MGE Client Practice Action & Control Checklist

Checklist for Reopening for Elective Procedures

NOTE: This checklist is being provided as suggestions and ideas from which to improve your office. This is not to be taken as a guarantee that the information provided is appropriate to your practice. Each practice is individually responsible for ensuring that any system implemented complies with the applicable federal, state and local laws, rules and regulations governing the place in which your practice is located. These suggestions do NOT constitute legal advice. You should seek advice from your own legal advisors as to what is appropriate to implement in your practice, prior to implementation. MGE: Management Experts, Inc. is not responsible for any claims, real or otherwise, associated with this document or any part thereof.

Dear MGE Client,

This **Practice Action & Control Checklist** is a series of actions designed to help you prepare to re-open your practice for elective procedures when it is permitted by your state or area.

Please read through it and implement as soon as possible. If you need any assistance, contact us here at MGE at **(800) 640-1140.**

Best,
The MGE Team.

Note: We've used the term "Phase I" in this checklist to denote the first phase of the reopening process, in line with the guidance released by President Trump on April 16th. And while HOW a state reopens will vary by their circumstances, it seems most states are going to take a phased gradual approach to the reopening process. And while Canada has not officially released their reopening guidance, it is in the works, and we would imagine (based on what we're seeing in the US and the rest of the world), that it too will adopt a phased reopening process.

This checklist assumes that you have a hard-opening date for your area for dental practices to perform elective procedures. If dentistry in your area is limited to Emergency procedures only, with no specific reopening date in mind, we'd suggest reviewing our "Closed" Checklist to maintain your practice until your area opens up for elective procedures.

The US Federal Guidance, "Opening Up America Again," can be found here. https://www.whitehouse.gov/openingamerica/#phase-one

Keep in mind your state may have different guidelines to follow as they are issued – so keep an eye out.

BEFORE BEGINNING THIS CHECKLIST

1. **FIND OUT WHEN YOUR AREA WILL BEGIN OPENING:** To begin this checklist, the first thing you need is a hard, invariable reopening date for your area. Specifically, you'll need to know when you would be allowed to start seeing patients for elective procedures again. You'd find this guidance from your state government…again, try to get official word and not rely on the "news." Your state government website, as well as your state Dental Board (for how the latest government guidance applies to dentistry) should be able to provide the official information you need.

From here, the checklist is sectioned into three parts:

I. Two to three weeks prior to reopening
II. One week prior to reopening
III. We're open!

You'll definitely want the assistance of at least your Office Manager as you begin this checklist!

I. TWO TO THREE WEEKS PRIOR TO REOPENING:

Once you have a reopening date, you'll need to start preparing. These steps should help:

1. **UNDERSTAND THE CLINICAL AND INFECTION CONTROL GUIDELINES FOR PHASE ONE IN YOUR AREA:** Depending on where you practice, guidelines will affect more than just chairside patient interactions. They will affect how you interact with patients at the front desk, how many people can wait in reception and how your staff interact within the office. You may have pre-screening requirements with patients prior to them *entering* the practice. These guidelines may also affect how you run the doctor's and hygiene schedule. So, the **first** thing to do **is find out what they are!** Your dental state board should have these guidelines. Once an open date is announced, you'll want to get your hands on them ASAP! In addition, most states have appointed task forces to develop guidelines for reopening

businesses and these may include dentistry (deferring on clinical matters to the state board, or in some cases ADA guidance). As an example, Alabama's coronavirus task force recently turned a report into the Governor with guidelines for a limited reopening of business with a May 1st open date (note the Governor as of April 20th, 2020 had not commented/approved of this May 1st open date). The report indicates a protocol of dental practices that can be found on page 65.
The report can be accessed by clicking this link:

https://ltgov.alabama.gov/wp-content/uploads/2020/04/Reopening-Alabama- Responsibility-Phase-1.pdf

For additional information we also we have:

ADA Guidance
https://success.ada.org/~/media/CPS/Files/COVID/ADA_Interim_Mask_and_Face_Shield_Guideli nes.pdf?_ga=2.17327999.710892901.1587426438-1931546066.1585614157

CDC Guidance
https://www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html

And CMS (Centers for Medicaid and Medicare)
https://www.cms.gov/files/document/covid-flexibility-reopen-essential-non-covid-services.pdf

In any event, it's important to read up/stay informed so that you are **completely aware** of the changes you'll need to make in your practice when opening. The longer you have to prepare, the better. From this information you'll need be able to determine:

a. What type of PPE you'll need and in what quantities.
b. How your schedule will run.
c. The protocol for checking a patient in (and out).
d. Social distancing/space requirements in the practice with both patients and staff.

2. **CLINICAL GUIDELINES AND POLICY:** List out what changes will have to be made for how patients are handled clinically in the office, along with any additional precautions/protections for providers (e.g. masks, face shields, disposable gowns, etc.). Write policy and checklists to accommodate all these items and ensure that anything that needs to be ordered on a regular basis is added to supply orders/inventory.

3. **PATIENT MANAGEMENT POLICY AND CHECKLISTS:** Work out the protocols you'll have to have in place throughout the office when you start seeing patients again (e.g. possible patient pre-screening prior to entering the office, what protective equipment the front desk may need, social distancing in the office, checking patients in and out, taking payment and so on). Write policy and checklists to accommodate all these items.

4. **INVENTORY:** Inventory the practice's supplies and determine if you'll need to make an order before reopening. Add to your order what you'll need for PPE (as outlined above in #2 & #3) to operate at the expected patient volume.

5. **SCHEDULING POLICY:** Based on the guidelines from "1" above, work out how this would affect the doctor's and hygiene's schedule. Write new scheduling policy/guidelines to reflect these changes and have any changes made in the appointment book to accommodate them. Ensure you build in time for primary production and sales in this updated schedule.

6. **CLEANING GUIDELINES:** If any additional cleaning and/or sterilization guidelines have been issued, write policy and checklists to accommodate all these items.

7. **EMPLOYEE GUIDELINES:** Again, based on the guidelines you found in "1" above, work out what changes need to be made in the office with regards to employee interaction and office space. This might include how you seat people at the front desk, possibly taking shifts in the lunchroom, how and where you do your morning production meeting, etc. Work out policy/guidelines on this as it applies to your office. Also ensure you have workable policy and protocol on employee illness that conforms with state employment guidelines.

8. **OFFICE POLICY AND CHECKLISTS**: During the work stoppage, you've most likely had the chance to work on office policy/manuals. At the minimum, ensure you complete these for the positions in your practice that you had the most difficulty with or most trouble keeping stably posted. Do your best here – this is a case where something is more useful than nothing! Any training material you have is better than none.

9. **CONTACT YOUR STAFF:** Reach out to your staff and let them know what's happening and when you hope to be back in the office. If permissible in your

areas, schedule the administrative staff and assistants to be back the week prior (for training and set up). Schedule the hygienists and associates for 1-2 days prior to opening. If any of your staff do not plan to return to work, you'll need to hire! If that's the case, you'll have to place ads and possibly conduct in-person or virtual interviews. Ideally, you're not going back to the office without a fully functioning team.

10. **CLEAN UP YOUR OVERHEAD:** Now more than ever, it is important that you have complete control over the amount of money that your organization spends. If you haven't done so already, get a copy of the MGE Dental Overhead/Expense Worksheet and fill it out completely. As you work this overhead out, do the following:

    a. Do a thorough review of office expenses and determine if there are any expenses being charged to your credit cards or debited from your checking account that you don't need anymore. Keep a list of these as you are going through the accounts so you can act on these afterwards.

    b. Project payroll going forward.

    c. Total up bills you may be behind on (e.g. rent, supplies, lab etc.) Work out when you would have to have these paid by (may take speaking with creditors) as this will have to be added to the overhead. In all cases, attempt to keep credit related debt serviced so that your credit acts as a cushion. With all of this you should now have a fairly reliable overhead figure.

    d. Project your income for the next three to four months after reopening.

    e. Adjust your overhead so that it fits within your projected income. Keep in mind that you will probably be spending more money on marketing in the coming months, and some of you will have more expenses to have the PPE that you might need. Make sure you allocate enough money to those categories.

    f. For additional savings, we have a buying group specifically for MGE Clients: DDS Overhead Management. It offers significant savings for you on anything from supplies, to labs, implants, payroll services etc. This group was created specifically to offer the MGE client base the opportunity to have the same economies of scale discounts that the larger corporate groups enjoy. Because every dollar saved right now counts, we are offering the first month of this service free to all MGE clients. Contact Tesia Loehwing at tesial@ddsom.com to get enrolled.

g. The increase in overhead in certain categories, and the making up of lost production, can only be made up by increased staff competence. Every action is going to have to count now. This includes your competence in sales and as an executive. More on this in the staff training and executive sections in this checklist.

h. Set a reminder to review your overhead after you've been open for a month and make any adjustments as necessary.

11. **PATIENT FINANCING AND OFFICE FINANCE POLICY:** Do your homework! The world of finance has changed. Some 3rd party financing companies you've used may have changed their parameters for approval as well as the application process. In addition, you will most likely have patients that have lost their jobs and their dental insurance. Be prepared for this so that you are not fumbling with finances when you present a case. We suggest:

a. Reaching out to the 3rd party financing companies you've used and find out if there have been any changes in the approval or application process.

b. Looking for additional finance companies so that you have tiered options for all circumstances. Polish up your sales/communication skills and techniques. You are going to have to be better than you were 2 months ago. If you find yourself lacking - do not be reasonable.

c. Spend time training and drilling, use DDS Success for on-demand case acceptance training. The MGE Communication and Sales Seminars are now being live streamed, you can attend/reattend these. Take advantage of these resources. You and your office manager can set aside time to watch, drill and train on these as you get ready to reopen.

12. **EXTERNAL MARKETING:** One thing you can be sure of, when this is over, you'll need more new patients. Between being shut down for a time, patient attrition and patient's whose economic circumstances have changed (and cannot afford a large treatment plan), you will need to increase new patient volume. You will need to allocate a healthy amount to your marketing efforts both internally and externally. Now is when you get that marketing prepped for reopening. Print marketing would be

started early as this takes time. Digital marketing (PPC, etc.) can be finalized the week prior and started days before opening. SEO efforts should be directed to re-incorporate your regular menu of services for patients (if you did anything towards emergency care only in your SEO). Note that you may have been marketing for emergency care throughout this period. If so, you may wish to continue this IN ADDITION to normal marketing efforts (i.e. dual campaigns). If you have questions about any of this, contact MGE Senior Consultant and Lecturer, Dan Brown and he'll get you on the right track!

13. **INTERNAL MARKETING:** This is the time to get good at internal marketing. These are your "free" new patients and actions should be incorporated early to maximize your efforts. Any outreach from the practice to patients of record should include a "New Patient Special," that can be offered to family members in their household, as well as new patients calling to appoint. Have your scheduler start these actions in 16 below and include them in ANY outreach in 15 below. When your staff get back the week prior to opening, you'll train them on this as well.

14. **LABS:** Your lab may be in another state. While you may be open by a certain date – they may not be! Contact your labs and work out which can fulfill cases in line with your opening date.

15. **PATIENT OUTREACH:** With an opening date in mind, you'll want to accomplish two things:

    a. Letting patients know you'll be opening back up and
    b. Getting these patients back on the schedule!

    Reach out to your patient base with an update as to when you can begin seeing them for non-emergency procedures via:

    a. Email: individual and bulk emails via a service that is HIPAA compliant (and make sure you have permission to email them).
    b. Texting (ask Dan Brown about bulk texting).
    c. Letters: Send a letter to your patient base with an update.
    d. Social Media (Facebook, Instagram posts and videos).
    e. Video: Make a video on YouTube and promote via Social Media to your patient base and,

Where applicable, let your patients know about the "New Patient Special" for their friends and family (i.e. letters, Social Media, Videos, etc.). Again, for tips in this area, contact Dan Brown. MGE Clients can also find tips from other MGE Clients on how to do all of the above on the MGE Client Facebook Group.

16. **PATIENT SCHEDULING:** With a hard open date, and parameters established on HOW to schedule in this new environment, it's time to fill the appointment book. If your Scheduling Coordinator is doing this, ensure they understand any new rules and regulations as to how this needs to be done. And keep in mind, filling the book with such short notice may require more than one person on the phone! Your OM or an additional staff member may need to join the effort. And assuming your appointment book can be accessed off site in a HIPAA compliant manner, this can also be done as telework from home.

17. **RENEGOTIATE YOUR PPOS:** If you are involved with PPO plans, renegotiate them. If you have not done so already, do it now. If you do not have time to do so, you can assign this to a staff member to do this for you. Please do your homework and know what the fees in your area are before you try to renegotiate. It is also wise to check which procedures you do most, and pick a target negotiating price for them so that you can pick your battles with the insurance company. There are also numerous companies that will renegotiate your fees for you. In the MGE Client Facebook group there were quite a few suggestions from other clients. Even when using a third party to renegotiate, make sure they understand which procedures you are most interested in renegotiating and what you would like to have them negotiated to. Remember that they work for you. Also remember that PPO plans are a marketing strategy. A 35% reduction in fees is a VERY expensive marketing strategy! So, if you are going to participate with PPOs, make sure that you have them negotiated well.

II. ONE WEEK PRIOR TO REOPENING

This section assumes that most of your staff would be allowed back in the office the week prior to reopening. If not, make adjustments as necessary.

1. **ONBOARD NEW TEAM MEMBERS:** You might have needed to hire new/replace some of your staff. You'll want to onboard them as soon as possible and get them through both office basics and basics on the MGE Program. Use DDS Success as you have with your other team members in the past. Keep in mind, many people will be looking for work – and now is the time to hire them! Onboard as early as permissible to ensure these new staff are ready to go when you open. Include them in the additional training you will do below. If you have questions in this area, reach out to us at (800) 640-1140 for help.

2. **BRIEFING:** As a first order of business, meet with your administrative staff and assistants and let them know what changes have occurred in your practice as a result of the new guidelines, along with a general idea of what the expectations are. Give them the agenda for the coming week and show them how your office will adapt to these new conditions – and still be successful! You could have your associates/hygienists at this meeting or do it later in the week depending on your economic circumstances.

3. **TRAINING ON NEW GUIDELINES:** Based on guidance from your Dental Board, you've developed new policy/protocol on how to operate in light of coronavirus. Train your staff on the new policies, procedures and checklists developed the prior week. Ensure they have a FULL understanding and no questions about how any of it works. You would also, when applicable, drill your staff on how to execute any of these procedures/protocols until they have them down cold:

   a. Clinical Guidelines
   b. Patient Management/Scheduling Guidelines
   c. Cleaning Guidelines
   d. Employee Guidelines

   You may also need to put someone in charge of monitoring these guidelines on a daily basis for compliance. It may be more than one person needed based on what's being monitored.

4. **DEEP CLEAN AND ORGANIZE YOUR OFFICE:** We trust that your office has always been clean and sterile and up to or exceeding OSHA standards. We're not talking about that. Every office has the proverbial "junk drawer," "junk closet," etc. Clean it up. Get rid of everything that you haven't used in years, is gathering dust, or you were holding onto "just in case you wanted it". Put everything in a proper place. Go through all your drawers and clean them. Including desk drawers. They are usually full of dust. Get rid of *anything* that is broken and can't be repaired. If it can be repaired, have it repaired. Shred those papers you have been saving for 10 years that you will never need again. And if you do, have them scanned and organized in your computer. Make sure your walls are smudge free, your base boards clean and neat and the floors unstained. If you need to paint or touch up something, have it done now. Go through the office and make a list of all the things that need to be handled. Get any repairs or fixes done.

5. **STAFF TRAINING TO INCREASE EFFICIENCY AND PRODUCTIVITY**: Between having to make up for lost productivity and the need for increased marketing spend, the effectiveness of your staff is **more important than ever.** Whereas in the past, employers may have had the luxury of putting up with non-performance, they simply cannot anymore. So, you are going to make up the difference by being better leaders and executives and getting more out of your team. Every action has to count!

Now is the time to train your team on:

a. Communication and Sales
b. The Sales Line in your practice
c. Internal Marketing (getting more new patient referrals)
d. Customer Service
e. Scheduling and
f. Collections

ALL staff should understand Sales/Communication, the office Sales Line (including Morning Production Meetings), Customer Service and how to ask for referrals. Use the manuals and checklists you've put together during the work stoppage and DDS Success to train them on this. And more importantly – DRILL these actions to ensure they can actually DO them. It's one thing to read a manual or watch a video course – it's quite another to make it a part of what you do on a daily basis. So, drilling (role playing) MUST be included in your training actions. Schedule time every day, possibly a few hours, working on this the week prior to reopening. Your team's day may be a split between training and working on their specific position (or helping with another – i.e. scheduling) as you get ready for opening.

6. **PATIENT OUTREACH:** We're going to continue the patient outreach efforts we started the prior week.

a. Emailing patients about scheduling and that you are reopening, both individually and via bulk emails via a service that is HIPAA compliant (and make sure you have permission to email them). Also, don't do this so frequently that you become SPAM. A couple of times a week max.
b. Texting, via Weave or whatever system you use (you can also ask Dan Brown about bulk texting)
c. Letters: Send a letter to your patient base with an update.
d. Social Media (Facebook, Instagram posts and videos)
e. Video: Make a video on YouTube and promote via Social Media to your patient base, and

f. Along with letting patients know it's time to schedule, keep promoting your "New Patient Special" for their friends and family where appropriate.

7. **OFFICE SCHEDULE:** You have a backlog of treatment and services. You may wish to open up additional hours/add a provider to accommodate this. Work this out as early as possible so it can be incorporated into your scheduling efforts. You should also pick an "end date" for this so you're not scheduling a Six Month Recall during hours you don't plan to have six months from now.

8. **PATIENT SCHEDULING/OUTREACH:** Continue filling the book for the weeks to come - especially reforming the Hygiene schedule. Be wary of the doctor's schedule booking out too far – even with expanded hours. You may want to have several people working on this until you're back to where you were schedule-wise prior to the work stoppage. In addition to scheduling normal appointments, your Treatment Coordinator could be working on scheduling patients on the Incomplete Treatment List for consultations. Your Financial Coordinator could be cleaning up the Accounts Receivable (especially with Insurances), and in addition to booking active hygiene patients, your team could be working on reactivating patients that are overdue.

9. **PATIENT BALANCES/STATEMENTS:** Many people have lost their jobs as a result of this crisis. You'll need a financial policy to accommodate people in this situation. When sending out patient statements (for any balances they may owe), you may wish to note that if they need to work out other arrangements to contact the office. Make sure you've provided guidance to your team as to what arrangements are acceptable and in these situations.

10. **MARKETING:** Ensure your marketing is GOING. Mail should be ready to go or out. PPC Ads should be running to schedule people for the following week. Your SEO should be adjusted by now. From here, you should devise a schedule (and budget) that your marketing will follow in the months to come. Your marketing dollar is now more precious than ever – so you'll also want to ensure that you monitor ROI on every marketing effort to eliminate waste.

11. **KEEP YOUR SUCCESSFUL ACTIONS "IN:"** Necessity is the mother of invention! As you've navigated the challenges of the past few weeks, you've probably developed a number of "Successful Actions." And some of these actions may be applicable going into the future. Draw up a list of all your successful actions and see which still apply. Make sure you checklist them. Make sure that you assign them, and make sure that they stay in by reviewing this list at least once per month.

For example, several successful actions we've seen in the MGE Client base include:

a. Patient outreach for reactivation (and scheduling them well into the future when opening seemed possible),
b. Community Outreach: Alliances with hospitals and primary care physicians to treat dental emergencies so they don't end up in the Emergency Room.
c. Video outreach to patients.
d. Tele dentistry where applicable and permissible.
e. And more!

These actions led to increased visibility and more goodwill. They've also led to increased contact and awareness amongst patients of record on the importance of proper dental care. Make sure that you add these new actions to your successful action list and make them your new normal. Keep this outflow to your existing patients and your communities going – with the exact same volume and enthusiasm. It is important to keep this going so that this does not diminish as you slowly get back to normal.

And don't forget that most of you have connected with old friends and made new friends in the MGE Client Facebook group. Stay connected to them. Continue sharing your brilliance and benefit from the brilliance of your colleagues and their staff. Don't disconnect.

12. **COMMIT YOURSELF TO BECOMING AN EXCELLENT EXECUTIVE:** This is the time to really take your executive hat seriously. With all of the instability and upheaval in such a short period of time you have to be stable, certain, caring, knowledgeable, and competent. Being an excellent executive starts with you fully understanding your hat and knowing how to wear that hat well. If you are not through your executive training yet, it is now easier than ever with the courses being online.

    Schedule the time and get through them! If you are through your training and still have uncertainties, contact Adam Fuegel and he will be happy to get you an appointment to speak with someone in our Qualifications Division that can design a program for you and what you need to review. As you reopen, make sure you have a proper morning production meeting, your day is being run properly by the office manager and your staff training time, executive meetings and staff meetings are scheduled regularly and are productive. Be punctual. Have time for your staff to see how they are coping. Finish your Admin Scale and go over it with your staff to get it executed. Your scheduling policy is adhered to. Quotas are handed out and met. You are reviewing your statistics and applying conditions to them weekly with you and your office manager. And all of the other 101 things that are part of your hat. The quality with which you wear this hat is going to determine how successful you are going to be in business. So wear it well!

III. WE'RE OPEN!

1. **REIMPLEMENT PREVIOUSLY WORKABLE ACTIONS:** If things were going well prior to your work stoppage, you were doing something right. Well, we need to get these successful actions back IN as soon as possible. And we need to adjust these actions in light of any new guidance on how the practice has to operate. Right before day 1, make a list of basic successful actions that you had in place prior to shutting down. These may be things like Morning Production Meetings, Daily/Weekly/Monthly goals, regular review of openings in the schedule by the Dr., OM and Scheduler (to get them filled), asking for referrals and ensuring time in the schedule to present treatment. Whatever these may be, list them out and figure out if any adjustments need to be made to comply with new guidance from your state or local government. Give a copy of this list to your OM and applicable team members and then get these steps implemented! Remember, you've been out of the office in some cases for more than a month – these successful patterns have not been regularly practiced since that time and as a result are easily forgotten/dropped. So, make it a point to get them in and keep them in to reestablish these patterns.

2. **OUTREACH, OUTREACH, OUTREACH:** We can't stress this point enough. You're walking into a treatment backlog and might find yourself slammed time-wise. When this happens, the first thing to drop (normally) is regular outreach/communication to your patient base. You're busy so there's no time! Make a point to continue the actions begun earlier on this checklist (calls, texts, emails, etc.), and start catching up on the inactive patients in your patient base. You may need more staff depending on how much reactivation needs to be done, which if you start off right when you get back in the office, you should be able to afford in short order. Recall/Hygiene/Reactivation tends to be a weak area of most dental practices – make this a strength going forward. It's not only good for the practice – it's even better for your patient's health!

3. **CONTINUE (AND EXPAND) YOUR MARKETING EFFORTS:** Continue the marketing actions started earlier in the checklist and revenues allowing expand on them. Remember, we need more new patients now more than ever – so in addition to activating patients of record, make this a focus. Ensure you

incorporate the marketing actions you've accumulated thus far into your future plans, including any successful actions you discovered during the shutdown (e.g. video and social media marketing).

4. **REEVALUATE YOUR POSITION AFTER ONE MONTH:** After a month back in the practice, you'll have a better idea of how everything is working. Take stock and examine:

    a. Your overhead. Make any further adjustments, cuts or adds as applicable.

    b. Your overall office operation to determine if anything needs to be changed or adjusted. This should include a review of statistics.

    c. The upcoming months schedule. Examine how your patient base is responding to your rescheduling efforts. Is hygiene full? Do you need more help (hygienists) to accommodate the patient flow? You'll also want to look at how any modifications you've made to accommodate compliance with new guidelines has affected your schedule. Are further adjustments to the schedule needed to make things work more efficiently? Does this situation warrant additional assistance in the clinical area of the practice?

    d. Your staffing situation. Any areas that are overloaded and need help? Any areas of the practice underperforming?

    e. Your marketing. Is it working to your satisfaction? Any adjustments needed? Does it need to be expanded?

    f. Patient Financing and Case Acceptance. How is this rolling along? Any steps needed to improve in this area?

    g. Future plans. Are you expanding? What next steps should we take moving into the future? Associate? More Hygiene?

Review all of this for adjustments as needed and speak to your Power Client Manager if you need any assistance. If you are not an MGE Power Client, reach out to Mike Menkhaus (mikem@mgeonline.com) or Dennis Dezelic (dennisd@mgeonline.com) here at MGE.

5. **KEEP INFORMED:** Keep in mind that as your area becomes healthier and moves to Phase II, Phase III, etc. that guidance (from the Dental Board, CDC, etc.) may change. Stay informed as this develops and make any adjustments as needed in your practice. Again – we recommend using official sources (your Dental Board, the CDC, and if applicable your state dental association for updates) – not the "news."

6. **AVOID THE NEWS:** Speaking to the last point – and this is an **apolitical** statement. Generally speaking, watching the "news" does not leave one feeling more upbeat or enriched in any way. We recommend avoiding it. Again, if you need information that could affect your practice, use official sources. It's where the "news" gets their information anyway. Why have it interpreted for you? Go directly to the source – your state or local government website, dental board, or other government agencies, et. al. and get the unvarnished, unembroidered information you need to operate.

7. **STAY POSITIVE:** Our intention for MGE clients has always been: you will not only cope with the aftermath of this crisis – you will flourish despite it! Look at the work you've done on this checklist. Keep working on it, keep training, keep training your staff, care for patients with the compassion you've always given them. Some people are having a rough go of it right now – that compassion you show as second nature may have farther reaching effects than you might think. You'll get through this. You will do well and you will have a bright future. Share this optimism with your team and your patients. You'll find helping others as you move through this rebuilding phase makes it not only better for them –but more fulfilling and rewarding for you!

Do well! And if you need any assistance as you move through this checklist, please reach out to us here at MGE. We're here to help!

END OF CHECKLIST - Please contact your MGE consultant to run through these steps if you have any question or concerns regarding execution.