



## WESTERN PRACTICE SALES

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**John M. Cahill Associates**

### **#RN-1250** **Reno, Nevada**

This is a great opportunity for anyone wishing to establish themselves or expand in Reno. Although only 1½ yrs old with a relatively new patient base, this move-in ready practice already shows promise of great growth with reliable patients who appreciate a high standard of care provided here!

The Doctor averages 5 - 6 patients w/ 5 Hygiene patients per day offering 1 day of Hygiene on alternating Tuesdays and welcomes approximately 12-15+ new patients per month.

This large, spacious turn-key office is conveniently located in an attractive, well-maintained, 2-story, Health Professional building with large windows and natural lighting, boasting beautiful views from every OP.

The office consists of 5 fully equipped OPs, Reception area, Doctor's office, Business office, Sterilization, new Digital X-ray Units, Darkroom, Lab, Storage and 2 Restrooms.\*

***Full Price: \$175,000***

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

Timothy G. Giroux, DDS

Jared Bergquist

**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.

# RN-1250

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$175,000

## PRACTICE INFORMATION SHEET

## OFFICE OPERATION INFORMATION

|   | SUN            | MON   | TUE                        | WED                             | THUR     | FRI                    | SAT |
|---|----------------|-------|----------------------------|---------------------------------|----------|------------------------|-----|
| Office Hours  |                | 8 – 3 | 8 – 3                      | 8 – 3                           | 8 – 3    |                        |     |
| Doctor's Hours  |                |       | 9 – 2:30                   | 9 – 2:30                        | 9 – 2:30 |                        |     |
| Hygiene Hours   |                |       | 9-2:30 <sup>x2/month</sup> |                                 |          |                        |     |
| Type of Practice:   | <b>General</b> |       |                            | Reason for Selling:             |          | <b>Personal</b>        |     |
| Years established:  | ~ 1½ yrs       |       |                            | Days worked in 2019:            |          | <b>July – Dec 2019</b> |     |
| <b>*Office closed due to Covid from March 17 – May 11, 2020</b> |                |       |                            | Days worked in 2020: ~ 100 days |          |                        |     |

## OFFICE SPACE &amp; 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>No</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>2023</b>         |                      |               |                    |            |            |           |
| Do you share space with another dentist?                     | <b>No</b>                |  |                     |                      |               |                    |            |            |           |
| Rent per month   | <b>\$ 3,587.50/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? | <b>Fair or Below</b>     |  |                     |                      |               |                    |            |            |           |
| Type of Building:  | Condo                    | Free-standing                                  | <b>Professional</b> | <b>X</b>             | Retail Center |                    |            |            |           |
| Office Square footage:                                       | <b>*See note above</b>   | Carpet?  | <b>Yes</b>          | Air conditioning?    | <b>Yes</b>    |                    |            |            |           |
| Number of fully equipped OPs:                                | <b>5</b>                 | Plumbed for additional OPs?                    | <b>No</b>           |                      |               |                    |            |            |           |
| Reception area:  | <b>Yes</b>               | Dark room:                                     | <b>Yes</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> |            |           |
| 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):

**Large, spacious, turn-key office with new digital x-rays units. Stunning views from OPs with large windows and natural lighting in attractive, well-maintained, 2-story Health Professional building in desirable neighborhood**

## PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

|                      |            |              |          |
|----------------------|------------|--------------|----------|
| Preventative/Hygiene | Diagnostic | Adjunctive   | Dentures |
| General Operative    | Endo       | Ortho/TMJ    | Perio    |
| Oral Surgery         | Cosmetic   | Crown/Bridge | Implant  |

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

**Refer Complex Oral Surgery, Endo & Perio.**

Type of patients as a percentage of Collections:

Private Pay 20% Insurance/PPO 80% Medicaid 0 Capitation (HMO) 0 NPD (Culinary) 0

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

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

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 - 15+**

Average number of patients per day? Per-Doctor: **~ 5 - 6** Per-Hygienist: **~ 5**

Hygiene days per week: **1 Tuesday/alternating week**

Average age of patients: **Mid-Mature Family Range: ~ 30 - 50 yrs**

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

Type of recall system used? **Pre-scheduling, Dentrix computer tracking w/ Reminders**

Number of recalls per month? **~ 15**

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: **Computers & X-ray Units: ~ 1 yr old**

Average age of Equipment: **~ 10 yrs**

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

## PERSONNEL

| Position | Days/Hrs | Date hired | Rate of Pay | Eligible for benefits |
|----------|----------|------------|-------------|-----------------------|
|----------|----------|------------|-------------|-----------------------|

## AVAILABLE UPON REQUEST

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

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

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

## PRACTICE FINANCIAL PROFILE

### Last 3 years' Gross Collections from Corporate Tax Returns:

2020 \$ 134,435 P&L 2019 \$ 56,246.12 (5 months: July - Dec)

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

Is pegboard or computer? **Computer** What type of computer? **Windows 10 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.**

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