

Use as a guide to better understand how you conduct your current diagnostic sequence.

- 1) Do you spend more than 15 minutes of actual chair time during a full examination?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 2) Do you check the patient's bite registration during every full examination?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 3) Is your average treatment plan (total of diagnosed tx, not necessarily what is presented) more than \$1,000?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 4) Do you take study models during the full examination?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 5) Do you conduct a full examination on all recall patients every two or three years?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 6) Are you commenting on every tooth you see during the full exam?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 7) Are you looking just to "fix things" in the patient's mouth, and not including all/any enhancements for the patient's overall health and well-being? ☐ Almost Always ☐ Sometimes ☐ Rarely
- 8) Do you give the patient at least one additional option for treatment during the full examination?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 9) Are you and/or your patient advocate using intra-oral photos or camera during the full examination?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 10) Are you addressing the patient's chief complaint clearly, and tying it in with other treatment conditions you see?
☐ Almost Always ☐ Sometimes ☐ Rarely
- 11) Have you and/or your patient advocate stated "why" certain treatment is being discussed, as well as what could possibly result if no treatment is begun? ☐ Almost Always ☐ Sometimes ☐ Rarely
- 12) Are you listening and looking for "cues" from your patient advocate regarding points of concern/objection by the patient? ☐ Almost Always ☐ Sometimes ☐ Rarely