

Breaking Up | is Hard to Do... or is it?

DISMISSING A PATIENT

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It's Monday morning—morning huddle time. There's that patient's name on the schedule that makes everyone in the office cringe! You know who I am referring to: the person who won't let you take radiographs, won't let you do an exam but once every three years, and refuses routine dental care. Basically, it's that patient who makes threats if you are not willing to treat them or not treat them based on their demands or is outright abusive.

The dentist-patient relationship is based on mutual trust and respect. This is commonly termed, *rapport*—defined by Webster's Dictionary as “a close and harmonious relationship in which the people or groups concerned understand each other's feelings or ideas and communicate well.” Occasionally, there comes a time when this relationship becomes strained or no longer exists and you now have concerns about continuing dental treatment on this patient. Some other behaviors or actions that breach this relationship are: frequent no shows or last minute cancellations, non-compliance on referrals, ignoring treatment recommendations, refusal to obtain full and timely records for treatment planning, not following directions on medications prescribed, breaching financial arrangements (written and signed), as well as being rude, threatening or abusive to your team and yourself. There are many other examples.

Have you found yourself asking, “should I dismiss this patient from

my practice?” and/or “when should I dismiss this patient?” Not all patients are the perfect fit for your practice. You are allowed and might *need* to dismiss patients from your practice—and once you find yourself asking these questions seriously, it's time to take appropriate action.

Ending the relationship must be done properly. The Dental Practice Law of Colorado addresses grounds for disciplinary action as “failing to provide reasonably necessary referral of a patient to other licensed dentists or licensed health care professionals for consultation or treatment when the failure to provide referral does not meet generally accepted standards of dental care;” (C.R.S. 12-220-130(1)(w)). Failing to dismiss a patient from your practice properly could put you in violation of this provision. Here are some recommendations to include in a dismissal letter to the patient:


- Advise the patient to immediately seek the services of another dentist (you may refer them to an appropriate dentist or dentists for treatment)
- Advise the patient of the reasons for dismissal (i.e. failure to follow through with recommended treatment)
- Advise the patient of conditions that require follow up or evaluation
- Advise the patient that you will be available for any dental emergency for the next 30 days
- Advise the patient that you will provide a copy of their records upon receiving a Release of Information request and attach a copy of a release

to the letter (this can be obtained from the ADA or on tdplt.com). Remember, the patient is entitled to a copy of their records. Although you may charge for a copy of records, in this case it is probably best to just provide the copy at no charge.

Your letter should be sent both registered/certified mail and first-class mail. Retain a copy for the patient chart. Do not send a text or an email dismissing a patient! This places you at risk for a HIPAA violation.

What if the patient has a balance on their account? While sometimes hard to do, consider giving yourself the “gift” of writing off the balance and leaving a clean slate. Trying to collect at this point will most likely only prove to be a source of frustration and additional cost. Allow yourself to move on, let go and be happy.

What if the roles are reversed and you find yourself being dismissed by the patient? If this occurs, put your pride aside and follow the previously mentioned steps to ensure that the patient is aware of their continued need for dental treatment so there is no risk of abandonment on your part. Send a letter reinforcing that the patient has informed you of the change in practitioners and remember to make the patient records available upon request.

Finally, breaking up doesn't have to be hard to do. Communicate well and you can have a harmonious outcome. 

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