Dion Health

PATIENT ENGAGEMENT · SCHEDULE · ACCEPTED ARCHES, SECOND ARCHES, MAINTENANCE · PIKOS SYMPOSIUM 2026

Your accepted-but-unscheduled arches, your cancelled surgical days and your single-arch patients are next month's production. All three lists worked every day — without anyone having to remember.

He left with a fixed upper. Nobody asked about the lower. Schedule every accepted arch. Fill every cancelled surgical day. Book the second arch and every maintenance visit. Nothing waits for someone to remember.

Talk to our team · hello@dionhealth.com

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COUNTED · OUR OWN PRACTICE

1,066
of 1,285 patients seen in two years with no next appointment; 426 of them nine to eighteen months overdue

1,616
patients last seen eighteen to forty-eight months ago, never back

480
cancellations in twelve months. A waitlist worked live backfills about half

SOUND FAMILIAR? TICK WHAT IS TRUE OF YOUR PRACTICE

- [ ] The accepted-but-unscheduled list stops being worked the week someone is out
- [ ] A cancelled surgical day is an empty day, not a call to that list
- [ ] Nobody asks the single-arch patient about the second

WHAT PATIENT ENGAGEMENT RUNS — TRIGGER, WHAT DION DOES, WHAT YOU SEE

WHEN	DION	YOU SEE
An arch was accepted and never scheduled	Follows it up until it books, with financing where it fits	Accepted arches on the surgical schedule
A surgical day opens up	Works the accepted-but-unscheduled list immediately — first yes wins, never a double-booking	Half of cancelled surgical time filled
Treatment was presented and declined	Follows up on a cadence, with financing at the right moment	More of what you present, accepted
A single-arch patient is six months out	Opens the second-arch conversation	Second arches you would not otherwise have booked
A fixed-prosthesis patient is due	Runs the maintenance cadence — the six-monthly visit under the prosthesis	Maintenance visits on the books, and implants that last
A patient has lapsed	Builds the cohort, runs the reactivation ladder, hands the reply to a person	About 15% back, when someone asks
Before any message, from any product	Checks consent, quiet hours and opt-outs	Nothing sent that should not have been

Schedule every accepted arch. Fill every cancelled surgical day. Book the second arch and every maintenance visit. Nothing waits for someone to remember.

THE LINES IT MOVES ON YOUR ANALYSIS

Schedule accepted arches sitting unbooked	25% within a year
Convert more of what you present	30% of the gap
Fill cancelled surgical time	50%
Bring back lapsed patients, second arches, maintenance	15% respond

IN AN IMPLANT PRACTICE

The patient who accepted an arch and never scheduled is still yours. At $20,000 an arch, working that list is the highest-value call in the building.

WHAT YOUR TEAM KEEPS

- The surgical schedule — the surgeon keeps the day
- The consult conversation
- The decision on who gets a personal call

WHAT IS ACTUALLY BUILT

It holds consent for the whole suite — nothing texts or calls a patient without checking here first. Online booking, recall, waitlist, intake and forms, reviews and referrals are built; consent signed remotely lands in the clinical record, not in a second list that can drift from it.

READS

Your appointment book — cohorts are built from actual visits · Your consent record, migrated opt-outs first · Treatment plans, for the follow-up lists

RETURNS

Recall, lapsed and treatment-follow-up cohorts, worked · Booked appointments and a filled waitlist · The consent log for the whole suite

YOUR FIRST THIRTY DAYS WITH IT

Appointment book read · consent migrated, opt-outs first · accepted-but-unscheduled list on the coordinator's desk · surgical-day backfill on · second-arch and maintenance cadences live · the first reactivation wave sent.

BEING STRAIGHT WITH YOU

Consent is migrated carefully, not the same day: opt-outs travel first, then everything else. Cohorts are built from your real appointment book, so the first reactivation wave goes out once that book is read — usually week three.

COUNT YOURS

Accepted arches not yet scheduled, $	_____
Single-arch patients never asked about the second	_____
Cancelled surgical days last quarter	_____

Your first thirty days with Patient Engagement.

Every office is onboarded in one month with a named person on our side. Patient Engagement is one function of the nine; it reads the same practice record as the others, and your practice system is read in place — nothing migrated, nothing modified. It comes with a team: a dedicated account manager, training for each role, and the numbers delivered to you every morning, every night and every month.

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- Consent migrated, opt-outs first
- Accepted-but-unscheduled list on the coordinator's desk
- Surgical-day backfill on
- Second-arch and maintenance cadences live
- The first reactivation wave sent

SOUND FAMILIAR? TICK WHAT IS TRUE OF YOUR PRACTICE

- ☐ The accepted-but-unscheduled list stops being worked the week someone is out
- ☐ A cancelled surgical day is an empty day, not a call to that list
- ☐ Nobody asks the single-arch patient about the second

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Start with your numbers. Three figures off your last P&L and the analysis returns your own addressable overhead and your own recoverable revenue, line by line. It cannot show a Dion price — that arrives only after we have read your numbers together.

console.dionhealth.com/analysis

See it live, on the practice it runs today.

A 15-minute walkthrough with our team — no preparation, no commitment.

www.dionhealth.com/pikos

Or start with your numbers: console.dionhealth.com/analysis