The Organization for Safety & Asepsis Procedures (OSAP) has launched a new Web site at www.osap.org. The OSAP Web site is the gateway for accessing up-to-the-minute research-based information on infection control and safety in dentistry.

The site features charts, checklists, training tools, continuing education programs, news summaries and more. Much of the content is available to the public, but OSAP members are able to access special content and features.

A new social networking capability allows OSAP members to connect with each other, as well as follow the organization on Facebook and Twitter, view photos and videos on Flickr and YouTube, and subscribe to the RSS feed.

A Safety Mall offers products and services relating to infection control and includes downloadable materials for those with an immediate need. The new site features a fresh look and many new features.

Special content is available for speakers, consultants, dental professionals and others concerned about infection control and safety in dentistry. Visitors can also get information and register for events, such as the 2010 Infection Prevention Symposium, which will be held June 10–13 at the Hyatt Regency in Tampa, Fla.

The OSAP Web site is updated on at least a daily basis, but when pandemics, natural disasters or other breaking developments that impact infection control occur, the site is updated multiple times a day.

Visit www.osap.org frequently to stay current on fast-changing safety and infection control challenges.

About OSAP
OSAP is the Organization for Safety and Asepsis Procedures. Founded in 1984, the non-profit association is dentistry’s premier resource for infection control and safety information. Through its publications, courses, Web site and worldwide collaborations, OSAP and the tax-exempt OSAP Foundation support education, research, service and policy development to promote safety and the control of infectious diseases in dental health-care settings worldwide.

(Source: OSAP)
In 1980, when we took our first dentist as a client, almost all dental offices were routinely granting credit to their patients. If a patient/parent needed a few months to pay for his/her clinical treatment, a payment plan was usually allowed.

Thirty years later, things have clearly changed. Dentists today rarely grant credit because they don’t want to assume the risk. Patients are pushed to pay in full or to use third-party financing.

In fact, many of the practice management consultants who are active today are recommending their dental clients be “cash only” and only provide third-party financing (finance company, bank, credit card) for their patients.

The result is simply horrible rates of case acceptance, postponed/phased treatment, more single-tooth treatment than ever in the past, significant increases in failed appointments, a reduction in the number of new patient referrals and a net reduction in production per dentist hour worked in many practices.

This defensive behavior is unnecessary because credit granting, internal credit granting, is safer and more productive today than it has ever been in the past!

While choosing not to grant credit, to be a cash-only practice, solves some delinquency and cash flow problems, that policy often makes other problems worse. Failed appointments do not improve, and often become worse, because when money is tied to appointments, patients often find good reasons to postpone or cancel the appointments and, in more serious cases they simply become a “no show.”

Although collection rates are good, actual cash flow does not improve because of the single biggest problem with being a cash-only practice, weak case acceptance.

If your patients are not having you perform the work you have diagnosed, or if they only accept work covered by insurance, your production will be down and cash flow will be down as well. Ultimately, being a cash-only practice contributes to the biggest problem of all: poor referrals and weak new patient flow.

Let me note that there is no legal, ethical or moral reason why any dentist needs to grant credit. The only reason to grant credit is the obvious and practical one: You will have more patients who will accept more of your diagnoses.

Using risk identification and credit granting to build your practice

By Paul Zuelke

practices that routinely allow their patients monthly payments for their treatment have experienced significantly less of an impact from the economy than have the cash-only practices.

Appropriate credit granting is often the answer to building a consistently growing, productive and profitable practice. Of course, “appropriate” is the operative word. While you cannot afford to have your great patients postpone their treatment because of your financial policies, neither can you afford the financial loss and other problems associated with granting credit to the wrong patients.

Obtaining credit reports on patients was the answer to this dilemma in 1980, and it is still the answer today. The difference today is that learning a patient’s potential risk to the practice is much less expensive, less intrusive, less time consuming and much more accurate than it has even been.

The Zuelke Automated Credit Coach (ZACC) is a Web-based tool available from DentalBanc that has been specifically designed for the dental profession. ZACC evaluates stability, maturity and credit integrity in exactly the same fashion as a bank loan officer, but ZACC does it in a few seconds.

Once ZACC has evaluated your patient/responsible party, ZACC...