



WESTERN PRACTICE SALES

John M. Cahill Associates

#HG-827

South Lake Tahoe, California

Surrounded by the majestic Sierra Nevada mountains, words can't even describe the spectacular scenery, views and perennial recreational activities of this alpine paradise and gorgeous mountain living! Ski, live, play and practice here where your lifestyle can't be beat! Quality practice awaits your talent and skill to welcome local residents as well as year-round visitors!

The Doctor averages 9 patients w/ 7 Hygiene patients per day and welcomes approximately 7 new patients per month.

The office is centrally and conveniently located in an established, attractive, well-maintained, multi-story, free-standing Professional building with ample parking. The office occupies approximately 1,200 square feet and consists of 4 fully equipped Ops, Reception area, Doctor's office, Business office, Sterilization, Lab, Storage, and Restroom.

Full Price: \$310,000

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

Timothy G. Giroux, DDS

Jon B. Noble, MBA

John M. Cahill, MBA

Edmond P. Cahill, JD

800.641.4179

► **Honesty** ► **Integrity** ► **Professionalism** ► **Experience**

We look forward to serving you

HG-827**WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES****\$310,000****PRACTICE INFORMATION SHEET****OFFICE OPERATION INFORMATION**

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		9 – 6	9 – 6	9 – 6	9 – 1	9 – 1	
Doctor's Hours		9 – 6	9 – 6	9 – 6			
Hygienist Hours		9 – 6	9 – 6				
Type of Practice:	General		Reason for Selling:			Retirement	
Years established:	Since 1970		Days worked past 12 months:			~ 148 days	

OFFICE SPACE & LEASE INFORMATION

Is the building/suite owned?	Yes	Is building available for purchase?	Possibly				
Is the space leased?	N/A	Is lease renewable?	N/A	Is lease assignable?	N/A		
Term of Lease:	Seller owns building			Expiration date:			
Do you share space with another dentist?	N/A						
Rent per month	\$ 2,000.00/month		Common area, maintenance fees /taxes included?			No	
If not included, current amount paid?	\$660.00/mo		Are utilities included?		Yes		
Is the rent considered above, below or at fair market value?	Seller owns building						
Type of Building:	Condo	Free-standing	X	Professional	X	Retail Center	
Office Square footage:	~ 1,200 sq. ft.		Carpet?	Partial	Air conditioning?	Yes	
Number of fully equipped ops:	4		Plumbed for additional ops?	No			
Reception area:	Yes	Dark room:	No	Doctor's office:	Yes	Lab:	Yes
Business office:	Yes	Restrooms:	Yes	Sterilization:	Yes	Storage:	Yes
Laser:	No	Digital X-ray:	Yes	Intra-oral Camera:	Yes	Cerec:	NO
Description of office building, Location and attributes of practice (a brief description):	Attractive, well-maintained, professionally designed, comfortable & cheerful, warm & friendly dental office w many windows creating open, airy, light atmosphere						

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	6	Diagnostic	11	Adjunctive	1	Dentures	5
General Operative	24	Endo	11	Ortho/TMJ	1	Perio	5
Oral Surgery	8	Cosmetic		Crown/Bridge	27	Implant	

What services/procedures are referred out? (i.e. Oral Surgery, Endo, Perio, Ortho, Pedo)

Complex Oral Surgery, Endo, Perio, Difficult Pedo Behavioral Management

Type of patients as a percentage of Collections:

Private Pay **15** Insurance/PPO **85** Denti-Cal _____ Capitation (HMO) _____ Other _____

Are you a **Delta Provider?** **Yes** If Yes, _____ Delta PPO **Y** **Delta Premier**

***Delta Premier:** Dentists enrolling for the first time in the Premier Network are also being required to enroll in the PPO network. The requirement to sign with both networks will result in treatment provided to those Delta PPO patients within the practice being reimbursed at the PPO level, without the ability to balance bill those patients to Premier rates. This could result in a reduction in the practice collections that could lower the buyer’s projected income depending on the amount of Delta DPO patients in the practice who have actually paid the difference between the fee schedules.

Does your practice participate in “Care Credit”? **Yes**

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

Delta Premier, approximately 20% of practice

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

***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.**

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

Average number of patients per day? Per-Doctor: **9** Per-Hygienist: **7**

Hygiene days per week: **2** Percentage of Production by Hygiene: **6**

Does the office have Nitrous Oxide? **Yes**

Type of recall system used? **Dentrix**

Number of recalls per month? **~ 20 - 25**

What types of Practice Promotions? **Newspaper Ads**

Phone Book Advertising? * **Yes** * *Phone book advertising contracts will be the responsibility of buyer after transition.*

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:

Building & Office Remodel ~ 9 yrs ago, Elevator installed

Average age of Equipment: ~ 9 yrs

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

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
Front Desk	3½ days/wk	2008	\$25.00/hr	Yes
Back Office	3½ hrs/wk	2012	\$17.00/hr	Yes
Dental Assistant	2½ days/wk	2016	\$13.00/hr	
Dental Hygiene	2 days/wk	2017	\$50.00/pt	

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

Has staff left the practice recently? **Yes**

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

PRACTICE FINANCIAL PROFILE

Last 3 years' Gross Collections from Tax Returns:

2017 \$ 431,372 P&L 2016 \$ 376,019 2015 \$ 423,852

***Collection amounts are approximate and should be verified by Buyer**

Number of statements sent each month? ~ 100 Is pegboard or computer? **Computer**

What type of computer? **PC** What software? **Dentrix**

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.