AgencyGod

THE FREE PLAYBOOK

AGENCY GROWTH · DENTAL · IMPLANTS · CLINICS

The Dental Practice Agency Playbook

Land $3K to $5K/month dental clients by selling them the patients they are already losing. One free audit shows a typical practice bleeds **$105,000+ a year** to missed calls and no-shows. You do not pitch "marketing." You pitch money the dentist can already see in their own data.

- The Empty-Chair Audit (the whole wedge)
- The 5-offer menu, easiest to sell first
- The reactivation campaign (their first win)
- Word-for-word outreach + 6-touch cadence
- Retainer pricing + real budgets
- 4 dental objection scripts

A playbook from **AgencyGod**
agencygod.com

$10K GTD

The $10,000 Guarantee
You get the result or you get paid.

THE EMPTY-CHAIR AUDIT

Do not pitch marketing. Show the dentist the money already walking out the door.

A dentist is the doctor, the office manager, and the marketing department, and the marketing always loses. So you do not sell ads. You run one free diagnostic that turns their own numbers into a single dollar figure of found money. That number is the wedge. It opens every door in this playbook.

Run this on the first call, live. Ask four questions, write their answers in the blanks, then read the benchmark beside each. By the time you reach the bottom row, the gap sells itself.

WHAT YOU ASK THE PRACTICE	THEIR NUMBER	THE BENCHMARK YOU READ BACK
New-patient calls per month	_____	**65.5%** of new-patient interactions start with a phone call (Liine, 2024).
Percent of calls actually answered	_____	Practices miss **28 to 38%** of calls in business hours; **58%** of those are new patients (Peerlogic).
Of callers who reach the desk, how many book	_____	Only **54.3%** of contacts convert to a booked appointment (Liine, 600k+ interactions).
No-show / broken-appointment rate	_____	Each no-show is **$200 to $400** in lost production (dental no-show data, 2024-25).
Active patients vs lapsed 12+ months	_____	**25-35%** of 6-12mo dormant reactivate; **12-18mo run ~12-18%** (use 15% when quoting). Dental recall data.

THE NUMBER THAT ENDS THE CONVERSATION

Missed and broken appointments cost the average practice **$105,000+ every year**, and that is before you count the new patients whose calls were never answered. Most dentists have never seen this math on their own practice. You are the first person to put it in front of them.

You are not selling ads. You are handing back the $105,000 already leaking out of the practice they own.

THE 5-OFFER MENU

Five things you can sell a practice, ranked by how fast they pay.

Do not lead with Google Ads. Lead with the offer that turns their existing data into cash this month, with no ad spend. Start at the top of this list, prove it, then climb to the high-ticket campaigns once they trust you.

1 FASTEST CASH	**Reactivate lapsed patients** Text and email the patients dormant 12 to 18 months. **No ad spend, their list, their data.** The single easiest first win, and the one on Page 5.	EFFORT **Lowest**
2 QUICK WIN	**No-show + recall recovery** Automated reminder sequences that cut the no-shows costing them $200 to $400 a chair, plus recall texts that refill the hygiene column.	EFFORT **Low**
3 HIGH LEVERAGE	**Missed-call + speed-to-lead capture** Text every missed call back in 60 seconds and book it before the patient phones the practice down the street. Recaptures the 58% of missed calls that are new patients.	EFFORT **Medium**
4 NEW DEMAND	**New-patient Google Ads + Local SEO** Now you turn on paid demand. Google Ads and a tuned Google Business Profile to put new general-dentistry patients on the schedule.	EFFORT **Higher**
5 BIGGEST TICKETS	**High-value treatment campaigns** Implants and All-on-4. Higher acquisition cost, but a single arch is worth $12,000 to $28,000. You sell this once they trust the machine.	EFFORT **Highest**

⚡ WHY THIS ORDER WINS

Offer 1 needs zero ad spend and pays in two weeks, so the dentist sees you work before they risk a dollar on Meta. **Land the easy win, then expand into the high-ticket campaigns where the real margin lives.**

THE ROI MATH, PER OFFER

A dentist funds your whole retainer on one implant case.

When the average patient is worth around $10,000 over their life and a single implant runs $4,800, the math is not close. Show the dentist the value of what you recover before you ever say your price. Anchor on their number, not a guess.

~$10K	$4,800	$12K-28K	$200-400
Lifetime value of a dental patient	Average single dental implant	All-on-4 full arch, per arch	Lost per no-show appointment
Dental Intelligence / RevenueWell	CareCredit / Authority Dental	Dental implant cost data, 2024-25	Dental no-show benchmark, 2024-25

Here is the line you say on the call. Pick the offer, plug in their numbers, and let the recovered revenue dwarf your fee.

WORKED EXAMPLE · THE REACTIVATION OFFER AT A $2,500/MO RETAINER

Lapsed patients dormant 12 to 18 months · pulled from their software	**600**
Reactivate at a conservative 15% · a small incentive books 8 to 15%	**90 patients**
Booked back at a modest $600 first visit · cleaning + exam + X-rays	**$54,000**
His cost to recover it (your retainer)	**$2,500**

He spends **$2,500 and reactivates roughly $54,000 in production** from patients he already paid to acquire years ago. And that is the easy offer, before a single implant. **One $4,800 implant case alone funds nearly two months of you.** That is the framing that makes a premium retainer feel cheap.

> **"I want implant and All-on-4 cases, not just cleanings, but the people who call are price shopping for a fifty dollar exam."**
>
> – The exact words of the dentist you are selling. Your campaigns target the patient who can afford the arch, not the coupon.

THE REACTIVATION CAMPAIGN

Their first easy win, built from patients they already own.

The practice has 3,000 patients in the software and half have not been in for over a year. Nobody is calling them. This three-message sequence goes to patients lapsed 12 to 18 months. Send it from the practice's own number so it reads as the office, not a marketer. Swap the red blanks.

MESSAGE 1 · DAY 0 SMS + EMAIL

"Hi {first name}, it's {practice name}. Our records show it's been a while since your last visit and you're due for a cleaning and checkup. We'd love to get you back in. Reply with a day that works and we'll hold a spot for you."

Why it works: no discount yet, just a warm "you're due" from a place they already trust. Most replies come from this first soft touch.

MESSAGE 2 · DAY 4 SMS

"Hi {first name}, still {practice name}. We held some openings for returning patients this month. New patients wait weeks for these. Want me to grab Tuesday or Thursday for you?"

Why it works: a real scarcity (returning-patient priority) plus a this-or-that close, so a "yes" turns into a booked time instead of a "maybe."

MESSAGE 3 · DAY 9 · THE INCENTIVE SMS + EMAIL

"Last one, {first name}. Come back this month and your cleaning includes a complimentary whitening / X-ray / exam, on us. It's our way of saying welcome back. Reply YES and we'll book it."

Why the incentive lands last: a small offer books another 8 to 15% who needed a nudge. Putting it third means you do not give margin away to the ones who would have booked anyway.

PRICING + RETAINER

When the dentist asks "what does this cost?" you answer with numbers, not a flinch.

A practice that already spends two grand a month on a "pretty website" with no idea if it works will gladly pay you, once you tie the fee to their own revenue and to acquisition costs they recognize. Quote from this table on every call.

THE LEVER	THE REAL NUMBER	WHAT YOU TELL THE DENTIST
New-patient cost, general	**$150 - $300**	"Against a $10K lifetime patient, that pays back on the first visit."
New-patient cost, implant / cosmetic	**$400 - $800**	"Higher cost, but one $4,800 case covers 6 of them."
Normal marketing spend	**5 - 10%** of revenue	"A practice your size already should be spending this. Most underspend."
Your monthly retainer	**$1,500 - $3,000**	"Less than one no-show day a week, and it recovers far more than that."

Sources: Liine 2024 dentistry benchmarks (acquisition cost, marketing spend); dental implant cost data, CareCredit / Authority Dental, 2024-2025; dental no-show benchmark data, 2024-2025.

Set the retainer off their revenue, not the air

The rule: 5% to 10% of practice revenue goes to marketing. A practice doing $1.2M a year should put roughly **$5,000 to $10,000 a month** into the machine. Your retainer plus ad spend fits inside a number they should already be hitting, so it never feels like new money.

QUOTING EXAMPLE · A $1.2M/YR GENERAL PRACTICE

Annual practice revenue · stated by the dentist	**$1,200,000**
Marketing at 7% of revenue · mid of the range	**$84,000/yr**
Monthly budget · your retainer + ad spend	**$7,000/mo**
Where your $2,500 retainer sits inside that	**A third**

THE CAPTURE + SHOW-UP BUILD

The ads ring the phone. The front desk takes a message. The patient books elsewhere.

A dentist can pour money into ads and still lose the patient at the desk, because the team is busy and "taking a message" is the top reason a caller never books. You install the system that catches the call and protects the chair. This is what they cannot buy anywhere else.

28-38%	14%	54.3%	~28%
Of calls missed in business hours	Of missed callers leave a voicemail	Of contacts convert to a booking	No-show drop from reminders
Peerlogic, 2024-25	Peerlogic, 2024-25	Liine, 600k+ interactions	Healthcare SMS reminder studies, 2024

Three pieces, installed in week one. Two plug the call leak, one protects the appointments already on the book.

1 Missed-call text-back (fires in seconds)

When a call rings out or goes to voicemail, an automated SMS hits the caller: "Sorry we missed you, this is {practice}. Are you looking to book a cleaning, exam, or something specific? Reply here and we'll get you scheduled." Since only 14% leave a voicemail, this recaptures the new patients who otherwise vanish.

Build with: a tracking number + GoHighLevel or Twilio. Trigger on "call status = missed."

2 60-second auto-text on every web and ad lead

The instant a form, Google Ad, or Facebook lead lands, an SMS fires inside 60 seconds, before the busy front desk can get to it. The reply opens a conversation while the patient still has the phone in hand.

Build with: form/ad webhook to a GoHighLevel workflow, SMS template pre-loaded.

3 The reminder + confirmation sequence

Every booked appointment gets a text and email reminder at 72 hours, 24 hours, and 2 hours, each with a one-tap confirm or reschedule. Automated reminders cut no-shows by roughly 28% (healthcare SMS reminder studies, 2024), and at $200 to $400 a chair, that is real money back on the schedule.

Build with: the practice's scheduling software + automated SMS reminders with confirm links.

⚡ THE WEDGE IN ONE SENTENCE

You are not "running ads." You are the system that answers every call in under a minute and protects every chair on the schedule. **That is what keeps the dentist paying you after the first month.**

WORD-FOR-WORD OUTREACH

How you reach the dentist and actually get a reply.

Generic "I help dental practices grow" gets deleted. Lead with the leak they feel every day, name the number, offer one small thing, and swap the red blanks.

DAY 1 · THE OPENER — EMAIL

Subject: the calls {Practice} is missing while you're chairside

Hi Dr. {last name}, I pulled up {Practice} and you're likely missing 1 in 3 new-patient calls during business hours. That's roughly ${X} /month booking down the street. Want the 90-second breakdown for your office?

Why it works: names their practice, their exact leak, and a dollar figure. One small ask, no "grow your business." Reaching a busy owner takes about 3 attempts, so run all six touches.

DAY 2 · THE CALL — PHONE + VOICEMAIL

"Hi, this is {name}. The reason for my call is I ran the missed-call numbers for {Practice} and there's about ${X} a month leaking out. I'll text you the one-pager, takes 90 seconds to read."

Why it works: "the reason for my call is" lifts booked meetings 2.1x (Gong, 90,380 calls). Then point them back to the email.

DAY 4 · THE PROOF — EMAIL

"Dr. {last name}, here's the one number: only about half of the patients who do reach your desk (54%) end up booked. The rest get a "we'll call you back" and never do. I close that gap with a 60-second text-back. 10 minutes {Thursday}?"

DAY 7 · THE LOOM — EMAIL + LINKEDIN

"Recorded you a 2-minute screen share showing exactly where {Practice} loses patients, from your Google listing to your booking flow. No pitch, just the leaks. Want me to send it?"

Why it works: a personalized Loom proves you did the homework and shows the gap on their own practice, not a generic deck.

DAY 10 · SECOND CALL · DAY 14 · THE BREAKUP — PHONE / EMAIL

"Last note, Dr. {last name}. I'll close your file. If recovering the ${X} /month in missed calls and no-shows ever moves up your list, just reply here and I'll jump on it. Either way, good luck this {quarter}."

Why the breakup works: "I'll close your file" triggers loss aversion and reliably pulls more replies than another "just checking in."

NICHE OBJECTION SCRIPTS

A dentist has heard the pitch before. Have the answer ready before they say it.

Dentists are skeptical for good reasons. Each objection here gets a clean, specific answer that turns their last bad experience into your proof. Say these word-for-word, then point back to a number.

1 "I already have a marketing person."

SAY THIS **"Good, then this is easy to test. Have them tell you what percent of your inbound calls got answered last month, and how many lapsed patients they reactivated. If they can't, that's the $105,000 leak I'm talking about. I'll show it to you in 10 minutes for free."**

Why it lands: you do not attack their person. You hand them one question their person almost certainly cannot answer, and that gap becomes your opening.

2 "I'm already booked out three weeks."

SAY THIS **"That's exactly why now is the time. Booked out on cleanings means you have no room to chase the cases that actually pay, the implants and full-arch work. I don't bring you more $50 exams. I fill the chair with the $4,800 cases you want and reactivate patients you already own."**

Why it lands: "fully booked" feels like a reason to say no. You flip it: being full of low-value work is the problem, and you sell the high-value mix instead.

3 "My last agency burned me."

SAY THIS **"I hear that a lot, usually it was a pretty website and a report full of impressions you couldn't connect to a single patient. So I don't start with ads. I start by reactivating patients you already paid for, no ad spend, and I put $10,000 on the result. You get the patients back or you get paid."**

Why it lands: you name their exact scar (the impressions report), then de-risk it with a no-spend first offer and the guarantee. The guarantee is the proof, not a promise.

4 "I get all my patients by referral."

SAY THIS **"Referrals are your best patients, keep them. But 65% of new patients still start with a phone call, and you're missing a third of those. Referrals don't fill the implant chair on a slow January. I do, without touching what's already working."**

Why it lands: you validate referrals instead of fighting them, then point to the seasonal gap and the missed-call

THE LAUNCH CHECKLIST

From signed contract to a fuller schedule, in four weeks.

A practice goes cold in the first month when nothing seems to be happening. Beat that by setting the expectation up front: week one is the easy win from their own list, paid demand comes after. Here is the run order, then the audit you run before you ever pitch.

Week 1 — EASY WIN

Launch the reactivation campaign

Pull the 12-to-18-month lapsed list and send the 3-message sequence from Page 5. **This books patients in days, with no ad spend, so the dentist sees you work before risking a dollar.**

Week 2 — PROTECT

Install capture and show-up

Stand up missed-call text-back, the 60-second auto-text, and the reminder sequence from Page 7. Every call now gets answered, every chair gets protected.

Week 3 — TURN ON DEMAND

Launch Google Ads + Local SEO

Now bring new patients in. Search and Local Services campaigns plus a tuned Google Business Profile, targeting general patients first, then the high-value implant terms.

Week 4 — PROVE

Report on booked patients, not clicks

Show the one number that matters: patients booked and production recovered. **Never send a dashboard of impressions. Booked patients is the metric that renews the retainer.**

The pre-pitch Empty-Chair audit

Run this on any practice before the sales call. Every "no" is leverage you name back to them.

- ✅ Call the practice line during business hours. **Did a human answer, or did it ring out? Time it.**
- ✅ Fill out their website form, or ask about an implant. **Did anyone text or call back, and how fast?**
- ✅ Check their Google Business Profile. **Reviews recent? Booking link live? Photos current?**
- ✅ Search "dentist + their city." **Are they running ads, or invisible below the map pack?**
- ✅ Count how a new patient can reach them. **Phone, form, text, chat. Where are the gaps?**

YOUR NEXT MOVE

You can build this machine yourself. Or we can build it with you.

This playbook is the system on paper. AgencyGod is the system done **with** you: we build the Empty-Chair audit into your sales call, stand up the reactivation and capture machines, write the campaigns that fill implant chairs, and sharpen these scripts to dental, so practices stay booked and so do you. It's backed by the $10,000 guarantee. **You either get the result or you get paid.**

Every month you pitch "marketing," another dentist hears "agency" and hangs up. We onboard only a handful of agencies a month so we can actually deliver, and **every spot carries the guarantee.** Read this, run it, then come map your machine with us.

$10K GTD You get the result or **we pay you $10,000**

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