

Advanced Practice

MANAGEMENT

Shelly Ryan RDA, Dental Management Consultant
Website: www.AdvancedPracticeManagement.com
Shelly@AdvancedPracticeManagement.com • 952-921-3360

UNSCHEDULED TREATMENT CHECKLIST

For the Month of: _____

Responsible person: _____

Number of patients with incomplete treatment (1 month): _____

- Are calls made 1 week after diagnosis? _____
- Role play phone call.

Number of calls made: _____

Number of patients scheduled from calls: _____

Number of patients declining treatment: _____

Reasons:

Total \$ of incomplete work:

Doctors _____

Hygiene _____

Total Scheduled _____