



## WESTERN PRACTICE SALES

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**John M. Cahill Associates**

### # LV-795 *Orthodontics* **Las Vegas - Henderson, Nevada**

Located on the **prime corner** of a popular, like-new Professional Center with fresh, clean curb appeal, this *Orthodontic practice* has ***prominent exposure and signage from not just one, but TWO incoming directions***, which makes it the envy of all businesses! The interior welcomes patients with its fresh, fun and modern décor, perfect for the traditional orthodontic patient base.

This *Practice limited to the practice of orthodontics* generates approximately 6 new patients per month, drawing patients from a loyal, strong referral base, within 5-7 mile radius, including Summerlin.

This sparkling, modern **ground-floor suite** is located in an attractive, well-maintained Professional building w/ ample parking, in the professional corridor of highly desirable neighborhood with excellent visibility and easy accessibility. Designed with office efficiency and patient flow in mind, the office consists of 5 chairs in an Open Bay, Reception area, Doctor's office, Business office, Sterilization, Lab, Storage and Restroom.

***Full Price: \$170,000***

***For further details or on-site visit, please contact:***

Timothy G. Giroux, DDS  
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Edmond P. Cahill, JD

**800.641.4179**

▶ **Honesty** ▶ **Integrity** ▶ **Professionalism** ▶ **Experience**

**We look forward to serving you**

\*Office space information provided as a courtesy only. Western Practice Sales is not a licensed Real Estate Broker in the State of Nevada, and price does not include real estate, which must be separately negotiated through licensed attorney or broker.

**PRACTICE INFORMATION SHEET****OFFICE OPERATION INFORMATION**

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		9 – 6	9 – 6	9 – 6	9 – 6	Closed	9–12 x1
Doctor's Hours		9 – 6		9 – 6		Closed	9–12 x1
Type of Practice:	<b>Orthodontic</b>		Reason for Selling:		<b>Relocation</b>		
Years established:	<b>Since 2015</b>		Days worked past 12 months:		<b>~ 116 days</b>		

**OFFICE SPACE & LEASE INFORMATION**

**\*WESTERN PRACTICE SALES IS NOT A LICENSED REAL ESTATE BROKER IN THE STATE OF NEVADA. OFFICE SPACE & LEASE INFORMATION BELOW PROVIDED TO BUYERS AS A COURTESY ONLY, AND ARE NOT INCLUDED IN PURCHASE TERMS. BUYERS ARE RESPONSIBLE FOR HIRING THEIR OWN ATTORNEY OR BROKER TO NEGOTIATE REAL ESTATE, INCLUDING LEASE TERMS.**

Is the building/suite owned?	<b>No</b>	Is building available for purchase?	<b>N/A</b>				
Is the space leased?	<b>Yes</b>	Is lease renewable?	<b>Yes</b>	Is lease assignable?	<b>No</b>		
Term of Lease:	<b>7 yrs.</b>	Expiration date:	<b>March 2024</b>				
Do you share space with another dentist?	<b>No</b>						
Rent per month	<b>\$4,522.00/month</b>	Common area/maintenance fees /taxes included?	<b>Yes</b>				
If not included, current amount?			Are utilities included?	<b>Yes, Water only</b>			
Is the rent considered above, below or at fair market value?	<b>Below Market Value</b>						
Type of Building:	Condo	Free-standing	<b>Professional</b>	<b>X</b>	Retail Center		
Office Square footage:	<b>~2,189 sf</b> <b>*See note above</b>	Carpet?	<b>Yes, tile also</b>	Air conditioning?	<b>Yes</b>		
Number of Chair Bays:	<b>5</b>	Plumbed for additional Chairs/Bays?	<b>No</b>				
Reception:	<b>Yes</b>	Dark Room:	<b>No</b>	Doctor's Office:	<b>Yes</b>	Lab:	<b>Yes</b>
Business Office:	<b>Yes</b>	Restrooms:	<b>Yes, 2</b>	Sterilization:	<b>Yes</b>	Storage:	<b>Yes</b>
Laser:	<b>NO</b>	Digital X-ray:	<b>CBCT</b>	Intra-oral Camera:	<b>Yes</b>	Cerec:	<b>NO</b>
Description of office building, Location and attributes of practice (a brief description):	<b>Clean and modern Ground-floor Suite located in attractive, well-maintained, highly visible, easily accessible, single-story Professional building complex in professional corridor of desirable neighborhood</b>						

## PRACTICE & PATIENT DEMOGRAPHICS

Type of patients as a percentage of collections:

**Private Pay** 50 **Insurance/PPO** 50 **Medicaid** 0 **Capitation (HMO)** 0 **Culinary (NPD)** 0

Does your practice participate in "Care Credit"? **Yes**

List Preferred Provider, Health Care Provider and Capitation Plans now in place: **Delta**

Are you a Delta Provider? **Yes** / No      If Yes: X **Delta PPO?**      X **Delta Premier?**

**\*SELLER IN NO WAY WARRANTS THE EXACT ACCURACY OF PATIENT FILES. IT IS THE BUYER'S RESPONSIBILITY TO DEFINE AND VERIFY ACTIVE PATIENT FILES WITH A CHART REVIEW. PRACTICE VALUE IS PREDOMINANTLY DETERMINED BY SELLER'S COLLECTIONS. SELLER'S COLLECTIONS CAN BE INDICATIVE OF THE NUMBER OF ACTIVE PATIENTS AND TYPE OF PROCEDURES PERFORMED.**

Estimated Number of Active Patient Files      **Number to be defined by Buyer's Due Diligence Process\***

What types of Practice Promotions are in effect?      **\$500 off Braces & Invisalign**

Phone Book Advertising? \* **No**      *\* Phone book advertising contracts will be the responsibility of buyer after transition*

Advertising Efforts in Last 2 years:      **Google Search Ads, Social Media Ads**

Average number of New Patients per month for past 12 months:      **~ 5**

Number of patients ready to start treatment?      **~ 3**      Consultation completed and ready to start?      **~ 8 - 10**

Number of consultations scheduled?      **~ 4**      Scheduled records?      **~ 4**      Scheduled exams?      **~ 4**

Number of cases in progress – active treatment?      **~ 80 - 90+**      Number of cases in retention?      **~ 100+**

Types of techniques used (Edgewise, Tight Wires, etc)?      **Edgewise Straight wire, Invisalign**

Amount of prepaid where work in not completed?      **< \$ 5,000.00**

Amount of contract receivables for work to be completed?      **~ 95,000**

Number of patients in recall and observation?      **~ 10 - 12**

Current delinquent accounts?      **~ 5**

Active child patients?      **75%**      Active adult patients?      **25%**      Months in treatment (average)      **~ 18 - 20**

Typical fee arrangement?      **Down payment w/ monthly auto debit payments**

Number of active referring Dentists?      **4**

10 or less patients per year?      **4**      11 to 20 patients per year?      **2 or more patients per year?**

**PRACTICE & PATIENT DEMOGRAPHICS (continued)**

Indicate the number of new patient exams, by month, for the past 12 months:

January 2015	<b>8</b>	February 2015	<b>5</b>	March 2014	<b>3</b>	April 2014	<b>6</b>
May 2014	<b>4</b>	June 2014	<b>4</b>	July 2014	<b>5</b>	August 2014	<b>5</b>
September 2014	<b>3</b>	October 2014	<b>7</b>	November 2014	<b>3</b>	December 2014	<b>4</b>

Indicate the number of new patient starts, by month, for the past 12 months:

January 2015	<b>6</b>	February 2015	<b>2</b>	March 2014	<b>2</b>	April 2014	<b>3</b>
May 2014	<b>3</b>	June 2014	<b>2</b>	July 2014	<b>4</b>	August 2014	<b>8</b>
September 2014	<b>2</b>	October 2014	<b>6</b>	November 2014	<b>2</b>	December 2014	<b>2</b>

**EQUIPMENT & LEASEHOLDS**

**Occasionally some specialized items may be excluded from the sale, such as: Articulators, Endo and/or Implant Systems. These items will be referenced as "excluded" on Seller's Equipment list. In addition, Buyer understands that the following items may also be excluded from the sale: diplomas, certificates, cameras, photographs, artwork and miscellaneous personal items.**

Describe age and characteristics of leasehold improvements: **2008 – excellent condition**

Average age of Equipment: **~ 8 yrs – excellent condition**

Any equipment leases? **No** Equipment is right/left-handed/convertible? **Convertible**

**PERSONNEL**

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
<b>Scheduling/Front Desk</b>	<b>4 days/32 hrs</b>	<b>May 2016</b>	<b>\$12.00/hr</b>	<b>Yes</b>

Do family members work in the office? **No** If yes, how much are they paid?

Has staff left the practice recently? **No**

Is there a practice management consultant? **No**

**PRACTICE FINANCIAL PROFILE**

**Last 3 years' Gross Collections from Computer Software:  
\*Collection amounts are approximate and should be verified by Buyer**

2016	<b>\$ 168,291</b>	2015	<b>\$ 139,514</b>	2014	
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Number of statements sent each month? **N/A** Is pegboard or computer? **Computer**

What type of computer? **Dell** What software? **IMS Practice Software**

Is software transferable? **Yes, Transfer Fee, if applicable, to be paid by Buyer**

Fees Schedule: **Available upon request**

**NOTE: The Seller has furnished the preceding information to WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES. This information has not been verified. A potential Buyer should verify the accuracy of all information to his/her own satisfaction.**

**WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES are agents of the Seller and therefore represent the interest of the Seller. We strongly advise a potential purchaser to seek independent counsel to represent his/her interests. Counsel may be, but is not limited to, an attorney, accountant, appraiser, broker or management consultant. Fees of such counsel are the sole responsibility of the purchaser.**

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