



ANSWER KEY

Quiz for Comprehension - Segment Eight

1. What is the take-away?

- A) A closing message from the doctor to take his time and treatment off the table for the parent or patient.
- B) An ending message to the child that they aren't going to receive treatment.
- C) A message that the parent gives their child that if they don't keep their braces clean, they will take something away from them.
- D) A closing message from the treatment coordinator to the parent that they are not being accepted for treatment.

Although rarely used, the takeaway is an effective tool to quickly help patients who truly cannot afford your services find another office that is reputable but cheap.

2. What isn't an apples to oranges comparison?

- A) Lifetime Guarantee vs. No Lifetime Guarantee.
- B) Late Hours vs. No Late Hours
- C) Free Whitening at the End of Treatment vs. No Free Whitening.
- D) Doctor 1 is Board Certified and Doctor 2 is Board Certified.

Apples to oranges comparisons should clearly distinguish you from your competition. Find what you do that no one else does and be certain it is a tremendous value and benefit to your patients and their parents. Then, talk about these things when mom or dad tries to compare you to another orthodontist that is "cheaper."

3. What is Follow Up?

- A) When you set a time to call mom or dad to answer their questions before starting their child in treatment.
- B) When you tell the doctor why the patient didn't get started today.
- C) When you tell the doctor that the patient got started with treatment today.
- D) When the receptionist asks the mom before she leaves why she didn't get her child started with treatment today.

Even if the patient or parent fail to agree on starting treatment or their contract today, you can both agree to do something. Agree to schedule a phone call where you will call the parent or patient in order to answer any questions they might have and to help them take the next step towards a spectacular smile and healthy bite.

4. With whom do you use the take away?

- A) A mom who says she wants to start treatment with your office but not today.
- B) A dad who says he needs to talk to his ex-wife before committing to treatment
- C) A patient who says they have a few other consultations to go to and heard the other offices were cheaper.
- D) A mom who says she has more questions about the treatment plan first.

The takeaway is only used in the rare circumstances where parents are adamant on going to the cheapest orthodontist in town. Let them go but do it ethically and only after fully educating the parent on the difference between your office and everyone else in town.



5. When is it okay to refer to another treating orthodontist?

- A) When the parent absolutely can't afford the treatment in your office and needs the cheapest option available.
- B) When the parent and patient are absolutely not a good fit for your office because of attitude or unreasonable expectations.
- C) Neither A nor B.
- D) Both A and B.**

You can refer to a colleague you trust and respect but whom also has cheap fees. This is done in rare circumstances where parents are adamant on going to the cheapest orthodontist in town. Let them go but do it ethically and only after fully educating the parent that if they insist on going somewhere cheap, at least they should go somewhere reputable.

6. What is the biggest buying factor for most patients and parents?

- A) Trust.
- B) Money.
- C) Convenience.
- D) It varies from patient to patient and parent to parent.**

Although our market survey of over 15,000 parents resulted in a prioritization of trust, then convenience then price, you do not know what each individual patient or parent is going to value more. Therefore, it is important to listen to buying signals and objections and to make sure you cover them before the patient leaves the office. Otherwise, the patient cannot make an informed decision and will often revert to judging you based solely on price.

7. **How often will the doctor need to use the takeaway, on average?**

A) 1-2%

B) 5-7%

C) 10-12%

D) 15% or more

The takeaway is a rarely used strategy but extremely effective when necessary.

8. **If a patient or parent is reluctant to discuss fees, do you still present payment options?**

A) No, it's a waste of your time and their time.

B) No, they are already resistant to treatment.

C) **Yes, you can work through the objections with the patient or parent.**

D) Yes, you must focus on the full investment amount even if they avoid the topic.

Because so many patients and parents have no other way to judge an orthodontist in their mind, until they come to your office where you will present a proper treatment plan and diagnosis, their experience with other dental and health professionals dictates that reviewing the fees before they leave is important to helping them make an informed decision.



9. **Why must you record your new patient presentation and review the film?**
- A) Because the doctor cannot trust the treatment coordinator.
 - B) So that the doctor and the treatment coordinator can improve their skills.**
 - C) So the lead treatment coordinator can point out what the doctor and other treatment coordinators are doing wrong.
 - D) So that the doctor has proof of poor performance.

Professionals watch film. Period. Athletes, artists, performers, politicians, authors and even good teachers all watch film when they are presenting or performing. There is no other objective way to truly measure one's performance. Be sure to allow each person in the film to review their own performance, then meet as a team to review. The doctor should not go to the treatment coordinator with suggestions for improvement if the TC has not yet had time to review his or her own performance. The same goes for associate doctors.

10. **Why should the treatment coordinator keep an objection list?**
- A) To discover patterns in no-sales.
 - B) To improve scripting and help answer common questions.
 - C) To share with the team areas for improvement on presentation.
 - D) All of the above.**

Maintaining and up-to-date objection list is important for the TC to help detect patterns in why parents or patients are saying no to treatment. There are seasonal variations, geographic trends and overall market shifts that must be observed and planned for, in order to achieve the best results. Scripting and team improvement can only be accomplished when the most-recent and most-common objections are handled by everyone in the office.