On the day I joined Millenium Management Services as a consultant, I perused the library in the office, eager to learn everything at once. One book, in particular, caught my attention. It was entitled “Insider Information”. Intrigued by what secrets I might glean from its pages, I flipped through it. Quickly, of course; it was my first day, after all. In the book there were all sorts of tips and tricks for making investments, purchasing homes, and other secrets aimed at helping the reader succeed at different tasks he or she might face over the course of life. It’s been five years now since I picked up that book, but its premise has stuck with me. If there was one insider tip I could give to an orthodontist, one trick that would make the most impact on the overall success of their practice, it would be the magic behind developing a doctor time template.

I use the word magic on purpose because I cannot count the number of times I’ve heard from a client, or office manager, “Ryan, here is what we need; now you do your magic.” Once a practice gets on a doctor time template, it feels like the consultant performed a magic trick, but many doctors will be happy to know that what we do is not, in fact, magic. A doctor time template uses a very straightforward scientific procedure that works to maximize the potential of a practice. It’s a formula that, if created and delivered properly, will carry any practice to the highest level of efficiency and growth. It’s easy to understand how a template will help with efficiency, but truly sustainable growth comes from maximizing the other systems in your practice.

Let’s talk about those other systems for a moment. Too many times I have seen practices that have invested time, money, and energy into developing their marketing, new patient enrollment, and other very important management systems, but still cannot reach their goals. When I observe the practice, I see the doctor going into an exam while leaving four patients waiting in the clinic for 15 minutes. Or, even worse, the new patient waits for a long period of time because the doctor is too busy trying to catch up in the clinic. Some believe the solution is to only do new patient exams grouped together on certain days, but this does not allow the TC enough time to effectively sell the case or keep the assistants busy, while forcing the practice to cram in its short appointments into fewer afternoons. A finely tuned new patient process will reach its true potential once the practice can stay on time with every patient. Marketing will reach its true potential once team members have the time necessary to take care of their patients, and treat each patient as if they are a friend entering their home. Build the foundation for success with a schedule that is based on effective use of the most precious resource of doctor time, and you will live with no regrets!

A doctor time scheduling system is the ultimate tool that will maintain and encourage growth as it becomes the foundation for all practice management. A practice grows to the capacity of its schedule and then stops growing. Why would patients and the area dentists refer to a practice they perceive is full or overflowing with patients? A busy practice that stays on time will continue to encourage referrals and growth because no matter how large they become they meet their patient’s needs on time.

There is not a specific number of patients per day that will dictate if a practice can stay on time. I have worked with practices that had trouble staying on time with 25 patients per day, and others that maintain less than an average five minute wait time while seeing 120 patients per day. The
number of patients per day is only one of many factors that play into developing the ideal doctor time template and scheduling system that is customized for each practice to achieve maximum efficiency while staying on time.

Abraham Lincoln once said, “If I had eight hours to chop down a tree, I would spend six sharpening my axe.” Too many doctors go about their days using a dull axe with ineffective systems, and wonder why they have stressful days and leave the office exhausted. If this sounds like you, I would encourage you to take the time to sit down, sharpen your axe, and do the work to develop the templates, or consider hiring an experienced consultant who will help you develop the ideal scheduling system for your practice.

Here is a quick look at the magic behind designing an On-Time Doctor Time Scheduling System:

Step #1: Go through all your major procedures, step-by-step, and determine the time it takes for each assistant/doctor/assistant step. A great way to do this is to have a team member document the time for each step of a procedure using a stop watch, along with utilizing the Ortho2 Light Bar to track the overall time each procedure takes.

Step #2: Next combine treatment procedures that have similar assistant/doctor/assistant time into a class. Many practices have up to a hundred different treatment procedures, so keep your focus on the ones you do daily. Try to break these procedures down so that they will fit into a maximum of 15-22 procedure classes with like kind assistant and doctor time. Simplicity is vital to making the system work. Only larger bondings and debondings may have fewer than two codes a day on your templates, as the more like procedures can be combined into one scheduling class, the more flexibility there will be to accommodate patients. Any procedure that is performed one time per day or less should be linked to another class for easy substitutions.

Step #3: Now determine how many of each code you need per day. The codes may identify the specific procedure that is to be done, and each code is assigned to a class which can hold a multitude of specific procedure codes. Make sure to add some extra routine codes to allow for extra room for growth, rescheduling patients, and emergencies. Ortho2 has a great Kept Procedure Report that will inform you how many of each procedure you performed for a given time period. I recommend doing your calculations based on the last 4-12 months of procedure data and dividing the procedure count by the number of days worked during the specified time period of the report. If you saw 165 Initial Bondings in 90 days then you need 2 IBs a day in your model template, which gives you a little room for growth. Always round up if possible.

Step #4: Finally, begin using the assistant/doctor/assistant procedure times you determined. Much like puzzle pieces as you put together your puzzle, juggle the doctor’s time so that the doctor is not needed at two places at one time, or with very little overlap. Be sure you incorporate enough codes in your template to meet the needs of your patient load each day. The biggest failure I see as a specialist in Doctor Time scheduling is that practices build templates with most of the codes and doctor time allocated but then cannot figure out what to do with the last 6-8 codes; so they put them into an open chair with no assistant to work them and no doctor time available to see the patient. This is where the consultant’s help is invaluable to teach a practice how to get to the next level of efficiency and effectiveness with their patients.

The templates are then entered into your schedule to form a blueprint as to how the practice will schedule patients to have a great chance at staying on time each and every day. In most cases, you will have to use a pencil and paper, or a Microsoft Excel spreadsheet, to draw out the codes and observe where the doctor time conflicts may be. This job can be greatly enhanced by the Millenium Template designer, a program that we have used for the past decade to greatly simplify template design and more effectively communicate with our clients. We build the templates with them in their practices and coach them from a distance.

Something I hear myself saying time and time again is, “The templates don’t run themselves!” Many practices do a good job of implementing the templates into their software, but fail to truly implement the second piece of the puzzle which is the commitment and discipline necessary to stay on time. Having the doctor and entire team to sticking to the guidelines of the system is just as important as the templates themselves. A well-trained team is able to deal with all the scheduling issues that can arise in a day, and such a team can truly excel in making their practice a success.

So, what about that patient who shows up 30 minutes late with three broken brackets? Or what do you do when the patient comes in and the doctor wants to reposition three brackets when they were only scheduled for a twenty-minute procedure? We try to expect the unexpected, and without fear stick to some basic guidelines that will help every practice stay on time when things do not go according to plan. Discipline is the glue that holds any system together.

So, there it is, the simple magic behind building a Doctor Time schedule. Without the ability to effectively manage your daily practice schedule you are limiting your potential and taking much of the fun out of being a part of one of the most rewarding professions in the world. Take the time and energy to sharpen your axe so that you can cut through your day
efficiently, thereby reducing the stress on the doctor and staff, and encouraging growth and patient referrals. Get on time and stay on time, and then all of your other goals will quickly fall into place.

About the Author

K. Ryan Alexander is a senior consultant with Millenium Management Services and for the past five years has quickly developed a large base of happy, satisfied clients using proven Millenium Systems.