



WESTERN PRACTICE SALES

John M. Cahill Associates

#BN-1249

Berkeley, California

The Seller has established a family-oriented office with streamlined marketing and patient-flow policies and is passing it on to you to take it to the next level! Long-term, stable, loyal patient base appreciates conservative treatment delivered by knowledgeable staff in a warm and caring environment. All specialties are referred out so you can imagine your collections soar by keeping procedures in-house!

The Doctor averages 8 patients w/ 8 Hygiene patients per day offering 3 days of Hygiene/per week and welcomes approximately 8 new patients per month, with growth generated by internal referrals and network of Specialist associates.

The practice is conveniently located in an attractive, well-maintained Medical Professional building on an easily accessible, visible thoroughfare w/ close proximity to a Medical Facility. ***This office is shared with one other dentist. Each Dentist has their own staff and patient base.*** The total office occupies approximately 1,944. Sellers' portion of office is approximately 1,000 square feet and consists of 3 fully equipped OPs, Reception area, Doctor's office, Business office, Sterilization, Lab, Storage, and Restroom.

~~*Full Price: \$475,000*~~

Seller Ready to Retire! Priced to Sell at Only: \$425,000!

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

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

We look forward to serving you

BN-1249

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$425,000

PRACTICE INFORMATION SHEET

OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours			8 - 5	8 - 5	8 - 5		
Doctor's Hours			8 - 5	8 - 5	8 - 5		
Hygienist Hours			8 - 5		8 - 5 x2		
Type of Practice:	General			Reason for Selling: Retirement			
Years established:	~ 30 yrs			Days worked in 2019: ~ 130 days			
*Office closed due to Covid from March through May 2020				Days worked in 2020 ~ 105+ days			

OFFICE SPACE & LEASE INFORMATION

Is the building/suite owned?	No	Is building available for purchase?	N/A				
Is the space leased?	Yes	Is lease renewable?	Yes	Is lease assignable?	Yes		
Term of Lease:	5 years w/ 2 5 - year options			Expiration date:	April 2024		
Rent per month	\$2,827.91/month		Common area, maintenance fees /taxes included?	Yes			
If not included, current amount paid?			Are utilities included? Yes				
Is the rent considered above, below or at fair market value?			Below Market Value @ 3.25/sf				
Type of Building:	Condo	Free-standing	Professional	X	Retail Center		
Office Square footage:	~ 1,944 sq. ft.		Carpet?	No	Air conditioning?	Yes	
Number of fully equipped OPs:	3		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
Digital X-ray:	Yes	Cerec:	No	Laser:	No	Intra-oral Camera:	Yes
						3D Imager:	No
Description of office building, Location and attributes of practice (a brief description):			Attractive, well-maintained Medical Professional building on major thoroughfare w close proximity to Medical Facility				

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	21	Diagnostic	21	Adjunctive	0	Dentures	0
General Operative	25	Endo	0	Ortho/TMJ	0	Perio	0
Oral Surgery	0	Cosmetic	0	Crown/Bridge	30	Implant	3

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

Refer ALL Oral Surgery, Endo, Perio, Difficult Pedo Behavioral Management

Type of patients as a percentage of Collections:

Private Pay 25 Insurance/PPO 75* *50% Delta, 50% other insurance Other _____

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"? **No**

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

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: ~ **8**

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

Hygiene days per week: **3**

Average age of patients: **Mid-Mature Family Range: 50 yrs**

Does the office have Nitrous Oxide? **No**

Type of recall system used? **Pre-scheduling, Open Dental software tracking w Reminders**

Number of recalls per month? ~ **24 – 30/wk**

What types of Practice Promotions? **N/A**

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: **Equipment regularly maintained and in good functioning condition**

Average age of Equipment: **~ 8 yrs**

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

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
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AVAILABLE UPON REQUEST

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:

2020 \$ 545,336 P&L 2019 \$ 652,920 2018 \$ 576,905

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

Is pegboard or computer? **Yes** What type of computer? **Computer**

What software? **Open Dental** 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.