requires a greater spend.) Two things are true regardless of your situation: Your marketing needs to be ongoing to be effective and more of the "right" marketing as determined by your audits, at least up to the 20 percent spend, will yield more results.

**“The guide provided a systematic approach to preparing and executing a well-conceived plan to market my practice. I am pleased with practice growth achieved during the first year of executing our marketing plan.”**

*- Stanton D. Widmer, D.D.S., Private Practice Endodontist, Caldwell, Idaho*

## Key Messages Background

Key messages serve as a critical, core foundation of any communications effort. They are a constant resource and guide for both the spoken and written word in every form communications may take – from letters and newsletters to speeches and seminars. Before you develop a particular communications, review these messages to help inspire and guide your content. Then, after you've completed a draft, ask yourself: Are key themes from the messages evident here?

The key messages that follow are the AAE's over-arching points, developed after close consideration of the 2009 and 2012 **GP REFERRALS STUDIES**, which provide key insights into the way general practitioners view their relationship with endodontists and what is paramount in that partnership. In fact, partnership emerged as a consistent point of emphasis in the research and has become the AAE's central marketing theme – **Endodontists: Partners in Patient Care.**

Consistent with the theme, a core message emerged: **Endodontists and dentists are partners in delivering optimal dental patient care.** While this core message was developed with a strong focus toward general dentists, it also is meant to resonate across other key audiences of dental educators and dental students as well as consumers. The proof for the core message comes in the form of supporting messages that fall into three categories of **1) expertise, 2) patient satisfaction** and **3) partnership.** The language and key facts you'll see in the supporting messages were carefully considered based on research and review by the AAE for the broader profession. You should think about how to put this kind of messaging and support points into your own personal context to talk about and differentiate your practice using:

- Facts
- Examples
- Anecdotes
- Analogies
- Third-party endorsement
- Personal experiences
- Statistics/research

The **MESSAGING** worksheet found in the Resources section will help you do that. For example, when talking to a general dentist and delivering the supporting point – **Endodontists understand the treatment manager role of dentists** – you can relate a personal example of how you currently do that with other colleagues as part of your practice.

“The guide has aided me in developing messaging points to express my practice strengths and treatment philosophy. This in turn is allowing me to develop a marketing plan. Now I am doing something more concrete to counteract the economic downturn many of us have seen.”

- Bob Brandys, D.D.S., M.S.D., Private Practice Endodontist, Glen Ellyn, Ill.

These are examples of key messages in the core areas of expertise, patient satisfaction and partnership that other endodontists developed using AAE resources:

- **Expertise:** Given no two cases are exactly alike, our combined experience allows us to successfully treat more challenging cases.
- **Patient satisfaction:** Patients give 99 percent positive feedback based on their experience with our practice.
- **Partnership:** Referring dentists can be confident we view our office as an extension of theirs.

Know also that the focus on **three** main and supporting messages is purposeful. Dating back to the days of Aristotle and buoyed by research in recent years, people remember things in threes. So whether you're speaking at the ADA or talking one-on-one with a dentist who is a potential referrer, consider: What are the three things I want these people or this person to take away from this conversation?

The next few pages include the AAE's messaging developed for the Awareness Campaign to general dentists. You'll see main messaging and supporting points made up of facts, examples, anecdotes, etc.

## Key Messages Examples

**Endodontists and dentists are partners in delivering optimal dental patient care.**

## Supporting Messages

### 1. **EXPERTISE: Endodontists are highly skilled specialists in diagnosing and treating tooth pain and performing root canal treatment.**

**Background:** Endodontists are experts in performing root canal treatment and other complex endodontic procedures. They:

- Deliver the best outcomes with the highest rates of tooth survival.
  - Are focused on saving natural teeth as a priority.
- Perform root canal treatment almost exclusively (95 percent of their practice).
  - Perform about 25 root canal treatments a week vs. fewer than two for dentists.
  - Full-time endodontists work 35.6 hours per week treating patients, which does not include administration, marketing, finance, CE, professional society meetings and other aspects of doing business and professional development. [*American Dental Association Survey of Dental Services Rendered, 2005-6*]
- Indicative of how endodontists do more root canal treatments, the average annual number of procedures completed per private practitioner [*American Dental Association Survey of Dental Services Rendered, 2005-6*]:
  - Anterior endodontic therapy: 21.56 GPs vs. 121.63 endodontists
  - Bicuspid endodontic therapy: 22.86 GPs vs. 219.12 endodontists
  - Molar endodontic therapy: 39.21 GPs vs. 691.23 endodontists
- Are experts who diagnose, treat and relieve oral and facial pain.
  - Are pain management experts (*e.g.*, specialized training in administering anesthesia).
  - Are trained in and use leading technology (*e.g.*, operating microscopes, rotary instrumentation, surgical binoculars, digital radiography and cone beam-computed tomography (CBCT) advanced x-raying).
  - Use microsurgical techniques to improve patient comfort and save natural teeth.
- Complete two to three years of advanced training beyond dental school.
- Only 35 percent of dentists say they do many of the same procedures as endodontists – and just as well – for less cost. [*AAE GP Referrals Study, December 2012*]



**Assessment:** Endodontists are a primary resource for dentists making treatment decisions.

- Endodontists are available on a consultative basis or when dentists simply need a second opinion.
- AAE's Endodontic Case Difficulty Assessment Form helps a dentist determine when to refer patients to endodontists. Based on clinical analysis, it assigns a level of difficulty to each individual case:
  - **Minimal difficulty:** routine complexity with predictable outcome
  - **Moderate difficulty:** preoperative condition is complicated; predictable outcome is challenging
  - **High difficulty:** preoperative condition is exceptionally complicated; predictable outcome is challenging for even the most experienced practitioner
- *AAE's Treatment Options for the Compromised Tooth Decision Guide* helps a dentist determine treatment options for a compromised tooth, including identifying circumstances when implants may be an acceptable choice.

**Referrals:** Dentists regularly rely on endodontists as their partners in patient care.

- 68 percent of general dentists refer more than 10 percent of their patients who need root canal treatment to an endodontist. [*AAE GP Referrals Study, December 2012*]
  - Dentists, on average, refer nearly half of their patients [43 percent] who need root canal treatment to endodontists each year. [*GP Referrals Study, December 2012, regarding percent of patients dentists refer on*]
  - 20 percent of dentists refer 90 percent or more of their root canal treatments. [*AAE GP Referrals Study, December 2012*]
  - 37 percent of dentists say dentists frequently decide to perform root canal treatment, but perhaps should have referred the case to an endodontist. [*GP Referrals Study, December 2012*]

## 2. PATIENT SATISFACTION: Patients benefit from the dentist/endodontist partnership.

**Patient state of mind:** Dental work in general causes fear, let alone root canal treatment, which causes even more anxiety.

- 80 percent of American adults fear the dentist. [*2008 Omnibus Survey*]
- Pain is the top reason adults avoid the dentist, and root canal treatment is the most feared dental procedure. [*2008, 2011 Omnibus Surveys*]
- 7 in 10 Americans (70 percent) say they would want to avoid getting a root canal with even more who want to avoid losing a permanent tooth (74 percent) – both more than they would want to avoid paying taxes (51 percent) or speaking in public (34 percent). [*AAE Omnibus Survey, January 2013*]

**Outcomes:** A dentist partnering with an endodontist can put patients more at ease.

- 89 percent of patients are satisfied after a root canal treatment by an endodontist. [*National Consumer Awareness Survey, May 2007*]
- Of those consumers who have an opinion, 88 percent prefer their dentist partner with a specialist. [*AAE Omnibus Survey, January 2013*]

- Americans prefer medical specialists, like a cardiologist or endodontist, for a variety of reasons, including specialization (92 percent), have more training (91 percent) and experience doing procedures more often and regularly (89 percent). [*AAE Omnibus Survey, January 2013*]
- 78 percent of dentists say the personal characteristics of the patient (e.g., anxious, uncooperative) are important to very important when deciding to refer a patient to an endodontist. [*AAE GP Referrals Study December 2012*]
- 96 percent of dental educators who have been treated by an endodontist have had a positive or very positive experience. [*Survey of Dental Educators and Students, December 2008*]
- A comparison of endodontic treatments performed by general dentists or by endodontists showed that endodontic treatment was significantly more successful when performed by a specialist based on a comparison of survival of teeth following endodontic treatment. [*Oral Surg Oral Med Oral Pathol Oral Radiol Endod.* 2004. Jul;98(1):115-8; Alabama study]

**Cost:** Involving an endodontist in root canal treatment can save patients time and money.

- Endodontists have the expertise to do everything from the most common to most complex root canal treatment, diminishing the need for retreatment.
- While some complex treatments certainly require more than one visit, most root canal treatment can be completed by endodontists in a single appointment.
- Root canal treatment performed by endodontists provides patients with a solid foundation for crowns and other restorative work, reducing the likelihood of future complications and costs.
- By saving the natural teeth through root canal treatment, endodontists save patients the expense associated with losing teeth, which causes multiple problems over the long term and costs much more. (e.g., shifting teeth, follow-up visits to place and maintain prosthetics, etc.)

### 3. PARTNERSHIP: Dentists and endodontists enjoy strong working relationships.

**Relationship:** Endodontists understand the treatment manager role of dentists...and are respectful of requests to: (percentages from 2012 *GP Referrals Study* where dentists said best partners do “X”)

- Refer patient back for restorative treatment [95 percent]
- Provide timely reports and film. [94 percent]
- Show calm, caring “chairside” manner. [93 percent]
- Accommodate patients in scheduling. [91 percent]
- Be available for second opinions. [90 percent]
- Collaborate on treatment plan for referred patients. [89 percent]
  - Share dentist’s treatment philosophy.
  - Support treatment plan put in place by dentist.
  - Confer with dentist before suggesting alternatives to patient.

**Collaboration works:** Dentists broadly appreciate their working relationships with endodontists.

- 94 percent of dentists have a positive or very positive perception of endodontists and the care they provide. [GP Referrals Study, December 2012]
- Dentists commonly refer to endodontists as an essential part of the dental health team, playing a critical role in the delivery of quality dental care.
  - Establishing a relationship with an endodontist means having a specialist who can serve as a consultant and a resource for a dental practice.
  - The dentist/endodontist partnership allows many dentists to focus on the core part of their practice they enjoy most.

**Good business:** Referring root canal treatment to an endodontist benefits the dentist's patients and practice.

- Patients are more likely to be satisfied with a root canal performed by an endodontist.
  - 89 percent of patients are satisfied after a root canal by an endodontist. [*National Consumer Awareness Survey*, May 2007; see also "patient satisfaction"]
  - Patients who have a root canal treatment performed by endodontists are more satisfied than those who have the procedure performed by general dentists. [*National Consumer Awareness Survey*, 2008; see also "patient satisfaction"]
- Patient satisfaction provides a distinct cost benefit to dentists who refer root canal treatment.
  - Patients appreciate knowing a dentist has partners who specialize in more complex procedures (e.g., endodontics, orthodontics, oral surgery).
  - Happy patients are more loyal to their dentist, which results in stronger referrals and a steadier stream of repeat visits. (Research consistently proves this intuitive truth about consumers and the services they continue to choose and refer.)
  - The ability to attract and retain loyal patients depends on the successful implementation of a patient-centric strategy. [*Health Mark Q.* 2006;23(3):59-77]
  - Although other industries have recognized that increased customer loyalty brings increased revenues and profitability, few medical practices have sought even to measure patient retention or loyalty. When patients leave a practice, new patients must be attracted to replace lost ones at significant cost, often invisible to and underestimated by physicians. [*J Med Pract Manage.* 2001 Jul-Aug;17(1):11-4.]
- The cost can be greater for a dentist to do a root canal than refer.
  - 88 percent of dentists say work performed by endodontists is worth the cost. [GP Referrals Study, December 2012]
  - The time it takes a dentist to treat/re-treat and have dental assistants support root canal treatment can significantly diminish the value of doing those procedures.
  - Complications due to endodontic procedures are the second most common source of malpractice complaint against dentists. [Case studies: *www.Experts.com*, Crystal Baxter DMD,MDS, 2007 (Extractions #1); *Journal of the American Dental Association*, October 2006/by James Hurley, Tillinghast/Towers Perrin (Prosthodontics #1)]
  - Patients who comment about an intention to sue or an accusation that they experienced malpractice rated overall assessment of practices at 50 percent versus 82 percent for patients who simply made negative comments or 96 percent for patients who made positive comments. [Press Ganey, Examining the Link Between Medical Practice Patient Satisfaction and Malpractice Risk, January to December 2007]

## Questions & Answers Background

While key messages are the positive, proactive statements you want to make when speaking about endodontists and the profession, the questions you prepare to answer are the reactive responses you want to deliver to both common and tough inquiries, regardless of the setting.

Recommended responses to some key questions included here are meant to bridge across all audiences – whether you are talking to a patient, a dentist or the media. It is important to note that you might not agree with the very premise of the question or the vantage point the speaker takes. Rather than being concerned with the question in and of itself, instead consider this as an opportunity. The question may be coming from a point of ignorance rather than personal bias, but regardless, you have the chance to clarify the key facts.

As you consider your responses to questions posed, remember this formula:

$$Q = A + 1$$

In other words, responding to the question (Q) means providing the answer (A) plus providing at least one (1) additional point of context that also is relevant and bridges to some aspect of your key messages. In the Q&A, sample responses are provided that capture key themes to consider in your response by deriving content from the key messages whenever possible. So while you may not articulate the answer to the same question in exactly the same way when it's posed to you, these sample questions and answers give you a sense of how you may begin to address key issues conversationally. See also the **QUESTION & ANSWER** worksheet to customize responses for your practice.

While the questions are posed in third person – as if coming from educators or patients – you can simply insert “I” to reconsider the question from the vantage point of a general dentist. Key components of the answers remain consistently relevant, regardless of who is asking the question.

## Questions & Answers Examples

### Expertise Q&A

**1. Q: Many general dentists end up getting similar root canal training as endodontists through continuing education. Shouldn't those dentists be able to perform most root canal treatments?**

A: Even before post-graduate CEs, endodontists perform root canal treatment with the benefit of two to three years of advanced training beyond dental school. They also perform root canal treatment almost exclusively, 25 cases per week on average compared with just two for a general dentist. Both education and experience establish endodontists as experts in performing root canal treatment and other complex endodontic procedures. Certainly dentists are in a position to perform some root canal treatment, and that becomes a question of assessing when to do the procedure and when to refer.

There are several tools available to help with that decision-making. The AAE's *Case Difficulty Assessment Form* helps a dentist determine when to refer patients to endodontists based on clinical analysis and assigns a level of difficulty to each individual case. The AAE's *Treatment Options for the Compromised Tooth Decision Guide* also helps a dentist determine treatment options for a compromised tooth, including identifying circumstances when implants may be an acceptable choice.

**2. Q: How do you know when a general dentist can do a root canal versus when it needs to be done by an endodontist?**

A: There are several tools available to help you determine when to treat versus refer. The AAE's *Case Difficulty Assessment Form* helps a dentist determine when to refer patients to endodontists based on clinical analysis and assigns a level of difficulty to each individual case. The AAE's *Treatment Options for the Compromised Tooth Decision Guide* also helps a dentist determine treatment options for a compromised tooth, including identifying circumstances when implants may be an acceptable choice.

**3. Q: How common is it for dentists to refer to endodontists?**

A: Dentists regularly rely on endodontists as their partners in patient care. In a typical year, 68 percent of general dentists refer more than 10 percent of their patients who need a root canal to an endodontist. 20 percent of dentists refer 90 percent or more of their root canal patients.

**4. Q: Are you aware of dentists who knowingly perform root canal treatment they believe should have been referred to an endodontist?**

A: A recent study of general dentists found 37 percent say dentists frequently performed root canal treatment that should have been referred to an endodontist. What's most important is helping dentists make those calls based on thoughtful, clinical consideration that is in the best interests of the patient.

There are several tools available to help you determine when to treat versus refer. The AAE's *Case Difficulty Assessment Form* helps a dentist determine when to refer patients to endodontists based on clinical analysis and assigns a level of difficulty to each individual case. The AAE's *Treatment Options for the Compromised Tooth Decision Guide* also helps a dentist determine treatment options for a compromised tooth, including identifying circumstances when implants may be an acceptable choice.

## Patient satisfaction Q&A

**1. Q: How can an endodontist help general dentists with patients who are reluctant to have a root canal?**

A: Dental work in general causes fear, let alone root canal treatment, which causes even more anxiety. In fact, pain is the top reason adults avoid the dentist, and root canal treatment is the most feared dental procedure. A dentist partnering with an endodontist can put patients more at ease. In those cases where the dentist refers a patient to an endodontist, studies have shown about 90 percent of those patients end up being satisfied even after having a dental procedure so feared by so many. And because of the partnership, the patient can count on the endodontist to share details about the procedure and refer the patient back to the dentist for follow-up treatment.

**2. Q: Do endodontists have a higher success rate when it comes to performing root canal treatment?**

A: Consumer research shows a very high satisfaction rate among patients and even dental educators who have had a root canal performed by an endodontist. Also, from a clinical perspective, research has found that when comparing endodontic treatments performed by general dentists or by endodontists, the endodontic treatment was significantly more successful when performed by a specialist based on a comparison of survival of teeth following endodontic treatment.

**3. Q: Isn't it more cost-effective for a patient to simply let the general dentist perform root canal treatment?**

A: Actually, just the opposite may be true. Involving an endodontist in root canal treatment can save patients time and money. Endodontists have the expertise to do everything from the most common to most complex root canal treatment, diminishing the need for retreatment. And while some complex treatments certainly require more than one visit, most root canal treatment can be completed by endodontists in a single appointment. It's also worth noting that root canal treatment performed by endodontists provides patients with a solid foundation for crowns and other restorative work, reducing the likelihood of future complications and costs.

**4. Q: What if patients simply find it more comfortable and convenient to have the dentist they know at the location they always go perform a root canal?**

A: The ultimate comfort for a patient is knowing they are getting the best possible care for their particular dental situation. Their dentist has the opportunity to make a choice about whether to refer based on a unique assessment of that person's particular case. Additionally, nothing could be more convenient to a patient than involving an endodontist in root canal treatment when it can save patients time and money. Endodontists have the expertise to do everything from the most common to most complex root canal treatment, diminishing the need for retreatment. And while some complex treatments certainly require more than one visit, most root canal treatment can be completed by endodontists in a single appointment.

## Partnership Q&A

**1. Q: Isn't there a financial incentive for general dentists and endodontists to compete for root canal treatments?**

A: Providing the best care to patients is the greatest incentive for all dental professionals – personally, financially and as a duty to provide optimal care to patients. Patients appreciate knowing a dentist has partners who specialize in more complex procedures such as endodontics, orthodontics and oral surgery. And happy patients are more loyal to their dentist, which results in stronger referrals and a steadier stream of repeat visits. So in that sense, yes, there is a financial incentive, but it is for dentists and endodontists to partner together.

**2. Q: As a dentist, my concern is that an endodontist – like other dental specialists – may not appreciate that I refer a patient for a procedure, but that person's total dental care is in my hands.**

A: Dentists and endodontists enjoy an unusually strong, positive relationship. In fact, in a recent study, 94 percent of dentists said they have a positive or very positive perception of endodontists and the care they provide. That largely could be credited to the fact that endodontists understand the treatment manager role of dentists and are respectful of requests to do everything from providing timely reports and radiographs to referring patients back for restorative treatment.

**3. Q: How have you seen the dentist/endodontist partnership work?**

A: Dentists and endodontists enjoy an unusually strong, positive relationship. In fact, in a recent study, 94 percent of dentists said they have a positive or very positive perception of endodontists and the care they provide. In my own practice, that partnership is alive and well in everything from how I am respectful of a dentist's requests to provide timely reports and radiographs to how I refer patients back for restorative treatment.

**4. Q: Would you say dentists who choose to do the majority of their own root canal treatments could end up actually losing money? Essentially, is there a financial disincentive?**

A: You can't generalize about all dentists, but we do know some key facts. In a study of general dentists, 88 percent said work performed by endodontists is worth the cost. We also know that the time it takes a dentist to treat/retreat and have dental assistants support root canal treatment can significantly diminish the value of performing those procedures. Added to that is the fact that complications due to endodontic procedures are the second most common source of malpractice complaint against dentists. Plus, dentists may be in a position to increase scheduling of other types of procedures they do even more efficiently by referring more root canal treatments, thereby improving their bottom line.

## Understanding Your Target

The AAE 2009 and 2012 **GP REFERRALS STUDIES** provide key insights into the mindset of general dentists and key factors that are likely to contribute to referrals. Principal among the study's findings is that all dentists would be more likely to refer to an endodontist when they perceive that endodontists are partners in delivering quality care and that the work of an endodontist is worth the cost.

When considering niche groups within the greater dental professional audience, the study found female dentists and dentists with six to 10 years in practice represent the highest areas of growth potential. These two demographics are most likely to refer more than 10 percent but less than 90 percent of root canal treatments to an endodontist.

**Female dentists and dentists with six to 10 years in practice represent the highest areas of growth potential.**

For female dentists, the key drivers that will lead to a referral to an endodontist in the future include when they perceive the endodontist:

- has the **skills/expertise** needed to perform the treatment
- performs work that is **worth the cost**
- is a **partner** in delivering quality dental care
- conducts endodontic treatment that will provide an **equal/preferable outcome** vs. extraction and dental implant

For dentists practicing 6-10 years, the key drivers that will lead to a referral to an endodontist in the future include when they perceive the:

- Patient's **clinical conditions** require it
- Endodontist is a **partner** in delivering quality dental care
- Work an endodontist performs is **worth the cost**





Following are additional insights gleaned from the GP Referrals Study by demographic areas:

	Gender	Years in Practice
<b>Referral Likelihood</b>	Female dentists refer a higher percentage of patients to endodontists compared to male dentists.	Dentist with more than 10 years' experience refer a higher percentage of patients to endodontists than others.
<b>Referral Factors</b>	<p>Female dentists rate the financial cost for the patient; certain personal characteristics of the patient (e.g., anxious, uncooperative); and complications due to pain and/or swelling as more important than male dentists when deciding to refer a patient to an endodontist.</p> <p>Female dentists are more likely to agree that how much available time the general dentist has to complete the procedure is a key factor in referral.</p> <p>Female dentists are more likely than male dentists to find the following to be important of the endodontist: having previous patients who are satisfied with their work; having a calming, caring manner with previous patients; having an office at a location convenient to the patient; sharing your treatment philosophy/plan; having the most up-to-date equipment and technology to perform procedures; and being recognized by other dentists for expertise.</p>	<p>Dentists with 6-10 years experience are more likely to factor in how much available time they have to complete the procedure when considering referral. Both dentists 6-10 years and those with more experience are equally likely to perform very complicated root canal treatments.</p> <p>Dentists who have been in practice longer (more than 10 years) are more likely to refer when there are complications due to pain or swelling, and when they see certain personal characteristics in patients such as anxiousness.</p>
<b>Treatment Decisions</b>	<p>Male dentists are more likely to say they perform moderately complicated and very complicated endodontic procedures compared to female dentists.</p> <p>Male dentists are more likely than female dentists to agree they do many of the same procedures as endodontists just as well for less cost. Conversely, female dentists are more likely to agree that the work endodontists do is worth the cost.</p>	Dentists who have been in practice 6-10 years rate the following endodontic factors more important than more established dentists when deciding to refer a patient: financial cost for the patient and the patient's preference on who they want to do the treatment.



	Gender	Years in Practice
<b>Communication &amp; Marketing</b>	<p>Female dentists are more likely than male dentists to say the following are effective tools and actions by endodontists: Invites you to professional learning events like seminars, study clubs and dental society meetings; shows signs of appreciation to you and your staff, such as holiday gifts, fruit baskets and outings; and provides tools/forms that you can use in practice (e.g., an assessment form dentists in general practice can use to help with the referral decision; patient education information).</p> <p>Female dentists are more interested than male dentists in topics on dental practice management; pain management and medication; and diagnosis and treatment planning.</p> <p>Male dentists are more interested in topics on innovative endodontic techniques and instrumentation than female dentists.</p>	<p>Dentists who have been in practice 6-10 years are more likely than those practicing more than 10 years to say the following are important with endodontists: invites you to professional learning events like seminars, study clubs and dental society meetings; shows signs of appreciation to you and your staff, such as holiday gifts, fruit baskets and outings; asks your feedback on his or her services; provides tools/forms that you can use in practice (e.g., an assessment form dentists in general practice can use to help with the referral decision; patient education information); sends you periodic updates on new treatment alternatives and/or images of successful cases; and sends letters and information.</p>
	Area of Country	Rural vs. Suburban vs. Urban
<b>Referral Likelihood</b>	<p>There are no statistically significant differences in dentist referral patterns based on different regions of the country.</p>	<p>There are no statistically significant differences in dentist referral patterns based on the location of the dental practice.</p>
<b>Referral Factors</b>	<p>In the Northeast (CT, MA, ME, NH, NJ, NY, PA, RI, VT) and West (AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, WY), the following is a more important referral factor: Certain personal characteristics of the patient (e.g., anxious, uncooperative). In the West, complications due to pain and/or swelling is more important in referral than in other regions. In the Northeast, having an office at a location convenient to the patient is more important.</p>	<p>Dentists in rural areas and small cities rate the following factor as more important than those in larger cities: The financial cost for the patient.</p> <ul style="list-style-type: none"> <li>• Dentists in larger cities rate the following more important in considering referral than those in rural areas: Certain personal characteristics of the patient (e.g., anxious, uncooperative).</li> <li>• Rural dentists rate the following important: The patient’s preference on who they want to do the treatment – either the dentist in general practice or the endodontist.</li> </ul>



	Area of Country	Rural vs. Suburban vs. Urban
<b>Treatment Decisions, Cost</b>	There are no statistically significant differences by regions in how dentists feel as to whether the work an endodontist performs is worth the cost.	There are no statistically significant differences by types of towns in how dentist feel as to whether the work an endodontist performs is worth the cost.
<b>Communication &amp; Marketing</b>	<p>Dentists in the South (AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV) rate the following as more important of the endodontist than in other regions: Invites you to professional learning events like seminars, study clubs and dental society meetings.</p> <p>Dentists in North Central (IA, IN, IL, KS, MI, MN, MO, ND, NE, OH, SD, WI) and the South (AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV) are more interested in phone calls from endodontists than in other regions and articles by endodontists on the latest procedures in dental journals, newsletters or websites.</p>	Dentists in small cities are less interested in being invited to professional learning events like seminars, study clubs and dental society meetings and the endodontist showing signs of appreciation to their staff, such as holiday gifts, fruit baskets and outings; but more interested in letters and information sent from the endodontists by U.S. mail and opportunities to observe an endodontist's work in practice.

In this section, we'll talk about the materials you can develop to support your practice marketing efforts. In many cases, customizable templates are available to help you create your materials.

## Business Profile & Referral Materials

An introductory kit containing pertinent information about you and your practice is an excellent tool to market your practice to referring dentists. The kit also should contain materials to help the dentist address patient questions and concerns when referring a patient to you. By providing such materials to the dentist, you reinforce your partnership with him or her and demonstrate your commitment to patient satisfaction. When considering the components of your business profile and referral materials the following is a scaled prioritization of those items based on your resources, time, budget and market dynamics:

### Priority Items:

- **PRACTICE BROCHURE**
- **PATIENT REFERRAL SLIPS**
- Personalized **INTRODUCTORY LETTERS**

### Secondary Items:

- Sample **AAE PATIENT EDUCATION MATERIALS** you provide to patients
- **PATIENT'S GUIDE TO INSURANCE COVERAGE**
- Patient testimonials (Receive consent with a **TESTIMONIAL RELEASE FORM**)

### Optional Items:

- **PATIENT TREATMENT PHILOSOPHY**
- **PARTNERSHIP PLEDGE**
- Endodontist bio(s)
- Promotional items such as a rolodex card or magnet that has been preprinted with your practice contact information

You can create your kit by incorporating items from the above list and including additional materials as applicable. As you develop various components of your kit, remember the key points you want to embed throughout your materials wherever possible (see also full **KEY MESSAGES**) including:

- **Expertise**, such as your education and how you use technology, and the latest procedures and techniques
- **Partnership**, such as how you refer patients back and respect the dentist's treatment manager role
- **Patient satisfaction**, such as how you put patients at ease and save patients time and money



Giving each dentist in your community select components in an updated introduction kit every year will ensure they have the most updated material on your practice. Consider going digital instead of handing potential referring dentists a folder stuffed with your practice information, where appropriate (*i.e.*, with younger dentists). Simplify your delivery by using a flash drive loaded with free resources and customized with your practice logo as detailed in the **PRACTICE PROMOTION ARCHIVE**.

## Introductory Letters

Sending a personalized letter to target general dentists is an effective way to introduce your practice and begin developing a working relationship. Letters should vary a bit depending on whether the recipient is a new/recent graduate or is new to the area, versus an established general dentist. In your letters to a recent graduate or newly established dentist in your area, you have the opportunity to explain how you partner with dentists and to describe the expertise you have that will benefit patients. A letter to an established dentist may be someone you've known or worked with for some time. This letter should reinforce what the dentist already knows your practice does well in addition to providing new information.

See **INTRODUCTORY LETTER FOR NEW DENTISTS** and **INTRODUCTORY LETTER FOR ESTABLISHED DENTISTS**.

## Patient Treatment Philosophy

As revealed in the AAE's 2009 and 2012 **GP REFERRALS STUDIES**, how endodontists treat patients is a critical aspect in dentists choosing to refer a patient for endodontic treatment. When you're introducing yourself to a new dentist or reacquainting yourself with someone with whom you previously worked, you have an opportunity to distinguish yourself as a patient-centric endodontist.

“Establish a two-way communication between the two offices that facilitates better treatment for the patients. I have worked well with several endodontists over the years and those relationships work much better when both parties cooperate to deliver the best care for the patient.”

– *General Dentist, 2012 GP Referrals Study*

One way to accentuate your patient focus is to share a piece that speaks to your patient care approach and features patients who can speak first-hand to the kind of care you provide. (See **TESTIMONIAL RELEASE FORM**.) Following is sample copy that is emblematic of the kind of language you could use and comments you might glean from patients for a fact sheet about your practice.

**SAMPLE: Patient Treatment Philosophy**

Few things speak more to partnership between a dentist and an endodontist than the shared interest in providing the best possible care for a patient. At [practice name], we pride ourselves in taking care of patients in a way that deepens their appreciation for their dentist who referred them.

**Partner with Dentist**

Respecting your treatment manager role is critical to our partnership and the faith patients place in both of us. You can count on [practice] to let patients know how we work together, and that they will be returning to their dentist for their next-phase treatment.

“From the moment I walked in the door, it was pretty clear [endodontist] works closely with my dentist. It was apparent what [endodontist] would be doing and what I’d be going back to my dentist for.” – *Jack Smith*

**Knowing the Patient**

Familiarity with your patient’s case is critical not only to his or her care but the degree of confidence that patient will feel when they walk into our office. [Practice] will carefully review your clinical assessment well before the patient is sitting down in our chair.

“The hand-off from my dentist to [endodontist] was seamless. When I sat down with [endodontist], it was like I was picking up from where I left off in my conversation with my dentist.” – *Jeannette Smith*

**Care & Compassion**

When you put your patient’s treatment in our hands, we take our caregiver role very seriously. We become an extension of the kind of care and frontline bedside manner you give patients at your office.

“I was terrified by the idea of having a root canal. But [endodontist] reassured me that most patients are comfortable during the procedure. And he was right!” – *John Smith*

**Communicates Cost**

Financial policies and insurance coverage are one of the most daunting aspects of health care for many consumers. At [practice] we do everything we can to simplify the process and communicate everything carefully and thoughtfully up front so patients aren’t left guessing.

“Navigating the insurance maze was made a lot easier with [practice]. Their Patients Guide to Insurance made it easy for me to understand, and their staff was there to answer my questions.” – *Jane Smith*



## Partnership Pledge Overview

One of the central findings of the AAE's 2009 and 2012 **GP REFERRALS STUDIES** was that dentists are more likely to refer to an endodontist if the dentist perceives endodontists to be partners in delivering quality care. What better way to express that than through a pledge to the dentists with whom you work.

Following is language to frame a set of core values you adhere to in your practice and in your relationship with dentists. These sentiments and specific word choices are deliberate and recommended, having been drawn directly from findings in the 2009 and 2012 surveys.

While some of the sentiment in the Partnership Pledge may seem self-obvious, there are a number of ways you can bring the Pledge to life to give it more meaning. For instance:

- Use the Pledge as a tool to show your commitment to a new dentist partner by describing informally in an initial meeting how you live these principles in your partnerships.
- Formalize your commitment to the Pledge principles by having staff sign this as part of their orientation and personal commitment to the practice. Consider signing the copy you provide to your dentist partners.
- Post the Pledge in your office and/or on your website.

### **SAMPLE: Partnership Pledge**

As someone mutually and deeply committed to providing the best possible care for all dental patients, I pledge the following in my partnership with you:

#### **Quality of Care**

*I will focus on delivering high quality patient care in a calm, caring manner.*

*I will familiarize myself with your patient cases in advance.*

*I will constantly look to enhance my skills through personal learning and professional development.*

#### **Patient Service**

*I will treat emergencies and patients in pain in a timely manner.*

*I will do everything I can to accommodate your patients in scheduling.*

*I will provide patient educational tools to explain procedures.*

#### **Partnership**

*I will collaborate on treatment plans for your referred patients.*

*I will confer with you before suggesting alternative treatments to a patient.*

*I will refer patients back to you for restorative treatment.*

#### **Communications**

*I will send reports and film in a timely manner following procedures.*

*I will be available for second opinions.*

*I will explain office policies/procedures to you and your patients.*

## Practice Fact Sheet/Brochure

A practice fact sheet or brochure is a descriptive document designed to introduce new patients to you and your practice. It also creates a forum for you to provide information about your practice policies and can serve as a referral piece — it is a way to increase recognition of your name among referring dentists as well as new and existing patients. Some of the basic information in a practice brochure should include:

- Practice logo
- About endodontic treatment (supplement with AAE patient education brochures)
- General description of services provided
- Testimonial(s) from current dentist partners and previous patients (see **TESTIMONIAL RELEASE FORM**)
- Name of endodontist, his/her background and professional and educational credentials
- Contact information (address, phone, fax, practice website/AAE website, email)
- Directions to office
- How you work with and care for patients (draw from **PATIENT TREATMENT PHILOSOPHY**)
- Office hours
- Brief description of financial policies/insurance (supplement with more comprehensive **PATIENT'S GUIDE TO INSURANCE**)
- Emergency care services
- Special amenities (parking facilities, children's play area, etc.)

This is an important tool in creating a positive beginning to a patient's visit or a dentist's first impression of you. Keep all communication professional and informative. Remember that it is unethical to imply that you can provide a service or level of care that is superior to other endodontic specialists because of equipment or specific training.

A professional appearance creates a lasting impression of your practice. Key considerations in the development and design of your practice fact sheet or brochure include:

- **Write like it's a family member.** The text should be written in layperson's language without being too simplistic. Talk about your practice like you would to a member of your family who has no clinical background.
- **Less is more.** Try to limit your content to no more than the equivalent of a two-sided 8½ x 11 piece of paper or that size folded twice into a "tri-fold" brochure.
- **Draw the reader in.** Whether it's the cover of a brochure or the header on a fact sheet, incorporate a compelling font (style of letter) graphic treatment, your logo and – ideally – a visual (*i.e.*, team picture or action photo of a primary endodontist treating a patient) of your practice to make the piece appealing.
- **Let pictures tell the story.** A few, select photos can bring your piece to life. A practice team picture or shot of you with a patient would work well.
- **Use headings liberally.** Text should be broken up into clearly delineated visual signposts to lead the reader into different sections of the piece.



## Referral Slips

A referral slip is a fundamental tool for most practices to assist the dentist in making it more convenient for him/her to refer patients. The slip also is the first step in satisfying patients. By helping them set up the appointment and locate your office, you are laying the groundwork for a satisfactory visit.

The referral slip can be as simple as a fold-over business card or postcard. Alternatively, some endodontists use more elaborate referral slips that can serve the additional purpose of patient education. One approach is to print the information for a referral slip on a tear-off panel of your practice brochure. Or use a built-in pocket in the brochure to hold a referral slip.

Regardless of how you choose to format it, the slip should be straightforward and contain lines and directions for the dentist to provide the following information:

- Date
- Patient name
- Patient contact information
- Tooth number
- Date and time of appointment
- Previous diagnostic information
- Name and number of referring dentist
- Requested treatment
- Option to schedule a follow-up appointment
- Your return address

In addition, you may consider adding the following options to a referral slip:

- Map to your office
- Duplicate copy paper (NCR) for the referring dentist's chart

See the **REFERRAL SLIP** for more guidance.

## Patient's Guide to Insurance

One of the more confusing aspects of dental care for both practitioner and patient is insurance and payment options. Patients may have questions the endodontist cannot answer because of the wide variation in insurance policies and employers' benefit plans. Negative feelings often arise when patients familiar with how their general dentist handles insurance claims discover that all dental offices are not alike regarding insurance coverage or policies.

A fact sheet about your office insurance procedures can minimize confusion and provide comfort and a sense of control for patients. Key sections may include 1) general information about insurance coverage, 2) specific office policies and 3) commonly asked questions. When preparing this patient guide, try to answer as many of these commonly asked questions as possible:

- Do most dental insurance policies provide the same coverage for root canal treatment whether performed by an endodontist or a general dentist?
- Do most dental insurance policies cover retreatment? Within one year of the original procedure? After one year or more? When treatment was performed by a general dentist? By another endodontist?
- What if I am out of town and need emergency treatment – will my policy cover it?
- What are my options for paying the endodontist and being reimbursed by the insurance company? Will I have to pay the endodontist and wait for the insurance company to pay me back? Will the insurance company pay the endodontist directly?
- What if I develop complications and have to go back to the endodontist several times? Will I be covered?
- What is the best source of information about my own insurance coverage?
- Should I take any insurance forms with me to the endodontist?
- What if my spouse and I both have coverage – do both policies pay?
- What should I do if I have questions about treatment I've received?



Understanding dental benefit plans, dental coding and claims submission is critical to running an efficient endodontic practice. The AAE has a number of online tools to help members achieve this goal through the **DENTAL CLAIMS SUBMISSIONS/COLLECTIONS** section of its members-only website.

**AAE GUIDE TO DENTAL BENEFIT PLANS** is a comprehensive overview of dental insurance for endodontists and practice staff that can also be adapted for patients. This includes an explanation of the different type of dental plans and considerations when deciding whether to participate in a plan. It also includes a sample assignment of benefits and sample financial policy form.

**GUIDE TO CLAIMS SUBMISSION AND PAYMENT** drills down to specific stumbling blocks in claims submissions, including dental plan documentation requirements and tips for working with dental plans.

**DECODING THE CODE** articles provide in-depth insight on coding questions that have been submitted by AAE members.

The AAE also offers a patient education brochure titled *Your Guide to Dental Benefits*, designed to answer commonly asked questions and define insurance terminology.

## Digital Marketing: Website

A practice website is a powerful marketing tool for both consumers and professionals. It may be the initial contact someone has with your practice, so it is important to make a strong first impression. Nearly 80 percent of U.S. households have Internet access, and the typical patient will research your practice online before stepping foot in your office. Your practice website can serve as a comprehensive resource for information about your services and expertise for those patients and referring dentists alike.

Quality websites address the following four priorities:

- **Navigation.** Visitors must be able to find the information they're looking for. When they arrive on your home page, they should see clearly marked links to internal pages that describe the services you offer. Each internal page should provide a quick path back to your home page.
- **Information.** Complete information reflects the full professional services provided by your practice.
- **Accuracy.** Earning the trust of new patients and referrers is critical to growing a practice. The information provided on your website will help to establish this trust and therefore must be error-free and complete.
- **Appearance/Design.** The website should reflect the quality of your practice. A professionally designed website demonstrates the level of quality the patient can expect to find at your practice.



The practice website should, at a minimum, include the following core components:

- **Home Page.** The home page is the welcome page for site visitors. The page should clearly list all basic details, such as your practice's name; contact information including address, phone number and email, and office hours. The home page also should offer a menu of other website pages, including the additional pages suggested below. Links to navigate to those pages should be arranged in an orderly fashion. A graphic element, whether a photo or logo, will enhance the page image.
- **Overview of services and procedures.** Offer clear explanations of the services you offer or consider adding a link to the AAE's pages for patient education. The **AAE PATIENT EDUCATION** web pages provide a thorough overview of the root canal procedure and the value of an endodontic specialist. You can also link to or post the **AAE's PATIENT AND PROFESSIONAL VIDEOS** on your website.
- **Introduction/Meet the Staff.** Through the Internet, potential patients and referring dentists can virtually meet you and your staff. In the introduction section, include a brief description of the practice, a short personal biography highlighting credentials of the practice's endodontist(s) and an overview of staff members. Include photos of the endodontists and staff members for an added touch. Remember to always keep the website and staff list current, should staff changes occur.
- **Contact Us.** Even though you provide your contact information on the home page, it is recommended to have a separate section that also contains this information. Consider adding a map of your location and interactive or written directions to your location in this section as well. Please note, it also is advisable to include contact information on the same location (*e.g.*, on the page footer or side bar) on each website page.

For many patients, the first place they learn about your practice—and endodontics—is through your website.

A successful, well-developed practice website may include the following additional components:

- **FAQs.** Compile a list of frequently asked questions to anticipate and answer for patients, potential patients and other dental professionals. Include basic questions and answers such as how to get to your practice's office and how to schedule an appointment. Consider including an online appointment request form, patient registration form and credit-financing options. Ask your staff to help develop a list of commonly asked questions. Refer to the **AAE PATIENT EDUCATION SECTION** for additional key points to include, such as answers to explain the role of an endodontist and why someone may need to see an endodontic professional.

Within some of the answers you may choose to offer links to AAE website pages where the visitor can read additional details. For example, you may choose to include a link to the AAE's overview of a **TYPICAL OFFICE VISIT**.



- **Interactive Components.** For their convenience, allow website visitors to request more information about your practice or schedule appointments online.
- **Insurance and Financing.** Finances are often a concern to patients, so explain the types of insurance or payment plans you accept. Provide guidance about dental insurance coverage, as outlined in the **PATIENT'S GUIDE TO INSURANCE** section. The AAE provides **DENTAL BENEFITS AND CODING INFORMATION** to help you prepare benefits materials.  
If your office provides financing options, include this information in this section. As an alternative, you may choose to link to the AAE's page of **FREQUENTLY ASKED DENTAL INSURANCE QUESTIONS** and **DENTAL INSURANCE TERMS**.
- **Referring Dentists.** You may choose to have a sub-page on the website wholly dedicated to referring dentists. On this page, include your practice's **PARTNERSHIP PLEDGE** and **PATIENT TREATMENT PHILOSOPHY** to help verbalize your practice's advantages and commitment to the dental partnership. Provide a referral form for your referring colleagues to download directly from your website. The page also may include surveys, practice newsletters and other materials meant for dental professionals.

In addition to referral information, provide clinical information about your practice and an overview of the technologies you use. Offer links to AAE products such as:

- **ENDODONTICS: COLLEAGUES FOR EXCELLENCE NEWSLETTER**
- **CASE DIFFICULTY ASSESSMENT FORM**
- **TREATMENT OPTIONS GUIDE**

“Have websites with before and after treatment x-rays of their cases posted as an indication of performance standards.”

– *General Dentist, 2012 GP Referrals Study*

Consider developing a logon area for referrers which would allow them to check on the status of their patients, view records and radiographs, correspond with the endodontist, leave notes in the patient record, etc.

- **Image Gallery.** To help your patients better understand endodontic treatment consider posting images offered by the AAE in the *Your Guide...* patient education brochure series. The **CLINICAL GRAPHIC IMAGES** can be downloaded for free from the AAE website and posted to your practice website as a complement to the printed patient education brochures you distribute in your office.
- **Patient and Professional Testimonials.** Offer quotes from patients and referring dentists to demonstrate the quality of services provided. Peer reviews can have an enormous influence on referrals. Be sure to obtain approval before using any patient or professional names. See **TESTIOMONIAL RELEASE FORM**.



- **Videos.** Consider uploading a short video to introduce you and your staff to prospective patients and referring dentists. The video can be hosted on YouTube and embedded onto the website page. The AAE has developed patient and dental professional videos, which can be downloaded from the [AAE WEBSITE](#) or embedded from the [AAE YOUTUBE CHANNEL](#).
- **Links to Social Media/Networking.** If your practice has a Facebook or LinkedIn page, include links on your website's homepage. Also, include a web link to the [AAE FACEBOOK PAGE](#) and be sure you link to the AAE page through your own Facebook page.

Although having a practice website affords such benefits as increased visibility and the opportunity to provide educational information regarding endodontics, there are potential pitfalls that will diminish its effectiveness. For example, if your site is incomplete or unappealing, this can have a negative effect on the potential patients and referring dentists. Only embark on developing a website if you are committed to creating a quality, even if very simple, site.

To target people in your community, be sure to include your location in the content of the website. A person searching for an endodontist in your specific area is more likely to come across your site if it includes the appropriate key terms such as the location and the term “root canal.”

Finally, look for free opportunities to promote your website through local business directories. Sites such as [GOOGLE MAPS](#), [YAHOO! LOCAL](#), [SUPERPAGES.COM](#) and [YELLOWPAGES.COM](#) will publish your local dental practice information and dental website URL for free. You also can submit your practice website information to online dental directories such as [MYLOCALDENTIST.COM](#) and [ONLINEDENTALDIRECTORY.ORG](#).

### Website Development

A variety of computer programs and web-based services are available to help novices create a professional-looking website. The AAE endorses the website design services of PBHS, which offers custom and semi-custom website development to participating AAE members. More information is available at [WWW.PBHS.COM/AAE](#).

Whatever method of development you choose, ensure you and your staff have access and knowhow to update the site content when necessary. If you have to hire a web developer service or freelancer to make minor content updates, the website may be a costly endeavor. Assign a staff member to manage the website content, but be sure all passwords and directions for website login are available so the site always can be updated if staff turnover occurs.



### Reviewing Your Website

Whether you've just built a website or have an existing site, take a fresh look at the content and layout. Ask your staff and a few patients or friends of the practice to review the site as well. Look at the site from the patient's and dentist's perspective, and evaluate the ease of navigation and thoroughness of content. During this exercise, evaluate the site for the following points:

- **Navigation.** Is your site easy to maneuver through? Do navigational buttons appear on every page? Can you easily return to the home page from all subpages? Does the site load quickly? Is special software required to open the site (e.g., Flash) that could impede access for some visitors? Is it easy to scan pages quickly, or have you tried to include too much information? Have you offered links to other marketing tools such as a Facebook or LinkedIn page?
- **Information.** Is your phone number and office location easy to find? Is this basic information available on all subpages? Are your practice services clearly listed? Are office hours noticeable? Is there a contact form or email address for more information? Have you offered answers to questions a potential patient may be seeking?
- **Accuracy.** Is the information on the site current and accurate? Is the content consistent with your other marketing materials? Do the pictures on your site reflect the nature of your practice? Have you included recent photos of the interior/exterior of your office? Are photos and bios of staff current?
- **Appearance.** Is the site colorful and easy to read? Is information well-organized by topic on the home page? Does the website leave a solid first impression? Does the site have a professional look that reflects your professional qualifications?

The website should reflect your practice, and offer a positive first impression for potential patients and referring dentists. This communications tool is by no means a simple undertaking, but it is a powerful tool in the growth of an endodontic practice. All of your practice's marketing efforts should direct patients and professionals to your website.

## Digital Marketing: Online Networking

Online networking, also known as social networking, provides a new way to connect with patients and dentists outside of office visits and other meetings. An online presence – whether in a website or on a networking site – will complement other marketing efforts and offer an alternative to traditional communication methods. Some online networking tools, such as Facebook, can help you connect with patients, while other networking sites, such as LinkedIn, allow you to connect with dental professionals. Each tool is an extension of your overall marketing and networking efforts, and the content you develop should be done with the appropriate audience in mind for each site.

### Online Networking: Facebook

Facebook is a strong social networking tool to reach existing and recently referred patients. At its core, Facebook is about connecting people with similar interests – from cancer-survivor support groups to sharing baby photos with grandma across the country. Your practice's Facebook page allows you to communicate with patients where they are – online. Additionally, other dental professionals are increasingly using Facebook to connect with their patients and therefore you also may use Facebook to connect with other professionals.

To begin, include the most basic of information to post, including operating hours, office address and website address. Choose a profile photo, such as a practice logo. Build the page by adding content from your website. If you need guidance on how to open an account or navigate any area of the site, visit the **FACEBOOK HELP CENTER**.

The key to growing a Facebook page is to network and build a fan base. Facebook boasts more than 500 million users and your target patients, as well as dental referrers, likely are already on the site. Connecting with these users can have a very positive impact on the marketing efforts of your practice. However, it's not just about the number of fans you can acquire. It's about connecting with your advocates and encouraging conversation. Share your Facebook page with existing patients and referring dentists. Remember, it takes a while to build a fan base, and it is better to have a few engaged fans than many who don't connect at all.

Use the following tactics to build your network among existing patients and to have a place for upcoming patients to go:

- Include a link to your Facebook page in all electronic communications with patients and dentists.
- Create an easy-to-remember URL that directs visitors to your Facebook page, such as **WWW.FACEBOOK.COM/YOURPRACTICE**.
- Put your Facebook and website URL on business cards and other handouts for patients.
- Link to the Facebook pages of dental practices in your area and to the **AAE FACEBOOK PAGE**.





Another key to a successful Facebook page is consistent updates. Don't add all information at once – slowly update with wall postings and new photos or videos. Include interesting facts about the benefits of root canal treatment, and promote the unique benefits of your office. Your website and AAE's resources (such as patient education tidbits) can serve as a resource for Facebook content. Engage your network by offering to answer questions or offering interactive contests. Post links to interesting articles (relevant to patients) and news about the benefit of saving your natural teeth with endodontic treatment. Be sure to post quality content – don't simply promote your practice.

### **Online Networking: Professionals**

In recent years, online networking among professionals has rapidly grown as a key means of communication. Professional sites, such as LinkedIn, connect professionals (some of whom are current and potential patients) from all industries but will allow you to connect with your dental peers, as well. Online professional-focused tools help like-minded individuals come together for collaboration, connections, sharing and learning about a specific topic.

Professional networking sites seek to distance themselves from social networks like Facebook by taking a more thoughtful approach and giving members more control over their profiles. Through these sites you will largely come in contact with other professionals and, therefore, you need to present details about your practice that would entice a potential referring dentist or a colleague endodontist. One site to consider is **LINKEDIN**. LinkedIn has a mature user type which is interested in business networking. The profile reads almost like a resume so users can quickly grasp the talents of other members. When you join LinkedIn you invite your business contacts to “link” to you. Once your business contacts join, you then have access to their professional contacts and they have access to yours. It's a way to find people your contacts have worked and can serve as a connection and marketing point among dentists who see which endodontists their peers are connected to.

Through the years several professional websites specifically designed for the dental community have come and gone. In the past, other sites sought to link endodontic and dental professionals, but remained small groups with little networking opportunity. If you would like to expand beyond LinkedIn, talk to your peer endodontists and dentists and ask where they are online.

Just as with any marketing tool, online networking is an optional component to a comprehensive marketing plan. Engage in an online presence only if you are committed to maintaining it and remaining participatory. An untended Facebook page or out-of-date website could reflect poorly on your attention to detail and professionalism. Additionally, you must adhere to all HIPAA and privacy guidelines and should not share any unapproved patient information or offer specific medical advice to someone who you have not properly evaluated.

There is great value in “face time” with your referring dentists. In this section, you’ll find tips on how to develop stronger relationships with dentists through direct outreach.

## Dentist Relations Overview

The AAE’s **GP REFERRALS STUDY** provides helpful insights into the dentist mindset and how best to relate to that colleague through communications. While many effective ways to build relationships with general dentists are reactive — referring the patient back for restoration, sending reports in a timely manner and accommodating patients — dentists rated proactive outreach on the endodontist’s part even more effective in the 2012 study than in the original 2009 study. That includes collaboration on the patient’s treatment plan, useful resources provided by the endodontist for the dentist to use in his/her practice and invitations to education events. Dentists are placing a higher value on your personal efforts to engage and educate them. Direct outreach to existing and prospective referrers is an important way to communicate that you respect their role as the patient’s treatment manager and that you provide care indicative of your unique experience and technology.

Through a variety of marketing efforts, you can develop stronger relations with general dentists by making them aware of your practice and the kind of quality care you, as a specialist, can provide to their patients. As you gain their trust, and create strong and lasting relationships, you also increase the potential that those same dentists will promote you by word-of-mouth to other dentists they know. According to the 2012 GP Referrals Study, dentists are placing greater importance on an endodontist’s reputation with other dentists.

In the pages that follow are examples of the assortment of professional relations efforts you can engage in with dentists to improve your communication and relationships (and ultimately, referrals), which include:

- Feedback
- Individual contact
- Getting personal
- Group gatherings
- Networking
- Education/Speaking Opportunities
- Written correspondence

Also be sure to read the **PROFESSIONAL RELATIONS PORTFOLIO** section where you can take a **HOW MUCH TO MARKET ASSESSMENT** and consider combinations of different types of marketing to meet your goals.

## Feedback

Establishing two-way communication with dentists regarding their general preferences and their perspectives specifically about your practice is invaluable. This will help you get off on the right foot with new dentists, re-set as needed with existing dentists and get ahead of disgruntled referrers before they decide to start sending more (or all) of their business elsewhere. The very act of getting feedback also is, in and of itself, a marketing moment. By asking for someone's feedback it shows how much you value their opinion and your relationship, thus deepening or cementing positive perceptions about your practice. In fact, a majority of dentists (67 percent) said in the **GP REFERRALS STUDY** that asking for feedback enhances your partnership with them.

From the outset of your new relationship with a dentist, you have the opportunity to establish his or her preferences for engaging with your practice. A practice protocol questionnaire can be used to identify individual dentist preferences for communication and provides an opportunity for the dentist to ask questions or make requests for you to consider.

“The endodontists that I refer to provide feedback regarding cases in a timely manner and are very responsive to any concerns I may have. Therefore, they will continue to get my referrals.”

– General Dentist, 2012 GP Referrals Study

Examples of topics to cover in a **Practice Protocol** questionnaire with dentists include:

- How much detail should be provided in reports
- How to send reports (*e.g.*, fax, telephone)
- How soon to send a report (*e.g.*, 1-5 days)
- Whether a radiograph or x-ray is preferred to show completed treatment
- Whether to share copy of films showing patient's tooth before and after procedure
- How to provide a summary of a procedure and outcome – by letter or email

You also could complement these questions with generic samples of reports you've used with other dentists.

Once a dentist refers his/her first patient to your office, be sure to follow up within a few weeks. One means of outreach with newly referring dentists is to send a thank you letter along with a **DENTIST FEEDBACK LETTER** and **DENTIST FEEDBACK FORM**. This survey is separate from your more-encompassing annual **PRACTICE ASSESSMENT SURVEY** and is tailored to gauge the timely feedback of these dental professionals as well dentists with whom you have a longer-standing relationships.



Whether you are discussing Practice Protocol at the onset of a relationship, asking for initial perspectives in the Dentist Feedback Form, getting a deeper look at perceptions and preferences through an annual Practice Assessment Survey or otherwise, you have an opportunity to enrich the feedback experience by conducting the survey live or personally following up after the survey for practitioners who provide their name.

Using the Practice Assessment Survey, you can do a verbal version of the written evaluation by asking the dentist his or her perspective of your practice generally in each of the four areas (Quality of Care, Patient Service, Partnership and Responsiveness). Then take time to probe further in one or more of these areas based on what the dentist is saying, challenges you perceive the dentist might have with you and/or by picking a couple topics you consider important to explore. Alternatively, if a dentist already has filled out the survey and identified himself or herself, this discussion can be one where you identify three to five areas where you did not rate as high and ask the dentist to provide more insight in each of those so your practice can provide better service.

While it may not be realistic to do personal interviews and follow-up every time, pending your portfolio of efforts and approach to professional relations, it very much can make sense to choose some strategic places to have direct, interpersonal interaction, such as with a handful of referrers who are new or those who are trending down in their referrals. As valuable as feedback is in the first place, doing it as part of a live conversation even further enriches the experience and your relationship because it creates an enhanced bond and allows for real-time probing and listening that provides deeper understanding.

## Individual Contact

There's no question that one-on-one contact can be the most powerful form of marketing, but you obviously have finite resources to be dedicated to doing this. In your marketing plan, as you prioritize targets, you also will prioritize how much of the following types of individual contact you dedicate to which dentists.

*“The communication must be outstanding today—email, texting, mail, phone calls, personal visits... The best communication is face-to-face, but at least a phone call or email once in a while.”*

*– General Dentist, 2012 GP Referrals Study*



### Individual Visits

Consider scheduling personal visits with a select group of general dentists you have identified in your marketing plan as among your primary targets. In-person visits require a more substantive time commitment, but the effort demonstrates a heightened level of respect and commitment as well as a sincere interest in getting to know and work with the referring dentist. The personal attention also dramatically increases the likelihood that the dentist will become a referrer or a stronger referrer.

The face-to-face discussion allows you to answer questions, offer details about your practice and address any concerns the dentist may have. The visit opens the lines of communication and helps lay a foundation for a quality working relationship. Few things say commitment and partnership with a dentist more than this kind of one-on-one interaction.

For dentists new to your practice, arrive prepared with your practice **BUSINESS PROFILE/REFERRAL MATERIALS**. Bring brochures and other materials as leave-behinds for the general dentist and his/her staff. Print bios of the endodontists in your practice, and attach a business card with contact information. Place all the materials in a folder or clipped together or consider using a flash drive as detailed in the **PRACTICE PROMOTION ARCHIVE**. If you have a website (which you need to have, if you don't already), print a copy of the home page or include the website address on the marketing materials. Revisit the AAE's recommended **KEY MESSAGES** and **QUESTIONS & ANSWERS** for use in talking with dentists to help you prepare for your conversation.

If you visit the dentist on-site at his/her office, take time to introduce yourself to the office staff. They will be a critical conduit between your office and the dentist's for patient details such as treatment reports or follow-up visit scheduling. Leave business cards, brochures and contact information with the staff, and invite the dentist and staff to visit your office.

Your practice's staff members also may wish to make personal visits to the offices of referring professionals. After you have made the initial visit, your office manager could schedule meetings with the dentist's office manager at regular intervals to discuss any issues, areas of concern or key administrative considerations. Something such as insurance coding could even be a focal point of a lunch sponsored by your office manager with one or a group of staff from dental offices. Such follow-up visits also create an excellent opportunity for the office manager to provide the dentist's office with updated materials about your practice. Encouraging personal communication and interaction among office staffs goes a long way toward building lasting working relationships.

### Meeting Over a Meal

Some endodontists choose to meet with a dentist for a breakfast, lunch or dinner meeting. This relaxed setting allows for a comfortable discussion between dental professionals and often leads to quality working and personal relationships. If you and the general dentist choose to meet for a meal, select a restaurant where background noise will not be an issue. Also be cognizant of the type of restaurant and the image your choice conveys. Consider choosing a nice, mid-priced restaurant that allows you to properly treat the dentist without coming across as too extravagant. Take into account generational and other personal preferences that might factor into restaurant choice as well. Pick a meeting spot in close proximity to the dentist's office or home, to be considerate of his/her time and, of course, arrive on time.

This more informal, less clinical setting allows for you to set a more casual or personal tone with the dentist. Take advantage of these moments to get to know the dentist – including things such as his or her personal preferences and off-the-clock activities. In your database, make a note after your lunch about things you've learned about the dentists' family, personal activities, recent accomplishments, etc. This will come in very handy the next time you or a member of your staff calls or visits with the dentist.

This also is a moment to more informally ask about the dentists' perceptions about your practice. Pose a few questions to the dentist about what he or she thinks is working the best and what could be most improved. Discuss a recent patient from the dentist or share information about a difficult case you recently treated. At the same time, unless you've set the lunch as a feedback session, you typically want to keep your questions to a few so it doesn't feel like an interrogation.

The other area to consider for your meal is to come prepared with a thought piece and/or topic to briefly allude to with the dentist. For instance, you may make a brief observation on a clinical topic covered in a recent *ENDODONTICS: Colleagues for Excellence* newsletter and share a copy of the article with the dentist at the lunch as well. This goes both to your positioning as the expert as well as how you work to partner with the dentist by sharing information and best practices.

### Phone Calls

The power of a simple phone call can be great. Take advantage of moments such as following up on the care of a patient with a more difficult case. Just making the call is a marketing moment because you're taking the extra step of reaching out personally. If the dentist has time for a longer conversation, you can further enrich the call by asking about how things are going with his/her practice or commenting on clinical research or news you saw recently.

“Establish a good line of communication with the general dentists. Make sure the final course of treatment that the general dentist has suggested to the patient isn't altered by the endodontist. A phone call when there is a concern or question goes a long way to relieve confusion on the patient's part, when a different plan is told to the patient.”

– General Dentist, 2012 GP Referrals Study



## Getting Personal

In addition to more official- and clinical-oriented reasons for interactions, engage in some personal touches to deepen the sense of partnership and relationship with your referring dentists. The **GP REFERRALS STUDY** provides insight from dentists in this area by asking if “Signs of appreciation to you and your staff, such as holiday gifts, fruit baskets and outings” is effective in building a stronger partnership with them. A healthy 42 percent say yes.

Anecdotally, however, that number is arguably even higher. Among the many endodontists the AAE has interacted with over time at marketing courses and consultations, not only do endodontists report that a higher percentage of dentists appreciate personal touches (but perhaps don’t admit to it in the survey), but their staff (those not taking the survey), highly appreciate these kinds of gestures. And those are the same staff often helping the dentists decide where to refer patients or influencing patients’ choices when dentists give them more than one endodontist option.

“Sending gifts and goodies always makes dentists smile even if we don’t like to say so. Those smiles make us remember the name and from there we can evaluate what their work is.”

– General Dentist, 2012 GP Referrals Study

In another area of “getting personal,” 55 percent of dentists saying that the partnership will be enhanced if an endodontist “invites you to professional learning events like seminars, study clubs and dental society meetings.”

As you conduct your practice assessments and get dentist feedback along the way, look for indications of the kinds of personal touches that are most effective among your dentists. Based on your practice personality and brand, regional tendencies, individual dentist preferences or otherwise, you should get some cues as to what is most and least appreciated. There are endless possibilities of what you might do, but following are some sample approaches practices have taken.

### Indirect

- **Send cards or treats.** During the holidays, for the dentist or office staff birthdays or other occasions you deem appropriate, give the gift of celebration and food. Be sensitive to religious holidays and consider sending general season’s greetings cards.
- **Offer giveaways to referring dentists.** Consider a quarterly raffle or contest entry via the practice newsletter or email. Award the winning dentist with a free endodontic procedure for a deserving, underinsured patient. Another winning prize may be a copy of a dental reference book or a suite of AAE patient brochures for use in their office.



### Direct

- **Engage in personal activity.** Endodontists are out there biking, golfing and enjoying other activities with their referring and prospective dentists. This is a high level of engagement, which may not be a fit for all personalities (you or the dentist) or in all situations (including because you likely will need to be selective). Know that if you extend the invitation to do something, the onus is on you to pay.
- **Invite dentists to events with you.** Bring dentists into your sphere of influence, networking and education by offering to take them to things such as local, regional or national dental society meetings, study clubs, CE courses and the like.

### Group Gatherings

Time constraints do not always allow for in-person meetings with multiple dentists. As an additional approach for your marketing portfolio, consider different ways you can do group gatherings where you reach a larger number of dentists yet in a setting still unique to you and your practice. Following are some examples.

#### Dentist Open House

Invite new and long-established dentists to come to your office to see first-hand what their patients see. Offer a tour of the facility and an overview of the state-of-the-art technologies and techniques used in treatment. Use this time to show your expertise and qualifications and to emphasize the benefits you offer to patients.

During the open house, introduce long-standing dental partners to new dentists to encourage networking. Host the open house while there are no scheduled patients, as to not interfere with patient care, but you may choose to invite past satisfied patients who can provide testimonials to the visiting dentists. Ensure your office manager will be in attendance and available to answer questions about scheduling, insurance or other administrative areas. You also may consider inviting dental supply representatives as an added networking benefit for all attendees. However, the focus should remain on highlighting the benefits of your practice, how you partner with dentists and the quality of your services.





Schedule the open house during a span of time that includes some off-hours, which may be most convenient for visiting dentists. Expect the professionals to arrive at various times during the open house, and ensure you or another staff member is free at all times to offer facility tours to new visitors while allowing another office representative to talk to visiting dentists who already received a tour. Offer light food and drink and provide **BUSINESS PROFILE/REFERRAL MATERIALS** for the visiting dentists to take. Prepare for the open house by reviewing the **KEY MESSAGES** and **QUESTIONS & ANSWERS** on your own and with your staff.

All points of contact should be followed up with a letter of thanks within two weeks of the open house. See sample text for an **OPEN HOUSE FOLLOW-UP THANK YOU LETTER**.

### **Office Tour**

As an alternative or an additional tactic to hosting an open house, invite dentists to tour your office and observe your endodontics in practice. You could have three to five dentists or a practice come over during regular office hours to see you and your staff in action. Consider coinciding this with an end-of-day patient or patients to allow for a brief post-treatment discussion and/or drinks and snacks there at the office. The idea is to keep things informal yet also provide for interaction that allows you to enhance your interpersonal relationships, secure feedback and answer questions, position the expertise of the endodontists and highlight technology in the practice.

### **Small Group Breakfast or Dinner**

Another way to leverage a setting that is a cross between one-on-one and large group is to host a dinner either with a practice and your practice or with a small group of dentists. If you have space at your offices, you could host a catered dinner and an office tour. Otherwise, you can select a location convenient to the dentist(s) offices, preferably a restaurant with a private room for your group.

The informality of this setting and the direct, interpersonal interaction will hold great value. At the same time, you may choose to take a moment (such as after dinner and before dessert) to address the group with an under 10-minute topic such as highlighting some new/special about your practice or to feature something recent in endodontic care, research or technology.

## Networking

While similar to some of the direct, targeted relationship development efforts discussed in the **GETTING PERSONAL** section, networking activities also can help expand your community of dentist referrers and further promote your practice. Professional networking involves developing and maintaining contacts and personal connections with dental professionals who might be helpful to your practice growth.

### Places to Network

To build or expand your rolodex of dentist referrers, consider where you may meet new dentists in your area. Include a schedule of local meeting opportunities in your marketing plan. Potential meeting opportunities may include, but are not limited to:

- **Local dental society meetings:** Visit the ADA's **STATE ORGANIZATION** page for a list of your state's dental association, and visit the ADA's **LOCAL ORGANIZATION** page for local groups.
- **Local student activities:** For area student events, go to **AMERICAN STUDENT DENTAL ASSOCIATION** and **AMERICAN DENTAL EDUCATION ASSOCIATION**.
- **University seminars:** Volunteer to speak to a class or offer content support for the professor.
- **Study clubs:** Offer to assist students with expert guidance as they learn about the root canal procedure.
- **Health clinics, assisted living facilities and nursing homes:** Consider focusing on the value of saving teeth, oral health and the need to improve longevity of teeth while building relationships with doctors and nurses at those facilities.

### Networking Tips

Networking simply entails making connections with others – it may come easy for some and be more challenging for others. A networking event is an opportunity to develop a few relationships that have potential, so start slow as you build confidence. A few networking tips:

- **Introduce yourself.** In order to meet someone new, start by simply introducing yourself with your name and what you do. You can't expect someone else to approach you.
- **Ask questions.** Use this as an opportunity to listen to the other person by asking questions about his or her practice and experience with root canal treatment. This is an opportunity to establish a relationship, and begin to build trust.
- **Be clear.** Not all networking will lead to a new patient referral, but each new contact presents a learning opportunity for future networking. Be clear about your interests, and offer a brief (typically about one minute or less, unless the person is asking questions) overview about the quality of your practice and services. Recognize you may not get a new referral today, but the new relationship may pay dividends in the future and therefore must be slowly developed for the time being.
- **Provide business cards.** Give your business card and, perhaps, other marketing materials such as a brochure to dentists you meet, if appropriate to the setting (or in a follow-up note or email). Collect contact information from the dentist, and make notes about the person on the back of the card so you can directly reference your discussion when you follow-up.
- **Set a date.** To develop the relationship, offer to determine a time for a next interaction. Consider offering to treat the dentist to a meal or inviting the dentist to visit your office to see your work first-hand (see **GETTING PERSONAL**).
- **Follow up.** Contact the person within 48 hours while the conversation is still fresh in your minds. Reference a point of discussion and reiterate any offers of office visits or other activities.

## Education/Speaking Opportunities

A valuable and creative way to build relationships with dentists is to present at, or develop and host, an education seminar. In fact, 55 percent of dentists say that being invited to a professional learning event is an effective way for endodontists to build their relationship with them, according to the **GP REFERRALS STUDY**. A seminar format will allow you to network with dental professionals as well as provide education on endodontic topics to establish you as a trusted authority. Developing these relationships may not result in new referrals in the immediate future, but this is a strong strategy for long-term growth and for general awareness about your practice.

“Interacting with dentists at dental meetings and study clubs, either as a speaker or a participant, has proven to be an effective method of showcasing endodontic procedures and treatment possibilities. The personal contact is valuable and places the endodontist in a position of being a resource for the general dentist to confer with and to refer to.”

- Hedley Rakusin, D.D.S., M.Sc., Private Practice Endodontist, Dallas, Texas

### Where to Speak

In general, start by speaking to smaller groups. As you gain experience and confidence, seek out larger audiences. Primary options include:

- **Host your own:** While it takes more work to conduct your own education event, it also allows you to customize your target list, and ensure the topics you address are most appealing to this group. You also may be able to partner with an endodontic corporation to sponsor the education seminar and provide continuing education credits.
- **Dental events:** Offer to present to a general practitioner or dental student group or to contribute to a panel discussion at an organization event. Just as with hosting your own event, you have all the preparation that goes into presenting, but otherwise, you can “just show up.”
- **Health care events:** You can take your message to health care professionals outside dentistry who often have the opportunity to recommend an endodontist. For example, you could address hospital emergency room staff about dental trauma, or pharmacists’ and physicians’ groups about pain management.



### Delivery Tips

Consider the following tips to help you prepare for a speaking opportunity:

- **Know the audience.** Match your presentation content to the needs, interests and perspective of your audience. A presentation to dental students, for instance, should take into account the more novice clinical knowledge compared to well-established dentists. You also may want to partner with other dental professionals to deliver presentations, depending on the setting and the additional credibility and cache that approach might afford you.
- **Know the content.** When working with third parties, talk with the meeting organizers to determine what presentation topics may be best suited for the event audience. No matter where you speak, prepare a presentation to educate the attendees on key topical information, highlight your expertise and highlight the role of endodontists as highly skilled specialists. Cover topics in which you are well-versed, and use personal experiences and examples in your lectures. These insights will make your presentation more interesting while addressing procedures or problems that may not be covered in textbooks or formal classes.
- **Consider presentation tools.** A presentation tool such as PowerPoint® can help provide a visual for your presentation. Use visual aids such as slides, models, charts or computer presentations. Visual tools can help you organize your speech and offer additional content (such as data points).

“Evening study clubs, as inconvenient as they can be after a long day, still are a valuable means of encouraging the professional collegiality so much needed among today’s busy practitioners. Sometimes a shorter working day and finishing out that day with professional colleagues can be a very effective marketing strategy to encourage better utilization of all of the specialties of dentistry.”

– *General Dentist, 2012 GP Referrals Study*



### Dentist/Endodontist Duo Approach

One unique approach to an education seminar presentation is to partner and co-present with a general dentist. A dentist and endodontist can jointly address the importance and professional impact of adopting a “Partners in Patient Care” mindset. Consider inviting one of your current referring dentists to present with you, and in your presentation, reference your experience working together. As a duo you can address dual perspectives of key areas such as:

- The complexity of various root canal cases
- Clinical analysis
- When to refer and why
- How to best serve patients
- How to build the best total-care dental team

You can watch a sample duo presentation based on the 2011 Annual Session’s *Endodontists and General Dentists: Partners in Patient Care* in the **PRACTICE MARKETING CLASSROOM**. You can also download a duo presentation template to get you started in developing your own presentation with a referring dentist.

### Topic Ideas

For content, consider the following topics that were identified through the AAE’s **GP REFERRALS STUDY** as principal areas dentists would like to hear more about from endodontists:

- Pain management and medication
- Innovative endodontic techniques and instrumentation
- Treatment complications
- Diagnosis and treatment planning
- Rotary instrumentation techniques
- Obturation

Regardless of topic, always include a final portion of time for questions and answers from the audience.

### Resources

The AAE provides resources to aid you in your presentation content or to give as handouts such as:

- Endodontic **CASE DIFFICULTY ASSESSMENT FORM**
- Treatment Options for the Compromised Tooth **DECISION GUIDE**
- *ENDODONTICS: Colleagues for Excellence* **SPEAKERS KITS**
- The AAE’s Recommended Guidelines for the **TREATMENT OF TRAUMATIC DENTAL INJURIES**
- *Endodontic Team Care*, a DVD series designed to help you grow an educated referral network.

The AAE also offers a series of “Lunch and Learn” presentations tailored to a dental student audience as referenced in the **EDUCATOR/STUDENT OUTREACH** section.



### **Logistics**

If you choose to host an education session, you will need to coordinate all logistics for the event, including location and audio visual equipment to support your presentation. Restaurant party rooms, local hotels, event spaces and universities may have the facilities you need to present to a large group.

Consider offering drink and food for your attendees. If you host an event during a mealtime, consider providing a more substantial offering, appropriate for the time of day. Whatever you choose, be clear in your invitation whether your attendees can expect light appetizers or a full meal.

Set the date and send invitations via mail and email to target attendees six to eight weeks in advance of the event. See the **NETWORKING/EDUCATION SEMINAR INVITATION**. As much as three months out, you also could send a “Save the Date” notice to invitees (see **SAVE THE DATE INVITATION GUIDE**), letting them know the date, time and location well in advance of the event. Consider having your staff make personal calls to key attendees and use other networking events as an opportunity to extend invitations to new potential referrers.

### **Education Seminar Follow-Up**

Audience feedback is vital to assessing your performance and attendees’ evaluation of the presentation. The results will help you to improve upon future presentations. See the **NETWORKING/EDUCATION SEMINAR EVALUATION FORM** for an example. The evaluation form may be distributed immediately following the presentation and collected prior to attendees’ departure, or it may be sent with the follow-up thank you note. If you provide the evaluation form at the presentation, include a section to capture contact information for any dentists or dental students who are new to you. This information is vital in your continued networking with these professionals and will help you with follow-up thank you notes. If you choose to send the evaluation forms along with the thank you notes, be sure you capture contact information for all attendees.

Within a week of the presentation, send a letter of thanks to presentation attendees. See the **SAMPLE NETWORKING/EDUCATION SEMINAR THANK YOU LETTER** for an example letter.

## Written Correspondence

Your portfolio of outreach should be considered on a spectrum from the micro (direct, one-on-one interpersonal contact) to the macro (mass mailings). Those and everything in between serve a purpose to remind and reinforce with dentists from multiple touchpoints about why to partner with your practice.

So while mass written correspondence such as a newsletter is one of the least personal forms of outreach you can conduct, it does allow you to reach many more dentists for less time and money while serving as a reminder to them of your expertise and that you are in their sphere of referral consideration.

Consider the following examples of mass correspondence to conduct with both existing and potential referring dentists:

- Develop a practice newsletter (see detailed newsletter overview that follows).
- Repurpose endodontic information, publications and/or research with a brief cover note highlighting information and/or making expert observations. Options include:
  - **ENDODONTICS: COLLEAGUES FOR EXCELLENCE**, which the AAE sends to ADA general dentist and specialty members, is available from the AAE as reprints.
  - **JOURNAL OF ENDODONTICS**, a peer-reviewed clinical publication, largely for endodontic specialists, also is available in reprints.
  - Leverage other pieces that run in scientific or industry trade magazines.
- Highlight practice collateral. When you have new material such as a practice brochure, patient information or new/significantly updated website, send no more than a one- to two-paragraph note with a direct reference to and/or copy of the collateral.

In addition, consider the following examples of personal correspondence that provide a more intimate, personalized touch that you or your professional relations coordinator may conduct with dentists:

- For any of the above types of mass correspondence, you can choose to personalize the piece with a handwritten note to select dentists.
- Annually, you could send a personal, handwritten note to your top referrers thanking them with a simple, brief and heartfelt sentiment about how much you've appreciated partnering with them.
- Write a personal note of thanks to select dentists who have completed assessment or feedback forms on your practice's behalf, acknowledging their feedback and committing to priority areas of partnership.

### Practice Newsletter

A dental practice newsletter can be an excellent marketing tool for your practice. It allows you to reach a large number of referring dentists at one time, and you control the message and own the content. Whether in a traditional printed newsletter format or in an electronic, email based format, a customized newsletter is a positive and consistent means of reinforcing your current relationships and building new ones. Please see the **E-NEWSLETTERS** section for more detail on an electronic distribution schedule.

### Newsletter Content

A typical newsletter should include brief articles on a variety of topics of interest to the reader. The content need not be entirely original or written only by the endodontist, so consider inviting staff to author a piece or invite dentists to submit articles or commentary for publication. If the content is not your original creation or is copy written, be sure to obtain permission before publication. Additionally, you must receive permission before printing any patient names, per HIPAA guidelines.

### Typical newsletter content may include:

- **Informational articles.** Articles should address common questions or recent developments in endodontics to help educate the general dental community about the benefits of specialty care. Consider writing articles to respond or react to current dental trends, professional events (*e.g.*, dental meetings) or relevant current events in the news. Content ideas also may be generated by lectures, personal experiences and case histories.
- **Anecdotes.** Consider offering a feature bio in each issue to introduce staff or to highlight patient stories for your readers. Use this section as an opportunity to open up about yourself and your practice. This section can include details on new technologies used at your practice or new services offered.
- **Guest Column.** Invite guest columnists, such as a referring dentist, to submit a short article for the newsletter. This will build their investment in the newsletter and will provide professional validation for your work. For instance, a referring dentist could discuss best practices in how an endodontist partners with a dentist (with the not so subliminal assumption that they're talking about your practice).
- **Announcements.** Share news of upcoming events of interest, such as a practice open house or a new practice Facebook page. If you have updated your website or printed new patient brochures, promote those updates in this section. Offer a means for readers to interact with and respond to these announcements by including details such as an email address where dentists can sign-up to participate in an event or the web address of the new Facebook page.
- **Visuals.** Include the practice logo and consider adding photos of staff, of pre- and post-op images or photos of your practice's facility and technology.





The following may help as content thought-starters:

- Review your practice **KEY MESSAGES** for key points to highlight in the newsletter content. Also consider ways to incorporate key messaging themes into specific newsletter segments such as:
  - **Expertise:** For example, feature an endodontist-authored article on new technology or a particular procedure; have an endodontist commentary piece on a **JOURNAL OF ENDODONTICS** article that lends further insight; or showcase a regular staff profile in each edition with relevant expertise content.
  - **Patient satisfaction:** For example, have a regular graphic box featuring patient testimonials; feature a regular piece on “What Your Patients Experience” with an anecdote about what your office did for a patient or a standard best practice; or highlight patient survey statistics in a feature piece on how happy patients are.
  - **Partnership:** For example, include a tagline under the newsletter masthead that reflects partnership (*e.g.*, Partners in Patient Care); show visuals of endodontists and general practitioners together/in office setting; or do a joint endodontist/general practitioner Q&A article on what it’s like to work together.
- Cite new studies or trends, quoting from journals and publications such as the **JOURNAL OF ENDODONTICS**. Credit your sources and relate the information to your own practice or interject your own opinions.
- The best source of material for your newsletter is your practice, especially your patients and their treatments, but you must be sure to obtain written permission from anyone identified with the text or photos.
- Review AAE **POSITION STATEMENTS** and the **PRACTICE PROMOTION IDEA OF THE MONTH** archives.
- Invite your office staff to suggest stories and ideas. Asking for suggestions will not only provide material, but by its inclusiveness, will also boost staff morale.
- Solicit material from your readers by asking for letters or providing an opinion or question of the month column.
- Consider offering a quiz on dentistry or an endodontic problem of the month.
- Include information or clinical highlights gathered at dental meetings.
- If you make public appearances, mention them in the newsletter, and invite your readers to attend.

### Newsletter Guidelines

To help maximize a print newsletter's effectiveness, consider the following:

- **Consider design.** The newsletter should be consistent with the look and feel of all other practice marketing tools. Review the **NEWSLETTER PRODUCTION** section for more details on design.
- **Use a standard size.** If you mail a print newsletter, use a standard size (8½" x 11"), which is less expensive to print than odd sizes and can be copied inexpensively.
- **Select paper.** Newsletters printed on a heavier-than-typical copier paper can have a more professional feel. Be careful when choosing a very heavy weight paper that may be difficult to fold and mail, or requires additional postage.
- **Make it a self-mailer.** Sending your newsletter as a self-mailer (folded and taped, or wafer-sealed with the mailing label affixed) eliminates the cost of an envelope. If you do not opt for a self-mailer, design the newsletter so that it can be folded to fit into a standard business-size (No. 10) envelope.
- **Use bulk mail rate.** If you mail more than 200 pieces at a time, check into the cost of bulk rate postage vs. first class. However, you may find that the inconvenience of having to take the newsletters to the post office and the cost of the bulk rate permit will offset the cost savings.

For all newsletters in printed or electronic format, consider the following:

- **Make it readable.** Body copy should be no less than a 10 pt. typeface. Headlines should be 14 pt. or larger and bold typeface. Break up long columns of text with headings to make it more readable.
- **Keep it short.** Your newsletter must compete for the reader's attention with the large volume of mail received by most practitioners.
- **Start small.** Keep your initial issues short and your promises realistic.
- **Do not oversell.** Even though you are writing a newsletter to try to generate referrals, do not be blatant in selling yourself or your practice. This is an opportunity to build trust with your reader.
- **Be professional.** Keep your tone friendly and objective. Remember that general dentists are professionals themselves.
- **Encourage input.** Ask your readers for questions, comments and ideas. Involve other dentists by asking them for contributions.
- **Be consistent.** Make the newsletter predictable and regular. Provide the same design format in every issue and offer regular features in the same space each time. The design should reflect your other marketing materials. If the newsletter is monthly, try to schedule its arrival about the same time every month.
- **Use the AAE's resources.** Refer readers to the AAE **WEBSITE**, the **ENDODONTICS: COLLEAGUES FOR EXCELLENCE** newsletters and various guidelines and position statements. These provide a wealth of information.
- **Make a commitment.** Remember that not getting your newsletter will create an impression. If you commit to producing a newsletter, you need to be prepared to produce it on a regular basis, which could mean quarterly or biannually.



### **Newsletter Production**

Some practices do e-newsletters, some mail or both. Newsletters vary in length (it could be 1 page), are highly customizable, can vary in frequency from monthly to annually, and can easily deliver on the themes of Expertise, Patient Satisfaction and Partnership to a broader dental audience.

Depending on the frequency you choose, determine the best means for production of the newsletter. You may hire an outside person to design, write and produce the newsletter, or you may choose to produce the piece in-house with the help of staff. If you decide to produce the newsletter in-house, most word processing programs have desktop publishing capabilities that make producing a newsletter quicker and easier than ever. Please note: These programs do require a working knowledge of basic page design and a thorough understanding of your computer applications.

Many endodontists assign a staff member or members to coordinate the newsletter development and production. Consider assigning as many as two staff to dedicate portions of their time to own areas of newsletter development or production. Some endodontists cannot spare their staff's time for newsletter development and instead choose to hire help for the project. In that case, you could check with local chapters of the Public Relations Society of America or the American Marketing Association for names of inexpensive freelance writers and designers in the area. You also might consider hiring a student from the journalism or communications department of a local college, or asking the placement office for names of new graduates who may charge less than more established writers. Check with art schools for designers. These options will help you keep costs down.

### **E-Newsletters**

Many of the underlying principles and suggestions previously discussed also are relevant to an electronic delivery method for your practice newsletter. In many respects, an e-newsletter can be a less expensive undertaking than a printed newsletter, given the simple design, brief content and no printing or mailing costs.

However, an e-newsletter requires more technological sophistication. For example, the graphic images and text must be formatted in HTML, which is a digital language that allows the reader to see the text and images as though they were on a printed page. The writing should be strictly informational and recipients should be able to easily “unsubscribe” – lest your newsletter do you more damage than good in being perceived as junk mail or “spam.” This also makes management of your mailing list an important priority.

There are a variety of computer programs that facilitate simple e-newsletter development. Additionally, there are many one-stop, Internet-based shops that provide design templates, execute mailings and manage your list for nominal fees.



## Sharing Best Practices

While many practice marketing tactics target dentists, relationships with other endodontists also are important. Sharing best practices with other endodontists can help you gather ideas for your own practice growth and for improved patient care. As a member of the AAE, you have access to other endodontists with whom you can share knowledge and experiences.

You can also view past AAE Annual Session courses in the **PRACTICE MARKETING CLASSROOM** section of the website. The courses include information about the GP Referrals Study and panel discussions on practice promotion efforts. Additional practice marketing resources also are available on the AAE website at [www.aae.org/practicepromotion](http://www.aae.org/practicepromotion).

Additionally, the AAE Annual Session, Insight Track and other events are excellent opportunities to network with and learn from other endodontists.

## Educator/Student Outreach

Educators and dental students are an important audience to consider in your marketing efforts. To aid members in their outreach, the AAE developed **LUNCH AND LEARN POWERPOINT®** presentations designed to be used by members in their outreach to pre-doctoral students in dental schools.

The presentations provide education on the importance of endodontic case assessment and referral, treatment options and other topics. The sessions are designed to be a one-hour combination of lecture and question-and-answer that also includes a light meal or other refreshments.

Among the resources developed by the AAE to aid you are:

- Endodontic **CASE DIFFICULTY ASSESSMENT FORM**
- Treatment Options for the Compromised Tooth **DECISION GUIDE**
- ENDODONTICS: Colleagues for Excellence **SPEAKERS KITS**

Seek out speaking opportunities, as covered in the **PROFESSIONAL NETWORKING** section. If you are associated with a university or dental school, discuss potential speaking opportunities with your department chair. You can use the **ALMA MATER LETTER TEMPLATE** to let your alma mater know about your willingness to speak to students. If possible, send the letter to a personal contact at the school. Try to personalize the letter by including a fond memory or other recollections from your time in dental school.



Additionally, keep abreast of local student activities hosted by the AAE, ADA, Academy of General Dentistry, American Student Dental Association and American Dental Education Association. These meetings may be an opportunity to network with and/or give a presentation to dental students. Reaching out to dental students is one of the best ways for endodontists to bridge the gap between the specialty and general dentists. Lessons learned in dental school years provide the foundation for future partnerships.

AAE staff is available to work with you to schedule a Lunch and Learn at your local university or alma mater, supply you with a presentation and handout materials, and handle meeting logistics. If you're interested in conducting a Lunch and Learn, or hosting one at your dental school, visit the **MEMBER VOLUNTEER OPPORTUNITIES** section at the AAE website.

The AAE also has an Open House program for young endodontists where residents and new practitioners spend time visiting with a practitioner in their area to learn more about the day-to-day activity of running an endodontic practice. You can sign up to participate in **OPEN HOUSES** and have your name included in a directory of AAE members across the country. This is a great opportunity to showcase your practice, meet your newest colleagues and, should you choose, mentor a young professional. The experience can range from brief phone/email contact to an office visit or lunch meeting.



## Marketing Plan Worksheet Template

Drawing from your Audience Assessment Worksheet, Marketing Audit Worksheet, Measurable Business Goals Worksheet, and readings from the Toolkit, begin to map here key components of your Marketing Plan.

- **Step 1:** Capture all of your practice’s initial ideas by a) foundation work (*e.g.*, research, messaging, marketing plan, etc.), b) materials and c) outreach you’ve considered doing.
- **Step 2:** Prioritize items by those things you believe to have some combination of a) effect on audiences you’ve identified as your primary target(s), b) the greatest overall impact, c) impact on the most people and d) best practices/things you’ve tried before that worked.
- **Step 3:** Evaluate and trim your priorities based on practical considerations such as a) budget, b) time and c) feasibility.
- **Step 4:** Save discarded ideas for future Marketing Plan consideration.
- **Step 5:** Create an annual Marketing Plan timeline that captures timeframes when all remaining items will be done or completed by.

Marketing Strategy	Target Audience/ Size	Staffing/ Hours	Expenses/ Outside Support	Timing/ Frequency/ Timeline
EXAMPLE: Practice brochure	300 current/ potential referring dentists	Endodontist: 5 hours to provide direction, content ideas, approve copy and oversee project Staff: 20 hours to oversee project, develop content and prepare mailing	Freelance writing/ design (\$500); printing (\$2,000); postage (\$200)	Complete by August; update annually

### FOUNDATION WORK (*e.g.*, research, messaging, marketing plan)

Marketing Strategy	Target Audience/ Size	Staffing/ Hours	Expenses/ Outside Support	Timing/ Frequency/ Timeline



MATERIALS				
Marketing Strategy	Target Audience/ Size	Staffing/ Hours	Expenses/ Outside Support	Timing/ Frequency/ Timeline

OUTREACH				
Marketing Strategy	Target Audience/ Size	Staffing/ Hours	Expenses/ Outside Support	Timing/ Frequency/ Timeline



**Practice Assessment Survey Template** – on practice letterhead

PARTNERSHIP SURVEY

[YOUR PRACTICE NAME/LOGO]

**Name [optional]:** \_\_\_\_\_

Relative to the partnership we have with your dental practice, please rate our endodontic practice in the following areas. Please check the box that best reflects your point of view on each question.

<b>QUALITY OF CARE</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>N/A</b>
1. Has skills/expertise needed to perform treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Performed previous work to high level of satisfaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Patients generally are satisfied with treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has most up-to-date equipment and technology to perform procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Gets familiar with cases in advance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

<b>PATIENT SERVICE</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>N/A</b>
6. Performs work that is worth the cost to patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Has an office at a location convenient to patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Shows calm, caring “chair side” manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Treats emergencies and patients in pain in timely manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Accommodates patients in scheduling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Provides educational tools explaining procedure or varying degrees of complexity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:





**PARTNERSHIP**

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>N/A</b>
12. Refers patients back for restorative treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Collaborates on treatment plans for referred patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Refers patients who do not have a dentist in general practice to you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Sends periodic updates on new treatment alternatives and/or images of successful cases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Shares your treatment philosophy/plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Provides tools/forms you can use in practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Confers with you before suggesting alternatives to patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

**RESPONSIVENESS/COMMUNICATIONS**

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>N/A</b>
19. Sends reports and film in a timely manner following procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Asks for your feedback on the endodontic practice services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Is available for second opinions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Explains office policies/procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Communicates availability and fees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Describes technology used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:



25. Please name three or more things you find most appealing about our practice/working with us.

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26. Please name three or more things we could do for you to enable an even better experience with our practice.

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**Practice Assessment Survey Cover Note Template** – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

Our ongoing partnership with you and mutual commitment to the highest quality in patient care is paramount to our practice. To continue to assess areas we need to improve upon in our working relationship with you, we would appreciate you taking the time to fill out the enclosed survey by [give date two weeks from when they receive the survey to provide enough time to respond but avoid the survey not being prioritized].

You can use the enclosed self-addressed stamped envelope to return the survey. We welcome your utmost candor in filling out this survey, and we would appreciate any comments that may better inform our assessment. As you'll note on the survey, your name is optional. What is most important is that you feel comfortable giving a vivid, candid assessment.

Please let us know if you have any questions. Thank you for taking the time to provide feedback to enhance our partnership.

Sincerely,

[Endodontist signature]

[Endodontist name]



**Practice Assessment Follow-Up Letter Template** – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

Thank you for having taken the time to complete our Practice Assessment Survey. Your feedback is very much appreciated and has provided valuable insight for our practice and how we might be a better partner with you.

We are taking your responses and those of other dentists into account as we evaluate how we might improve and sustain our quality of care, patient service, partnership, and responsiveness and communications.

[optional]

In your survey, we noted a few areas where we want to pay particular attention to in our partnership with you. Of note, we will be considering ways to improve on X, Y and Z. [optional: Propose a follow-up conversation/meeting.]

My sincere thanks again for your time, and please feel free to call me any time if you have specific questions, requests or concerns relative to how we are working with you or serving your patients.

Sincerely,

[Endodontist signature]

[Endodontist name]

## Audience Audit Worksheet

This worksheet helps you broadly assess key attributes about your target audiences, the result of which will help guide the development of your marketing plan. The complementary Marketing Audit worksheet dives deeper into specific marketing efforts you may currently have underway. As you fill out this worksheet, keep in mind a few things:

- To draw on a broader point of view, we recommend you fill this out as an exercise as a practice.
- Surveys (*e.g.*, customers or dentists), research or other information, as available, can be applied to help respond to these questions.
- If you are uncertain about how to answer the question due to lack of information/perspective, provide an educated guess/gut reaction and consider/note how you might go about getting the information.

### About patients:

1. How would we describe our **current** patients by:
  - a. Demographics (*e.g.*, age, income, race, ability to pay, etc.)
  - b. Psycho-graphics (*e.g.*, high fear of root canal, likelihood to be a self-healthcare activist)
  - c. Geography (*e.g.*, within X-mile radius, urban vs. suburban vs. rural)
2. How would we describe our **target** patients (if different) by:
  - a. Demographics (*e.g.*, age, income, race, ability to pay, etc.)
  - b. Psycho-graphics (*e.g.*, high fear of root canal, likelihood to be a self-healthcare activist)
  - c. Geography (*e.g.*, within X-mile radius, urban vs. suburban vs. rural)
3. What are our community's prevalent demographics? Should our practice patient base and/or marketing reflect those community demographics more?
4. What have our practice patient trends – such as quantity of patient base and demographics of new patients – been like in the past year? In the past five years?
5. How and how well do we currently attract and retain the majority of our patients?
6. What do we hear patients say they most and least like about our practice in areas such as:
  - a. Treatment/procedure (*e.g.*, satisfaction with treatment, explanation of treatment, follow-up care instructions)
  - b. Staff (*e.g.*, helpfulness, comfort level with endodontist, likelihood to revisit)
  - c. Practice (*e.g.*, office hours, billing, appearance/condition of office, dental treatment area privacy/appearance, parking/accessibility via public transportation)
7. How can we improve the quality of care and customer service we provide in each of the following areas?
  - a. Treatment/procedure
  - b. Staff
  - c. Practice (*e.g.*, overall satisfaction, appearance/condition of office)

**About referring dentists:**

8. How many dentists refer to our practice? How many dentists are repeat referrers?
9. How would we describe and categorize the different types of dentists who refer the most (e.g., by years in practice, by gender, by personality, by A-E referrers, etc.)? Least? Those that fall in the middle?  
[Note: See *AAE GP Referrals Study for stats*]
10. In a year, what is the average number of patients referred from each dentist? How have our referrals been trending? Are there any patterns in how referrals have been trending based on common dentist characteristics?
11. How would we characterize the greatest opportunity for dentist sources of increased referrals?
  - a. From existing referrers
  - b. From new referrers
12. Is there a type of dentist that currently does not refer to our practice that we'd like to attract?
13. What do we hear dentists say they like most and least about our practice in the areas of:
  - a. Our expertise
  - b. Patient service
  - c. How we partner with them
14. In how we describe our practice and how we behave, how can we improve perceptions of our practice in the areas of:
  - a. Our expertise
  - b. Patient service
  - c. How we partner with them
15. What are our greatest hurdles in reaching out to dentists or getting them to refer? What are our greatest assets in reaching out to dentists/getting them to refer?



## Marketing Audit Worksheet

Following is a worksheet to help guide development of your marketing plan. By having you and members of your practice complete this worksheet, it will help you evaluate specific marketing efforts you may want to consider or currently have underway. The complementary Audience Audit worksheet looks at marketing through a target lens.

To draw on a broader point of view, we recommend you fill out this worksheet as an exercise with other members of your practice. Often, the person most focused on developing marketing goals/plans has a very different perception of what's important or effective from others in the office who have different roles with patients, referrers, etc. It's very important to uncover perceptions **together**. Provide the questions for multiple people in your practice to respond and then you consolidate the results; and/or direct specific questions to members of your practice you think are best suited to answer them.

### Marketing efforts overall

1. Broadly speaking, how would we describe how extensive and effective our current marketing efforts are?
2. What specific efforts would we deem more or less effective and why?
3. Have we set up an approach to gauge results? If so, what does that entail?
4. How often do we have personal or indirect interaction with potential referring dentists and with current referrers?
5. How satisfied are we with our outreach materials, including website, newsletters (or e- newsletters), brochures, etc.?
6. What do dentists comment on most positively (and potentially negatively) about our marketing efforts?
7. What have we seen other practices (endodontists or other clinical practitioners) use effectively that we would like to consider or adopt in our efforts (*e.g.*, materials, outreach, etc.)?

**Materials** (e.g., website, social networking, referral materials, practice brochures, newsletter, etc.)

8. How well are our practice messages coming through in the materials? For example, are the messages clear and uniformly applied in all materials?
9. How consistent are our practice materials? (For example, does the content (*i.e.*, messages) and design of my brochure complement my website? Do materials look like they come from a single source based on look/feel/content?)
10. How well do the materials reflect our practice brand? (For example, do they project the personality and differentiation we're trying to get across?)
11. How current is the information in the materials we have and communications we make? How current are the graphics/layout of the materials?
12. Are the materials compelling? (For example, does our patient brochure adequately inform the patient? Is direction provided in all materials about when and how to contact us?)
13. Are the materials meeting our needs? (For example, are we receiving referrals through the use of our referral form?)

## Outreach

14. In each of the following areas, how would we describe the 1) types, 2) frequency and 3) effectiveness of our dentist outreach?
  - a. **Feedback** (e.g., patient and dentist surveys)
  - b. **Individual contact** (e.g., call, visit, lunch)
  - c. **Getting personal** (e.g., gift/food, personal activity)
  - d. **Group gatherings** (e.g., open house, small group dinner)
  - e. **Networking** (e.g., study club, dental society meeting)
  - f. **Education** (e.g., CE course)
  - g. **Written correspondence** (e.g., newsletter, article with note)
15. In any of the above areas, what are the 3 things we should be doing more of based on how they have been received by dentists or other perceived results? Are there any things we should place less emphasis on?
16. How tech-savvy are our target referrals? (*i.e.*, Are they using social media such as LinkedIn and Facebook?) Are there ways we should be leveraging social media more?
17. How are we leveraging the existing network we currently have? (For example, are we asking current referring dentists for testimonials or for introductions to new potential referrers?)
18. How well are we positioning our endodontist(s) as a leader(s) in the local, regional or national dental community? How important or effective could that/have we seen that be?



## Messaging Worksheet

This worksheet will help you develop your key messages in order to build the marketing foundation for your practice. The worksheet will take you through the steps to arrive at three key messages and three support points for each of the key tenets (expertise, patient satisfaction and partnership). This exercise will help you to tell the story of your practice in a meaningful way to dentists (and patients) with language, facts and word choice that are 1) compelling, 2) concise, 3) colloquial and 4) credible. One recommendation of how to best build your messages is to walk through this worksheet with your practice as a team exercise or share the worksheets with various members of the practice to get their feedback.

### 1. Expertise Message

For example, AAE campaign message and support points:

*Endodontists are highly skilled specialists in diagnosing and treating tooth pain and performing root canal treatment.*

- **Background:** Endodontists are experts in performing root canal treatment and other complex endodontic procedures.
- **Assessment:** Endodontists are a primary resource for dentists making treatment decisions.
- **Referrals:** Dentists regularly rely on endodontists as partners in patient care.

**Step 1:** Brainstorm key concepts, statements, ideas and points of view that immediately come to mind when you consider how your practice delivers for dentists on expertise.

**Step 2:** Identify (through existing materials, research, numbers you keep, conversations, etc.) key details you have or could get that speak to expertise and/or support the various key points of view you arrived at [in Step 1].

- Facts:
- Examples:
- Anecdotes:
- Analogies:
- Third-party testimonials:
- Personal experiences:
- Stats/research:
- Other:

**Step 3:** Organize information from Steps 1 and 2 by 1) prioritizing information in order of what you would consider to be most to least compelling to a dentist regarding expertise and 2) group details from Step 2 with key concepts from Step 1. [Note: In some cases, a key detail may help in identifying a broader concept that may become a message or key supporting point.]

**Step 4:** Write the expertise key message with 3 support points, keeping in mind you want language and information that is 1) compelling, 2) concise, 3) colloquial and 4) credible.

## 2. Patient Satisfaction Message

For example, AAE campaign message and support points:

*Patients benefit from the dentist/endodontist partnership.*

- **Patient state of mind:** Dental work in general causes fear, let alone root canal treatment, which causes even more anxiety.
- **Outcomes:** A dentist partnering with an endodontist can put patients more at ease.
- **Cost:** Involving an endodontist in root canal treatment can save patients time and money.

**Step 1:** Brainstorm key concepts, statements, ideas and points of view that immediately come to mind when you consider how your practice delivers for dentists on patient satisfaction.

**Step 2:** Identify (through existing materials, research, numbers you keep, conversations, etc.) key details you have or could get that speak to patient satisfaction and/or support the various key points of view you arrived at [in Step 1].

- Facts:
- Examples:
- Anecdotes:
- Analogies:
- Third-party testimonials:
- Personal experiences:
- Stats/research:
- Other:

**Step 3:** Organize information from Steps 1 and 2 by 1) prioritizing information in order of what you would consider to be most to least compelling to a dentist regarding patient satisfaction and 2) group details from Step 2 with key concepts from Step 1. [Note: In some cases, a key detail may help in identifying a broader concept that may become a message or key supporting point.]

**Step 4:** Write the patient satisfaction key message with 3 support points, keeping in mind you want language and information that is 1) compelling, 2) concise, 3) colloquial and 4) credible.

### 3. Partnership Message

For example, AAE campaign message and support points:

Dentists and endodontists enjoy strong working relationships.

- **Relationship:** Endodontists understand the treatment manager role of dentists.
- **Collaboration works:** Dentists broadly appreciate their working relationships with endodontists.
- **Good business:** Referring root canal treatment to an endodontist benefits the dentist's patients and practice.

**Step 1:** Brainstorm key concepts, statements, ideas and points of view that immediately come to mind when you consider how your practice delivers for dentists on partnership.

**Step 2:** Identify (through existing materials, research, numbers you keep, conversations, etc.) key details you have or could get that speak to partnership and/or support the various key points of view you arrived at [in Step 1].

- Facts:
- Examples:
- Anecdotes:
- Analogies:
- Third-party testimonials:
- Personal experiences:
- Stats/research:
- Other:

**Step 3:** Organize information from Steps 1 and 2 by 1) prioritizing information in order of what you would consider to be most to least compelling to a dentist regarding partnership and 2) group details from Step 2 with key concepts from Step 1. [Note: In some cases, a key detail may help in identifying a broader concept that may become a message or key supporting point.]

**Step 4:** Write the PARTNERSHIP key message with 3 support points, keeping in mind you want language and information that is 1) compelling, 2) concise, 3) colloquial and 4) credible.

## Questions & Answers Worksheet

Following are questions in the categories of 1) expertise, 2) patient satisfaction and 3) partnership you might get from dentists, patients and others along with optional answers. Customize responses to these based on your practice and personal experience, and develop other potential questions by doing this:

1. Review questions in the category.
2. Identify any details you would personally add to respond to each question.
3. Determine if there are other questions you get in this category you'd want to be prepared to respond to. Add those and your proposed responses.

### Expertise Q&A

**1. Q: Many general dentists end up getting similar root canal training as endodontists through continuing education. Shouldn't those dentists be able to perform most root canal treatments?**

- It's a question of dentists assessing when to do the procedure and when to refer.
- +
- Endodontist have 2-3 years of advanced training and perform root canal treatment almost exclusively (25 per week vs. 2 for typical general dentist).
- AAE tools that help with assessment: *Case Difficulty Assessment Form and Treatment Options for the Compromised Tooth Decision Guide*.
- Other:

**2. Q: How do you know when a general dentist can do a root canal versus when it needs to be done by an endodontist?**

- AAE tools that help with assessment: *Case Difficulty Assessment Form and Treatment Options for the Compromised Tooth Decision Guide*.
- Other:

**3. Q: How common is it for dentists to refer to endodontists?**

- Dentists regularly rely on endodontists as their partners in patient care.
- +
- In a typical year, 68 percent of general dentists refer more than 10 percent of their patients who need a root canal to an endodontist.
- 20 percent of dentists refer 90 percent or more of their root canal patients.
- Other:



- 4. Q: Are you aware of dentists who knowingly perform root canal treatment they believe should have been referred to an endodontist?**
- A recent study of general dentists found that one-third acknowledged they've performed root canal treatment that should have been referred to an endodontist.
  - +
  - What's most important is helping dentists make those calls based on thoughtful, clinical consideration that is in the best interests of the patient.
  - AAE tools that help with assessment: *Case Difficulty Assessment Form* and *Treatment Options for the Compromised Tooth Decision Guide*.
  - Other:

**5. Q:**

**6. Q:**

## Patient Satisfaction Q&A

### 1. Q: How can an endodontist help general dentists with patients who are reluctant to have a root canal?

- A dentist partnering with an endodontist can put patients more at ease.
- +
- Pain is the top reason adults avoid the dentist, and root canal treatment is most feared.
- When a dentist refers a patient to an expert endodontist, 90 percent of those patients end up satisfied.
- Other:

### 2. Q: Do endodontists have a higher success rate when it comes to performing root canal treatment?

- Consumer research shows a very high satisfaction rate among patients and even dental educators who have had a root canal performed by an endodontist.
- +
- Research has found endodontic treatment was significantly more successful when performed by an endodontist based on a comparison of survival of teeth following endodontic treatment.
- Other:

### 3. Q: Isn't it more cost-effective for a patient to simply let the general dentist perform root canal treatment?

- Actually, just the opposite may be true...endodontists can save patients time and money.
- +
- Endodontists have the expertise to do everything from the most common to most complex root canal treatment, diminishing the need for retreatment.
- While some complex treatments certainly require more than one visit, most root canal treatment can be completed by endodontists in a single appointment.
- Endodontists work provides patients with a solid foundation for crowns and other restorative work, reducing the likelihood of future complications and costs.
- Other:



**4. Q: What if patients simply find it more comfortable and convenient to have the dentist they know at the location they always go perform a root canal?**

- The ultimate comfort for a patient is knowing they are getting the best possible care for their particular dental situation.
- +
- Their dentist has the opportunity to make a choice about whether to refer based on a unique assessment of that person's particular case.
- Endodontists have the expertise to do everything from the most common to most complex root canal treatment, diminishing the need for retreatment.
- While some complex treatments certainly require more than one visit, most root canal treatment can be completed by endodontists in a single appointment.
- Other:

**5. Q:**

**6. Q:**

## Partnership Q&A

### 1. Q: **Isn't there a financial incentive for general dentists and endodontists to compete for root canal treatments?**

- Providing the best care to patients is the greatest incentive for all dental professionals – personally, financially and as a duty to provide optimal care to patients.
- +
- Patients appreciate knowing a dentist has partners who specialize in more complex procedures.
- Happy patients are more loyal to their dentist, which results in stronger referrals and a steadier stream of repeat visits. So in that sense, yes, there is a financial incentive, but it is for dentists and endodontists to partner together.
- Other:

### 2. Q: **As a dentist, my concern is that an endodontist – like other dental specialists – may not appreciate that I refer a patient for a procedure, and that person's total dental care is in my hands.**

- Dentists and endodontists enjoy an unusually strong, positive relationship.
- +
- 94 percent of dentists said they have a positive or very positive perception of endodontists and the care they provide.
- That largely could be credited to the fact that endodontists understand the treatment manager role of dentists and are respectful of requests to do everything from providing timely reports and radiographs to referring patients back for restorative treatment.
- Other:

### 3. Q: **How have you seen the dentist/endodontist partnership work?**

- In my practice, that partnership is apparent in everything from how I am respectful of a dentist's requests to provide timely reports to how I refer patients back for restorative treatment.
- +
- Dentists and endodontists enjoy an unusually strong, positive relationship.
- 94 percent of dentists said they have a positive perception of endodontists and the care they provide.
- Other:





**4. Q: Would you say dentists who choose to do the majority of their own root canal treatments could end up actually losing money? Essentially, is there a financial disincentive?**

- You can't generalize about all dentists, but we do know some key facts.
- +
- In a study of general dentists, 88 percent said work performed by endodontists is worth the cost.
- The time it takes a dentist to treat/retreat and have dental assistants support root canal treatment can significantly diminish the value of performing those procedures.
- Complications due to endodontic procedures are the second most common source of malpractice complaint against dentists.
- Dentists may be in a position to increase scheduling of other types of procedures they do even more efficiently by referring more root canal treatments, thereby improving their bottom line.
- Other:

**5. Q:**

**6. Q:**



## **Introductory Letter for New Dentists Template** – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

On behalf of [name of your practice], we would like to cordially welcome you to the community. We look forward to partnering with you and your staff to provide patients with exceptional dental care and put them at ease when they need to see an endodontist.

In addition to providing patients with a specialty consultation, we have a variety of services to meet their needs, including:

- Endodontic treatment and retreatment
- Endodontic surgery
- Treatment of cracked teeth
- Treatment of traumatic dental injuries

As we consider treatment options for a patient, we work very closely with you as the patient's dentist and treatment manager. Emblematic of that, you can expect timely reports from our team and that we will refer patients back to you for restorative treatment.

At [name of practice], we use the most up-to-date technology and continually seek educational opportunities to ensure we remain abreast of the latest techniques and treatment options in endodontics.

We'd like to invite you to stop by and take a tour of our facilities. Does the week of \_\_\_\_\_ work for you? Someone from our office will call to follow-up.

We look forward to meeting you and hope you will consider our practice when referring patients for endodontic treatment.

Sincerely,

[Endodontist signature]

[Endodontist name]



## Introductory Letter for Established Dentists Template – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

On behalf of [name of your practice], we would like to share with you some of our new and updated materials that reflect how we want to continue working with you and caring for your patients. We've appreciated partnering with you and your staff to provide patients with exceptional dental care and put them at ease when they need to see an endodontist.

As you may know, in addition to providing patients with a specialty consultation, we have a variety of services to meet their various needs, including:

- Endodontic treatment and retreatment
- Endodontic surgery
- Treatment of cracked teeth
- Treatment of traumatic dental injuries

As we consider treatment options for a patient, it's important that we work closely with you as the patient's dentist and treatment manager. We hope you've gotten a sense of that in everything from how we deliver timely reports and refer patients back to you for restorative treatment.

Please feel free to let me know personally if there's anything we do to be a better work with you. We look forward to continuing the strong partnership we've begun.

Sincerely,

[Endodontist signature]

[Endodontist name]



**Testimonial Release Form Template** – on practice letterhead

[Note: Before collecting testimonials for marketing purposes, make sure you have a form that gives you the legal rights to use someone’s testimonial. See template example below.]

**[Practice Name]**  
**Testimonial Release Form**

I, \_\_\_\_\_, understand that (Practice Name) is collecting from me protected health information, specifically information relating to root canal treatment. I authorize (Practice Name) to provide this information, including my name, photographs, videotape and audio recordings to media (print, television, radio, internet or other electronic media).

This authorization is effective today (insert date) \_\_\_\_\_ and shall remain in effect indefinitely. I understand that at any time I can revoke (Practice Name’s) right to use information relating to my health.

**I HAVE CAREFULLY READ ALL OF THIS RELEASE, AND I FULLY UNDERSTAND ITS CONTENTS.**

Participant Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Referral Slip Template** – on practice letterhead

**Referral Slip**

[your name], D.D.S.  
[address]  
[city, state zip code]  
Phone: [##]  
Fax: [##]  
Email: [information]

Date: \_\_\_\_\_ Patient's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Tooth #: \_\_\_\_\_ Date/time of appointment: \_\_\_\_\_

**Treatment Required:**

- Evaluation Only
- Root Canal Tx
- Re-Tx
- Surgical Tx
- Post Space Preparation; plans include:
- Post and Core Build-up
- Other: \_\_\_\_\_

Referred by: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Remarks:

(OVER FOR MAP)

## Endodontist Bio Template

To create your endodontist bio, carefully review and draw on your **KEY MESSAGES** document that includes key facts for information unique to you. (For solo practitioners, the practice messages are yours also, though you want to further personalize your bio as much as possible.) Be sure to keep your bio as brief as possible; typically, the best length is no more than two-thirds of a page or less with paragraphs typically no more than three to five sentences or bullet points. As with your key messaging, aim for content is compelling, colloquial, credible and concise, and evaluate your bio after you have completed a draft against these criteria. Following are potential key bio elements:

[**Head Shot:** Professional photo in your clinical wear]

[**Name/Title**]

[**Optional Descriptor:** Feature something that headlines key positive attribute(s) that would appeal to dentists in a phrase; for example: “Only Board-certified endodontist in [X area],” “Former dentist who is a strong partner to dentists,” or “Endodontist who has achieved 99 percent patient satisfaction”]

Content below can come in the form of facts, statistics, quotes from the endodontist or third parties (*e.g.*, patients, dentists), anecdotes, analogies, examples or other supporting proof points.

### [**Graph 1: Introduction/Summary**]

Think of this like the lead paragraph of a news article in the newspaper. If someone reads nothing else but this one paragraph about you, they should feel like they fundamentally know what the “story” is – in this case, your personal story and why you should appeal to general dentist referrers.]

[**Graph 2: Expertise** information to include content such as:

- Education (degrees and universities) and key certifications (as unique/relevant)
- Awards and professional societies/leadership
- Key thought leadership (*e.g.*, lectures, white papers, etc.)
- Other relevant professional experience (*e.g.*, former dentist, professor, etc.)]



[**Graph 3: Patient Satisfaction** information to include content such as:

- Ways you accommodate patients (*i.e.*, scheduling)
- How you advance prep/review patient cases
- How you explain/educate patients on treatment
- Personal demeanor and style
- Patient testimonials]

[**Graph 4: Partnership information** to include content such as:

- How you collaborate on patient treatment plans
- Your responsiveness such as being timely with reports and films
- How you serve as a consultant and are available for second opinions
- How you refer patients back for restorative treatment]

[**Graph 5: Personal Notes** to include content such as:

- Extra-curricular activities
- Volunteer service
- Family
- Personal interests]



## Open House Follow-Up Thank You Letter Template – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

Thank you for taking the time to come to our [practice] open house on [date]. We enjoyed meeting and speaking with you about [refer to a specific topic of discussion during the event]. We hope you enjoyed the tour of our facility and learning more about the services we provide.

Our partnership with dentists like you is critical to the delivery of quality dental care for our patients. We would welcome the opportunity to meet with you again or answer any questions you may have.

We are open to your suggestions and requests that may help us better partner with you and serve your patients. Please let us know if you have ideas for ways we can improve and sustain our quality of care, patient service, communication and relationship with you.

Feel free to call me any time if you have specific questions, requests or concerns relative to how we are working with you or serving your patients.

Sincerely,

[Endodontist signature]

[Endodontist name]



**Dentist Feedback Letter Template** – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

Thank you for selecting [practice name] to meet the endodontic needs of [patient's name]. We provided [type] endodontic treatment on [date] and referred the patient back to your office for [his/her] post treatment follow-up.

Patient care and comfort are our top priorities. At [practice name] we continually pursue opportunities to enhance our knowledge and skills while staying abreast of the latest techniques in endodontics. We listen carefully to the oral health care concerns of our patients so we will be able to answer any questions that arise regarding treatment.

I would welcome the opportunity to meet with you or to hear any suggestions you may have to help me better partner with you and serve your patients. [If this is a first-time referral: I have enclosed a copy of my practice's Dentist Feedback Form and would greatly appreciate your response.]

Please feel free to call me any time if you have specific questions, requests or concerns relative to how we are working with you or serving your patients.

Sincerely,

[Endodontist signature]

[Endodontist name]

## Dentist Feedback Form Template – on practice letterhead

### Following is sample text for a feedback form:

1. Rate overall patient satisfaction with their endodontic treatment experience at [practice name], with 1 being “not satisfied” and 5 “very satisfied.”

**1      2      3      4      5**

2. Do patients seem to understand the endodontic treatment they received from [practice name]?
  - A. Patients have a thorough understanding of their treatment
  - B. Patients are sometimes slightly confused about the treatment received
  - C. Patients tend not to have a good understanding about treatment received
3. What can our staff do to better serve your patients? (Choose all that apply).
  - A. Get familiar with patient cases in advance
  - B. Provide consultation about the treatment patients are receiving
  - C. Educate patients about endodontic care in general
  - D. Exhibit a calm, caring demeanor
  - E. Accommodate patients in scheduling
  - F. Explain office policies/procedures/insurance
  - G. None of the above
  - H. Other:
4. What can our staff do to better partner with you? (Choose all that apply).
  - A. Collaborate on patient treatment plans
  - B. Be timely with reports and films
  - C. Be available for second opinions
  - D. Refer patients back for restorative treatment
  - E. Simplify the referral process
  - F. None of the above
  - G. Other:
5. Please provide any explanatory comments or additional suggestions:

**Save the Date Invitation Guide** – for CE course/education seminar

For the title/headline on the invitation, consider the single most important aspect or combination of things that will attract dentists to attend. For instance, if it's a pain management course, simply cite that as well as anything else that is uniquely appealing about this opportunity.

Whether it's a staffer or local freelancer, keep in mind a few key design principles: 1) Achieve dominant visual elements (e.g., headline or photo) that draw the reader's eye by making them larger in contrast to other things; 2) less is more; after the first draft, see what words you can tighten or cut that aren't critical; and 3) leave "white space"– in other words, don't try to cram too much, into the invitation, and allow for extra room around the edges that allows the design to "breathe."

**[Descriptive Course Title/Headline]**

*[Brief Sub-head Descriptor for Further, Key Context]*



**[YourDDS Logo]**

**[WHO]:** The featured speaker(s) with option to include a phrase that further credentials those individuals if it that context is uniquely compelling]

**[WHAT]:** Additional and/or reinforced detail from headers about what the course will cover]

**[WHERE]:** Actual address/room # plus optional directions/landmarks if location is difficult to find]

**[WHEN]:** The start and end time]

**[WHY]:** Optional additional selling point(s) about why this course is so compelling for dentists to attend]

**[OF NOTE]:** Briefly include other necessary, key information such as whether meal is being served, number of CE credits, etc.]

**[RSVP]:** Name, phone number and email contact information for invitee to respond to]

Visuals can help make an invitation "pop." Consider including a practice photo, presenter headshot(s), graphic, consumer depiction, clinical case chart or some other visual depiction that relates to the course. A practice logo could be a primary or secondary visual on the invitation as well.

Pick a smaller base size, such as a post-card or half of an 8½ x 11 sheet. Consider opting to mail it directly (without envelope) with addressee and postal information on the opposite side.



## Networking/Education Seminar Invitation Template – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

I want to personally invite you to attend the [title] presentation on [date]. I will be hosting a session to provide education on [general topics] for [audience type]. I think you will find the presentation to be informative and the event to be a good networking opportunity. Additionally, refreshments will be provided.

- **What:** An education session on [topic]
- **When:** [Beginning and ending times; breakout times if agenda includes a separate lunch or networking opportunity]
- **Where:** [Location Address and Room #]
- **Other Details** [Offer additional details, including directions to the location or a website where such information can be found]
- **RSVP:** Please RSVP by [Date] to [Name] at [phone number and/or email address]

I hope you are able to attend. Please extend this invitation to others who you think may enjoy this session. I greatly appreciate your support, and I look forward to seeing you.

Sincerely,

[Signature(s)]

[Endodontist/presenter(s) name(s)]

[practice name, practice contact information (email, phone, website)]



## Networking/Education Seminar Evaluation Form Template

– on practice letterhead

### Following is sample text for a presentation evaluation form:

1. On a scale of 1 to 5, with 1 indicating “not valuable” and 5 indicating “very valuable,” please rate the value of the following:

Presentation topic:	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Presentation content:	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Presentation delivery format:	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

2. On a scale of 1 to 5, with 1 indicating “not satisfied” and 5 indicating “very satisfied”, please rate the following:

Presenter(s):	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Location of Event:	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Overall Experience:	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

3. Following this presentation will you be more likely to seek consultation from an endodontist in the future?

**Yes**     **No**

Please explain:

4. Did you learn anything new?

**Yes**     **No**

Please explain:

5. Please provide any explanatory comments or additional suggestions:



## Networking/Education Seminar Thank You Letter Template – on practice letterhead

[Date]

[Name]

[Title]

[Business]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

I want to personally thank you for attending the [title] presentation on [date]. I appreciate the opportunity to provide an overview of [topic], and I hope you found the content to be beneficial.

At [practice name] we believe the dentist-endodontist partnership is a vital component to quality patient care, and we greatly value your expertise and perspective. I would welcome the opportunity to meet with you individually to answer any questions you may have or discuss more about my practice and our services.

[If you did not distribute evaluation forms at the presentation: I have enclosed a copy of a presentation evaluation form and would greatly appreciate your response.]

[If a new potential referrer: I have enclosed a copy of my practice brochure.] Please feel free to call me any time if you have specific questions or requests. Again, many thanks for your attendance and participation in the [title] presentation.

Sincerely,

[Signature(s)]

[Endodontist/presenter(s) name(s)]

[practice name, practice contact information (email, phone, website)]



## Alma Mater Letter Template – on practice letterhead

[Date]

[Name]

[Title]

[Dental school]

[Address]

[City, State Zip Code]

Dear [Title Last Name]:

As a [year] graduate of [Dental School], I appreciate the strong foundation [School] provided for my [dental training/training in endodontics]. Not only did [School] teach me the skills I would need to be a successful practitioner, but it also helped me understand the importance of a strong partnership between general practitioners and endodontists.

To continue to foster this relationship, I would like to offer to speak to your dental students. I would be happy to present on a topic such as [topic ideas] and am otherwise open to your requests for presentation topics.

I look forward to serving as a resource for your staff, faculty and students and sharing my expertise with the institution that helped launch my dental career.

Sincerely,

[Endodontist signature]

[Endodontist, Degree, Year of Graduation]

[Practice name, practice contact information (email, phone, website)]

## Acknowledgements

The AAE Professional and Public Relations Committee oversaw development of the *Marketing the Endodontic Practice* series as part of the Association's Awareness Campaign program. *Marketing the Endodontic Practice Part I: Referral Outreach* presents concepts and techniques tailored specifically for endodontic practices' marketing to general dentists.

This publication is not intended or offered as legal or other professional advice and is for informational purposes only. Readers of this material should consult their own legal counsel or other qualified professional for such advice.



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