Presents:

Recall, Recare, Who Really Cares?

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Definition of Recall
1. To call back; summon to return:
   * This is what it was intended to mean in the dental industry

Definition of Recall
1. The act or possibility of revoking something.
2. Also called a “callback”: a summons by a manufacturer or other agency for the return of goods or a product already shipped to market or sold to consumers but discovered to be defective, contaminated, unsafe, or the like.

Definition of Recare
No such word in the dictionary

Definition of Care:
1. Serious attention; solicitude; heed; caution: “She devotes great care to her work.”
2. Protection; charge: “He is under the care of a doctor. “
3. To feel concern about: “He doesn’t care what others say.”
4. To wish; desire; like: “Would you care to dance?”

*Call it what you want. No right or wrong term. Just NEED to know what it is and why it is important

RECALL = One of many systems that run a dental practice
While all systems are important, some of the systems impact office success on a larger scale
The “Recall system” is a set of specific procedures that are put in place to ensure patients return to
the office at the prescribed interval. Without an effective recall system there are holes in the schedule,
loss of revenue and paying money out to employees while losing revenue, patients not receiving the
dental care they should be receiving to ensure oral/systemic health, loss of patients and a false sense of
security as to the number of patients a practice has.
In 24 Years of working in a dental office I have never have seen a recall system run effectively. I was
taught about the recall system when trained to be a consultant.
At Best: Front office person sends out “Recall Cards”. This is usually the extent of the recall system. May
make phone calls to those who are due and leave messages on answering machines. What happens to
the patients who do not respond to the recall card or phone message?

Purging Charts : All charts are kept in the cabinet and maybe haven’t been seen in years!!!! Many may
not really even be patients anymore.
ACTIVE PATIENT= a patient who is due to return for recall between today and one year from today
IN-ACTIVE PATIENT= an inactive patient has not returned for their recall appointment.
Important to apply year stickers to charts at the FIRST RECALL VISIT of the year and ONLY at THIS
VISIT. This gives a visual of which charts are REALLY ACITVE and being MAINTAINED. Purge
inactive patients from your active files. Purging is an ongoing process. Count all patient records
manually. (Note: Computer statistic on active patients typically is not reliable)
Active Chart Example The number of charts in file= 2420 which represents 42 months (last file purge
was approx 3.5 years ago). Number of ACTIVE Patients is 528.
Another way to think about it is...2420 patients came through the door and 528 of them have kept coming back on a regular recall basis. 1892 have not. That equals a loss of 45 patients per month for the last 42 months.

#1 reason patients do not return for recall is they don’t think they need a “cleaning”. We refer to appointment as a “cleaning” & patients clean their teeth every day. No urgency is built into returning. WE need to refer to our services as your “Professional Cleaning and Dental Examination”. WE need to determine a clinical reason the patient needs to return i.e. check the filling on the upper right, evaluate the amount of bleeding, perform oral cancer exam. When the patient knows there is something SPECIFIC they need to return for, rather just a “cleaning and a check up” they are more likely to come back to future visits.

**How to run the system effectively**

System needs constant work, but is typically delegated to whomever in the office that happens to have some time. Results in a poorly run recall system which translates in loss of patients, production and revenue.

Recall notices sent out to people with scheduled recall appointments
Short call notice developed and maintained
Every week of the month a different group is contacted:

- Week 1 Call due THIS month
- Week 2 Call due LAST month
- Week 3 Call due 2 months ago
- Week 4 Mail letters

Retention: Asking patient to contact office

Inactive: Telling patient they are being placed on the inactive list

All contacts to patient are documented preferably in the computer software.
At the least, all contacts or attempts made need to be written in the patients chart.

**Required Hygiene Time**

Many offices do not know how much hygiene time they need. If the schedule is booked, they feel they need to hire another hygienist and so on and so on. Then they end up with lots of hygienists and not enough patients! And LOTS of open time!

How many hours of hygiene the office needs a week is based upon the number of ACTIVE patients. It needs to be determined how much time it takes to see all the active patients. Then that is how much hygiene time is needed.

Determine the number of recall appointments needed for a year. For example:
1 Patient on 2 month recall x 6 = 6
17 Patients on 3 month recall x 4 = 68
91 Patients on 4 month recall x 3 = 273
419 Patients on 6 month recall x 2 = 838
Total = 1185

Recall Appointments (12 Months) + New Patients (12 months) + Initial Periodontal Therapy
Appointments (12 Months) + Re-Eval Appointments (12 Months)= Number of Hygiene Appts Needed
For One Year
Total yearly recall appointments needed= 1185
Total number of new patients for 12 months = 115
Periodontal appointments (active therapy and re-evals) needed 322

TOTAL APPTS: 1621

Total # of appointments needed= 1621

Number of Hygiene weeks available per year= 47.5

1621 / 47.5= 34 appts/week

Average of 8 patients seen per day 34/8

Hygiene days needed = 4.26

Makes it much easier to determine how many hygienists an office can employ and keep busy and
ensures there is enough hygiene time to accommodate all patients.

The efficiency of the offices recall system can make or break a practice. Educate yourself and team
members on how to run your system effectively. You will be glad you did!