What do you say when a patient hesitates?

A free Treatment Coordinator practice sample

Dental Front Office Academy

Try the conversation before buying the course. The next two pages are actual excerpts from Treatment Coordinator Patient Conversations. They retain the original course page numbers 3 and 4.

1. Read the patient's concern and choose a response.
2. Try the independent assignment before reading its explanation.
3. Say your response aloud, then review it yourself or with a manager.

Want the full practice sequence?

The $79 one-time written course includes six lessons, a 16-page PDF, matching editable Word file, branching conversations, estimate exercises, a capstone and a ten-question assessment. Self-guided or manager taught. One practice location per purchase.

View the Treatment Coordinator course

Already own a complete format? It includes a shorter treatment workbook and companion resources. The expanded six-lesson standalone course is currently separate. Compare the scope before purchasing.

Original fictional training. Clinical decisions stay with the clinician and patient. Follow current office procedures and plan evidence for actual accounts. No patient information should be submitted with feedback.

Branching conversation Fictional case

The dentist recommended a crown. The patient says, “That’s a lot of money. It doesn’t even hurt.”

First response: “What would help most right now: going through the estimate, or having the doctor explain the recommendation again?”

Branch A Patient asks whether a filling would work.
Respond: “Let me bring that question back to the doctor before you decide.” Give the clinician the actual question. Do not say a filling will fail, that a crown is the only option or that the tooth will be lost unless those statements are explained by the treating clinician in this case.

Branch B Patient understands the recommendation but cannot pay the estimated amount now.
Respond: “Let’s look at what the office actually offers and the timing that may work for you.” Discuss only approved options and confirmed terms. Do not invent financing approval, interest rates, discounts or monthly payments. Clinical staging questions go to the dentist; the coordinator does not split treatment solely to fit benefits.

Branch C Patient says the previous estimate was lower.
Respond: “Let’s compare them so we can see exactly what changed.” Check the plan, fee, benefit assumptions, prior payments and any documented coverage update. Explain the supported difference. If the reason is not established, acknowledge that and name who will review it. Do not blame insurance or the patient without evidence.

Branch D Patient wants time to think.
Respond: “Of course. Is there a question we can help answer before you take some time?” If they want a later contact, agree on the method and timing under office procedures. Do not treat the absence of a booking as permission for repeated messages.

Ask for a useful next step

Once the relevant questions are addressed, a clear invitation is appropriate: “Would you like to look at appointment options?” If the patient agrees, confirm the next appointment’s purpose and the office’s preparation and financial instructions. If something remains unresolved, name it before scheduling creates a misleading impression that it has been settled.

“Great news, we can take care of that for you” works when responding to a supported administrative request, such as providing an updated estimate. It must not imply guaranteed insurance payment, an assured clinical result or an appointment that has not been confirmed.

Write a handoff another person can use

Document the patient’s stated concern, what was explained within your role, what was referred to the clinician or financial lead, the actual decision and the next owner/action. Use the appropriate record location under practice policy.

Useful fictional note: “Patient requests dentist explanation of filling alternative before deciding. Estimate reviewed as provisional; replacement history remains unresolved. Clinical lead to arrange discussion; insurance lead to complete history review before a revised estimate is presented. No appointment accepted during this conversation.”

Avoid: “Patient difficult; refused to buy.” It substitutes judgment for the information the next person needs. Do not document understanding, consent, a completed review or payer receipt merely because you intended to obtain it.

Independent assignment Answer before the explanation

A fictional patient says: “If insurance won’t pay, I’ll just do the cheaper treatment. Can you change it? Also, don’t call me at work.”

Write your response, name two different handoffs and explain what you would record. Then try the same situation with a patient who wants a written estimate but no follow-up call.

Explained answer

A sound response acknowledges cost and keeps the clinical choice with the dentist: “We can review the estimate and the questions about coverage. The doctor needs to discuss whether a different treatment is appropriate. I’ll also make sure your contact preference is recorded through our office process.”

The clinical handoff concerns the requested alternative. The financial or insurance handoff concerns the supported estimate and unresolved coverage—not a promise to obtain payment. Record the contact preference in the designated system and follow office procedures; do not simply leave it in an informal note where the next caller might miss it. In the changed case, provide the requested estimate through the approved process and respect the stated follow-up preference.

A response that changes the treatment or code to obtain benefits fails the role-boundary check. A response that promises coverage fails the accuracy check. A response that books a follow-up call despite the stated preference fails to reflect the patient’s decision.

Self-guided review

Write your response first. Speak it aloud and compare it with the explanation. Mark each item demonstrated, needs practice or unsure: concern acknowledged; clinical question routed; estimate qualified; contact preference respected; next owner/action named. Rewrite any missed part and repeat the changed case. Bring unresolved office-specific questions to your authorized lead.

Manager-taught review

Let the learner attempt both cases without seeing the answer. Ask what evidence supports each statement. If they make a promise or independently select treatment, stop and coach that specific point, then repeat with changed fictional facts. Record the observed behavior and next practice task, rather than declaring competence from a confident tone.