



WESTERN PRACTICE SALES

John M. Cahill Associates

#EG-968

Sacramento, California

With a seasoned staff and well-established policies for marketing and office efficiency, this quality, family-oriented practice awaits your talent and skill to carry on its tradition and legacy of providing a high standard of care to a loyal, stable, mature patient base.

The Doctor averages 6-7 patients w/ 6 Hygiene patients per day on a relaxed workweek, offering 7 days of hygiene/per week and welcomes approximately 2-3 new patients per month.

The office is conveniently located in an attractive, well-maintained, highly visible, multi-story, all Dental Professional building off major thoroughfare in desirable mid-town neighborhood, with ample parking in a garage structure for patient convenience and accessibility.

The office occupies approximately 1,527 square feet and consists of 5 fully equipped Ops with plumbing for an additional Op, Reception area, Doctor's office, Business office, Sterilization, Lab, Storage, and Restroom.

Full Price: \$550,000

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

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

We look forward to serving you

#EG-968

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$550,000

PRACTICE INFORMATION SHEET

OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		8 – 5	8 – 5	8 – 5	8 – 5	8 – 11	
Doctor's Hours		8 – 5	8 – 5	8 – 5	8 – 5		
Hygienist Hours		8 – 5	8 – 5	8 – 5	8 – 5		

Type of Practice: **General**

Reason for Selling:

RetirementYears established: **~ 45+ years**

Days worked past 12 months:

~ 165+ days

OFFICE SPACE & LEASE INFORMATION

Is the building/suite owned? **No**

Is building available for purchase?

N/AIs the space leased? **Yes**Is lease renewable? **Yes**

Is lease assignable?

YesTerm of Lease: **5 years**

Expiration date:

April 2020

Do you share space with another dentist?

N/A

Rent per month

\$4,764.24/month

Common area, maintenance fees /taxes included?

YesIf not included, current amount paid? **N/A**

Are utilities included?

Yes, all

Is the rent considered above, below or at fair market value?

Fair Market

Type of Building:

Condo

Free-standing

Professional**X**

Retail Center

Office Square footage:

~ 1,527 sf

Carpet?

Yes

Air conditioning?

YesNumber of fully equipped ops: **5**

Plumbed for additional ops?

Yes, 1Reception area: **Yes**

Dark room:

No

Doctor's office:

Yes

Lab:

YesBusiness office: **Yes**

Restrooms:

Yes

Sterilization:

Yes

Storage:

YesDigital X-ray: **Yes**Cerec: **No**Laser: **Yes**Intra-oral Camera: **Yes**3D Imager: **No**

Description of office building, Location and attributes of practice (a brief description):

Attractive, well-maintained, multi-story Dental Professional building w/ ample parking on busy, major thoroughfare w ample parking in garage in popular, desirable mid-town neighborhood

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	20	Diagnostic	21	Adjunctive	1	Dentures	2
General Operative	27	Endo	1	Ortho/TMJ	0	Perio	1
Oral Surgery	2	Cosmetic	5	Crown/Bridge	17	Implant	3

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

Complex/Most Endo, Perio, Ortho, TMJ

Type of patients as a percentage of Collections:

Private Pay 32 Insurance/PPO 68 Denti-Cal 0 Capitation (HMO) 0 Other 0

Are you a **Delta Provider?** **Premier Only** Yes Premier + PPO _____

***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 Dental, United Concordia, Cigna

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: ~ **3**

Average number of patients per day? Per-Doctor: ~ **6 – 7** Per-Hygienist: ~ **7**

Hygiene days per week: **7** Percentage of Production by Hygiene: ~ **30+%**

Average age of patients: **Mature Family Range: ~ 50+ yrs**

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

Type of recall system used? **Dentrix & Post Cards**

Number of recalls per month? ~ **150+**

What types of Practice Promotions? **Quarterly Newsletter**

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:

Expanded/Renovation in 2006; All new cabinets, flooring, and furnishings in Reception

Average age of Equipment: ~ 20 yrs

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

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay <i>Available Upon Request</i>	Eligible for benefits
Office Manager	Full time	July 1996		Yes
RDA	Full time	Mar 2000		Yes
RDH	4 days/wk	April 1990		Yes
RDH	3 days/wk	May 1990		Yes
RDA	Full time	July 1997		Yes

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 Tax Returns:

2018 \$ 913,309 2017 \$ 922,661 2016 \$ 909,494

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

Number of statements sent each month? ~ 230+ Is pegboard or computer? **Computer**

What type of computer? **PC/Windows 7** 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.