



## WESTERN PRACTICE SALES

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John M. Cahill Associates

**#AG-990**

### **San Francisco, California**

Don't miss out on this well-beloved, traditional, conservative, adult cosmetic & restorative general Practice which can be taken to the next level, with a little attention to marketing and expansion of relaxed workweek currently.

The Doctor averages 6 patients w/ 8 Hygiene patients per day offering 2 days of hygiene/per week and welcomes approximately 5 new patients per month with an affluent Patient Base with high dental IQ who are motivated, excited and involved in their dental treatment!

The office is conveniently located in one of San Francisco's iconic landmark Medical/Dental Professional buildings, a renowned, historic, beautiful and elegant Art Deco masterpiece, located in Union Square, within the bustling Financial District, Nob Hill and Chinatown.

The office occupies approximately 850 square feet and consists of 3 fully equipped Ops, Reception area, Doctor's office, Sterilization, Storage, and Restroom.

***Full Price: \$228,000***

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

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**800.641.4179**

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

**We look forward to serving you**

# AG-990

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$228,000

## PRACTICE INFORMATION SHEET

## OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours			9 – 4		10 – 6	9 – 4	
Doctor's Hours			9 – 4		10 – 6	9 - 4	
Hygienist Hours			9 – 4		10 – 6		
Type of Practice:	<b>General</b>		Reason for Selling:		<b>Personal / Academics</b>		
Years established:	<b>Since 1990</b>		Days worked past 12 months:		<b>~ 160+ days</b>		

## OFFICE SPACE &amp; LEASE INFORMATION

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>Yes</b>		
Term of Lease:	<b>5 yrs</b>	Expiration date:	<b>September 2020</b>				
Do you share space with another dentist?	<b>N/A</b>						
Rent per month	<b>\$6,716.00/month</b>	Common area, maintenance fees /taxes included?	<b>Yes</b>				
If not included, current amount paid?	Are utilities included?		<b>Yes</b>				
Is the rent considered above, below or at fair market value?							
Type of Building:	Condo	<b>Free-standing</b>	<b>X</b>	Professional	Retail Center		
Office Square footage:	<b>~ 850 sq. ft.</b>	Carpet?	<b>Yes</b>	Air conditioning?			
Number of fully equipped ops:	<b>3</b>	Plumbed for additional ops?	<b>No but Staff Lounge</b>				
Reception area:	<b>Yes</b>	Dark room:	<b>No</b>	Doctor's office:	<b>Yes</b>	Lab:	<b>No</b>
Business office:	Restrooms:	Sterilization:	<b>Yes</b>	Storage:	<b>Yes</b>		
Digital X-ray:	<b>Yes</b>	Cerec:	<b>No</b>	Laser:	<b>No</b>	Intra-oral Camera:	<b>Yes</b>
						3D Imager:	<b>No</b>
Description of office building, Location and attributes of practice (a brief description):	<b>Iconic Landmark, Medical/Dental Professional building w/ affluent, upscale patients w high dental knowledge and motivated</b>						

## PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	20	Diagnostic	15	Adjunctive	3	Dentures	
General Operative	14	Endo	1	Ortho/TMJ	5	Perio	9
Oral Surgery	1	Cosmetic	2	Fixed	23	Implant	7

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

**Complex Oral Surgery, Implant Placement, Endo, Perio, Difficult Pedo Behavioral Management**

Type of patients as a percentage of Collections:

Private Pay \_\_\_\_\_ Insurance/PPO \_\_\_\_\_ Denti-Cal 0 Capitation (HMO) 0 Other \_\_\_\_\_

Are you a **Delta Provider?** **Premier Only** \_\_\_\_\_ 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, No PPO or CAP**

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: ~ **5**

Average number of patients per day? Per-Doctor: ~ **6** Per-Hygienist: ~ **8**

Hygiene days per week: **2** Percentage of Production by Hygiene: ~ **25+**

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

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

Type of recall system used? **Pre-scheduling, Dentrix/Weave tracked**

Number of recalls per month? ~ **40**

What types of Practice Promotions? **None**

Phone Book Advertising? \* **No** \* *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: **Paint & Carpet ~ 4 yrs, Major Remodel 2009**

Average age of Equipment: ~ **25 yrs**

Any equipment leases? **Yes, Digital Sensor** Equipment is right/left-handed/convertible? **Convertible**

## PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
<i>Available Upon Request</i>				

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     **\$ 403,000**     2017     **\$ 392,445**     2016     **\$ 363,273**    

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

Number of statements sent each month? **10** Is pegboard or computer? **Computer**

What type of computer? **Windows** 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.**