

Up Your Leadership, Up Your Profitability

Howard Speaks Podcast 044

Tuan Pham

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Websites, Emails, Phone Numbers and Products Mentioned:

- Dental Maverick - <http://dentalmaverick.com/>
- Carnegie courses for communication and leadership - http://www.dalecarnegie.co.za/secrets_of_success/?keycode=google_ZABranded&mkwid=spjbxDvbH&pcrid=54982283099&MatchType=b&pkw=what%20is%2Bdale%20%2Bcarnegie&placement=&pdv=c&utm_source=google&utm_medium=cpc&utm_term=what%20is%2Bdale%20%2Bcarnegie&utm_campaign=DC+-+Branded
- CBCT - <http://www.carestream.com/cbct-panoramic.html>
- Periolas - <http://www.lanap.com/periolas.php>
- CEREC - <http://www.cereconline.com/>
- MC XL milling unit - <http://www.sirona.com/en/products/digital-dentistry/inlab-labside-solutions/?tab=248>
- Orasoptic - <http://www.orasoptic.com/>
- LumDent - <http://lumadent.com/>
- Design Ergonomics David Ahearn - <http://www.desergo.com/>
- MD740 Intraoral Camera - <http://www.intra-oral-cameras.com/USB-dental-intraoral-cameras-MD740.html>
- Google Maps - <https://www.google.com/maps>
- Best Local Reviews - <http://bestlocalreviews.com/>
- Tuan Pham - tuan@dentalmaverick.com
- Tuan's thread on the Dentaltown forums for [Using Google Maps to find your future office location](#)

Howard Farran: Today it's an honor to be talking to one of my favorite Townie's of all time and my God, you're coming up on 8000 posts on Dentaltown, you're a legend on Dentaltown and I love your karma, I love your energy and I can't believe how much you've done in such a short time. I'm 52, you're only 35 you could be my kid. You could be my son. You're crushing it and you're just high energy, you're smart, you're attention to detail, if there's any dentist who's just crushing it on every detail, it's you dude. How does it feel to be like the American dream dentist?

Tuan Pham: Well I appreciate your comments but I just enjoy doing this. I don't think too much about it. They always say nothing is work if you enjoy doing it and some of the people on Dentaltown, they're like you work too much, you spend all your time doing this stuff but I love it. Right now it's what I want to do, it's what I focus my energy on and at least I'm not sitting around wasting my day drinking beer or something like that, so I might as well put it to good use. I enjoy it.

Howard Farran: Yeah and it comes through loud and clear that you're doing this, I mean it's not even work for you, it's your life, it's your passion, it's your hobby and you're just so high energy and good karma and even perfect hair, you have perfect hair and perfect teeth. You're making me feel extra bald today buddy. Extra old.

Tuan Pham: I was going to say I never had braces when I was younger so I think I was meant to be a dentist.

Howard Farran: That's a good one. So first of all talk about your discovery. How did you get onto the Dental Maverick, I mean you have a very interesting feedback that everybody on Dentaltown talks about and loves. I was talking to you before the show, that your website, your 48 videos, I wish you'd put like your first one on Dentaltown just so the one stumbling through can see it and get turned onto you. How did Dental Maverick come about and tell us about that.

Tuan Pham: Well you know, I'm going to go back in time for a little bit. I found Dentaltown a long time ago, like in 2007 and I think one of the things you say about Dentaltown is you never practice alone. I believe that's what you say and it's absolutely true. When I first became a dentist, I think we all learned traditionally meaning that most dentists, they have an associateship, they work for someone, something like that and they learn from the dentist that is their boss or their leader or something like that but a lot of the information that we learn from them, it's who did this boss guy learn from? Another guy that he worked for. So we learned very traditionally and that may be great but when you find a place like Dentaltown or something like that, you see the possibilities of every type of dentist.

Like when I became a dentist, I thought I'd work for this dentist and he told me it took him 10 years to become successful and I thought that's what I'm going to do because that's what he did. But then I found Dentaltown and I found that whoa, there are all these dentists that are successful. There are some that are less successful but there's a mixture of everything and from this you can learn everything so I decided at one point I'm going to open my own practice and I want to be successful. How can I emulate these successful doctors, so I read everything on Dentaltown, I think I spend one year reading three hours, four hours every day. That's all I did. So I gathered all the information- good and bad. I learnt from people's successes, non-success stories, how they responded to things and I inputted it all in my head so I can put it into my personal business.

As I grew my business, I've always wanted to be some sort of teacher so Dentaltown, in the ability to type and communicate with other dentists is great because it gives me an outlet to just- I enjoy this, like I said and it gives me the opportunity just to talk to people and then eventually I think at least I do fairly well enough, at least in my eyes and then

people started messaging me over time. They said hey, you know what, you've got some good information, why don't you ever teach some of this stuff, and I never took it too seriously.

One day, I do a lot of things and one of the things I do is I run a business group in town so the people in my group were like I know you don't work Fridays and I know all you do on Fridays is sit around and watch TV and drink some beer, why don't you do something with your time? And I was like you're absolutely right! I'm going to do this! So it took me a year to write this and I wrote over 160 pages of text and I edited it and I started creating this and here we are and so I enjoy doing this, like I said that's my story so far.

Howard Farran: So Dental Maverick is a book and a website with videos in?

Tuan Pham: Well I had to write the text first for myself personally so it's like a script. I wrote it for myself and it gives me the ability to edit it and reposition it because when I first wrote it, it was just like a stream of consciousness, like I wrote it. I didn't like the format, I didn't like the layout, I didn't like how I ordered everything so I had to reedit it and eventually- I should copyright it and eventually make it like a book and just release it as a book but for the moment I was thinking like I wanted to do something visual with audio and with video there's stuff on the background because everyone learns differently. Like there are some people that are just pure audio and they just want to listen to it in the car, but there are other people that like seeing someone visually, the expression of it.

When I do these videos, I'm pretty into it. I'm pretty motivated by it so I hope that translates too because if I'm really into this and someone's watching it and they see the energy and they see how I really believe in this, then they're more prone to believe in it. So that's why we did videos. Some people read with a book, eventually we just have text or something like that or maybe I could just give a copy to all the people that sign up for this as a text, but I think this way I cover all the bases because people can watch me and they can listen or they can turn off the screen if they want and just listen or some people can just look at it.

Howard Farran: I personally think the videos are also better for like when you're at home, you're significant other is watching it together like a social event and your videos are perfect for staff meetings where you can sit there and say, okay we're not going to see patients for an hour and let's look at this guys energy and feed off that. You know what I think you should do with your text? Your 160 pages of text? You're talking about writing a book. The reason I started getting into the podcasts and I've now done like 50 of them is the fact that this new smartphone- when I was your age, you're 35, when I was 35 there was no cellphones. Nobody had a cellphone unless you had some

government guy with the huge brick phone and a briefcase with a big battery and plugged it into your car lighter.

Now what I'm seeing with all the young dentists and all the dental school's are telling me is they like to do podcasts because they like to multitask. They like to- I've had most common feedback I've been getting on these are that I do it while I'm an hour on the treadmill.

Tuan Pham: That's what I do.

Howard Farran: Yeah, I do it- this lady dentist up the street from me says Saturday mornings it takes her about four hours to do all the week's cleaning and laundry and all that stuff and she says I listen to four of them back to back every Saturday morning doing that stuff.

So on your text, the next thing we're going to do is audiobooks because I've had literally hundreds of books given to me over the years from dentists and you should do the first one. You just read that, it would probably take like six hours and do the first audiobook on our new Dentaltown app. I'm scheduled to go into a sound booth and read my book for six hours and that would be awesome that way.

So what do you want to start with? Talk about why you created Dental Maverick course? Bridging the gap with traditional consulting and weekend courses?

Tuan Pham: Sure. I think there's a place for every type of educational format. I feel like I'm bridging the gap between traditional consulting and weekend courses but certainly there's a benefit to everything.

For example, weekend courses are great but the downside is you have to take off time to travel and you lose production and basically all the data you want to learn, all the information is compressed really greatly into this short time frame. I don't know about you but a lot of times if I learn something new it takes time for my brain to absorb and marinate in my mind. I've gone to some great courses and I go home and I think about it and even though I have the manual, the textbook or whatever I learned, I only remember certain key points. I don't feel like for weekend courses you get the advantage of having the ability to let some of these major topics, even though they might be very simple, to absorb in you so your mind processes it.

On the other hand, traditional consulting is great. It's awesome because if you want to, I feel like if you want to abate to your responsibility you can have someone to hold your hand. They can take over all the responsibilities for you. They can manage your staff, they can teach your office systems, they can enforce the systems but the downside to traditional consulting is that one; at least I feel, your leadership skills may not grow like

you want to because you're offloading the duties to someone else and secondly; what happens when you end your contract with them? If you don't have the leadership skills then you may have all these systems and checklists, but if you don't have the leadership to enforce these or keep your staff accountable for it then you start tapering off.

Howard Farran: I'm going to stop you right there because I think that's a big concept. Do you think leaders are born, do you think that you're just either born a singer, a dancer, an athlete or a leader, or you're not? Yes or no on that. Do you think you're born a leader and if you think maybe I wasn't born a singer, song or dance writer or athlete, whatever- first of all, how do you define leadership and how do you develop leadership skills? Because you did it at an incredibly young age.

Tuan Pham: Sure, I think that's a great question. I personally believe that there are certain things like physical things that you just can or can't do, like I'm five foot five, okay, I can't play basketball, I'll never play basketball well enough to be on the NBA, you know. I don't have a beautiful voice, I can sing but who wants to really listen to me sing terrible karaoke? So there are physical activities. I believe that anyone can learn sets of skills for anything.

Like most people on Dentaltown, if they see me and they see my posts, they think I'm this type of person, and I am now, but if you knew me years ago especially before I started and I signed my note for whatever money to build my own office, I was a different person. I was very quiet, I was very introverted. I didn't voice my opinions very much but then one day I signed this big fat loan to build my office and I'm like, I have three options; I can sink, I can swim and barely tread water or I can be like Michael Phelps, because this was during the time when Michael Phelps was doing the US Olympics.

Howard Farran: So you started smoking pot? You were with Michael Phelps and started smoking pot?

Tuan Pham: Back in the day. But in any case, I decided that I'm going to be successful and I thought about it, how can one be successful? And so like I said I was reading Dentaltown, I thought about all the doctors I've worked with and I've worked with some very successful doctors and I realized there's a common theme.

Some of these doctors that are very successful, they enjoy going to work. They enjoy talking to people. They are in general more extroverted. They are more- they take up a leadership skill and they're not afraid of it. So I thought about all these things and I was like, okay, how do I learn this now? I thought to myself, if I can learn how to bond, composite, I can learn how to prep a crown, I can learn how to do all these fancy dental

technical things, why can I not personally learn how to be a better leader and a better communicator?

So well I started reading Dentaltown, I read as many books as I could and I read a ton of books, I don't remember all the books I read and some of them I read part way and then I find the golden nugget of that I like and then I put it down, but I've read a lot of books and I think anything can be systematically learned.

So in dentistry or any career actually, I think if you want to be successful then you have- in my program, one of the things that I've broken down to is I've taught people to, and it goes in stages, but the program starts out with examining yourself and seeing truly who you are because I believe that we hold ourselves back and from that I do certain things to build your confidence and eventually we go to leadership and management of your staff and everything's built in a series of steps, just like in dentistry.

If we can break down things in a series of steps that you follow sequentially, then anyone, especially a dentist, can learn this. I try to do it in a certain way where we step out of our comfort zone just a little more every time because I think the biggest thing about dentists is that we are stuck in our comfort zones. Most dentists, at least the ones I meet, tend to be more introverted and if you're introverted naturally it's harder and scary to step out of your comfort zone a little. People ask me; why don't you just teach me staff management right away. I'm like if you're afraid to look someone in the eye and tell them to do something right away, I can't jump to that.

So if I can build you up in little steps, like teach you how to talk to your patients better because patients are more transient, they come in and out, you don't see them all the time, it's not too personal right away. If we can build your confidence in talking to them then you get more treatment plan acceptances as a result of it. You're feeling better, you're like I'm a little more confident, and then from there we can transition into hey, let's talk to your staff. We can do it this way or that way and then eventually you can look your staff in the eye, tell them what they need to do and if they don't do it then you're like- I believe anything can be learnt. Anything can be learnt especially if it's presented to you systematically.

Howard Farran: So what are the low hanging fruit common problems you see in dentists and leadership? When you talk to dentists, where are they failing in leadership? What do they need to focus on?

Tuan Pham: Sure. At least from my personal point of view, I have some dentist friends, I don't have too many dentist friends, but a lot of dentists I meet, one of the biggest things that I hear commonly is that they let things boil up. Like for example, you've heard of dentists where they just boil up their staff, they get mad, they throw something down or they fire someone on the spot. Well there's really no reason for that. Even

some of my good friends I hear they had this assistant, she's not doing this or that and then one day he's like I'm really fed up with this, I'm thinking to myself why haven't you just talked to her this whole time?

I guess part of the things is that most of us are afraid of confrontation. We don't want to confront someone and we may be afraid to hurt their feelings but what happens is they by doing so it bottles everything up and in the end you might make a rash decision. A lot of these things that occur for someone that bottles things up, it's simply because maybe the staff didn't know what you expected or maybe it's your fault, you never voiced to your employee what they should do in this situation or if they were doing something you didn't like you never corrected them. So over time these little things just build up and then they accumulate. So I think most dentists, if they just recognize and in the lecture I break down four reasons why management of staff is needed, they just recognize this then they can address these at very early stages where it's actually nothing.

A lot of these little things, if you just told them what you expected right in the beginning then you don't have to let it fester for a year.

Howard Farran: I tell dentists, I can't believe my assistant does that or I can't believe my hygienist is this and I tried telling them, I say well why do think your hygienist does that and a palm tree doesn't do that? Why does your hygienist do that, don't compare your hygienist to another hygienist compare them to a palm tree. I believe a lot if this is hard wired at birth and we're a social animal so our success was based on that a group of 25 monkeys, we all work together. So you're hard wired not to disrupt the group and to be confrontational. You're hard wired like we need to get along and if that hurt my feelings or I don't like that I've just got suck it up and then one day they explode.

So I'm always telling people that you have a little 5% frontal cortex that should be able to understand how that 95% unconscious is hard wired. So you just want to hold it all in but you have to out think that and say wow, we can argue facts but we can't argue feelings and this is really pissing me off and I need to smile and say hey, you know, when you do that, that really bothers me. They just need to let the air out a little all the time instead of just popping one day.

Tuan Pham: Sure.

Howard Farran: How would you recommend a dentist develop their leadership skills?

Tuan Pham: Well personally what I did, for anyone actually, if you want to develop leadership skills you can read 15 million books, you can read the experiences of all the successful people on Dentaltown and the unsuccessful people also because really you can find a trend about why people are successful and unsuccessful. You can go to

courses, you know Carnegie courses that teach you communication and leadership or you can take my course because it distills all the information for you!

Howard Farran: And by the way everybody that talks about your course to me said that they just love it and Howard Goldstein who's in charge of online CE and the message boards and we both agree that my God, everyone is your fan. No one has ever watched one of your videos and said that was a waste of time, I didn't learn anything. They're just like my God, that guy is awesome. How long has that been up?

Tuan Pham: I've only had it up for about a month. The feedback from it's very good and I have personally no idea or expectations how big this course is supposed to grow or how fast it'll grow, how many people will use it but it's doing pretty damn well.

Howard Farran: It's 48 lessons, right?

Tuan Pham: Yes.

Howard Farran: And how long is each lesson?

Tuan Pham: I believe the average lesson is at least 15 to 20 minutes, so it adds up to quite a bit of information.

Howard Farran: I still think that you should put the first one or two or three on Dentaltown as a teaser so they get turned onto you, you know they're right there on the site anyway and they get to listen to one or two so if you want the whole kit and caboodle go to your website Dental Maverick.com.

Tuan Pham: Sure. I'm going to message Hogo after this.

Howard Farran: And I think a lot of dentists before, they're probably wondering right now, first tell us about your office. Are you a clinic, are you a small office? Are you three ops, thirty ops? What type of dentist are you? You're in Austin, Texas right?

Tuan Pham: Yes, I'm in Austin, Texas.

Howard Farran: So I'm thinking everything's bigger in Texas so you must have a 300 operatory practice with oil wells on each corner and fracking underneath it.

Tuan Pham: That would be awesome but no. One of the things I talk about is your vision. Whatever you want to do in your life, you should truly know in your heart what your goal is because if you don't know what your vision is everything you decide for your office in terms of anything, marketing, hiring, design and build out your office will affect if you reach that goal.

Early in my career I've worked in every type of business, I've worked in a Medicaid office, it was very high volume, I saw a patient every 30 minutes.

Howard Farran: Are these all in Austin?

Tuan Pham: Yes, all in Austin. Yeah I did Medicaid, I did high volume PPO and I did fee for service and then of all the types of businesses I worked on, when I opened my own place I decided that I wanted low volume, high quality service, high time to the patient to impart the value and personally I have a back issue so it allows me to work at the pace that I want to do and not burn myself out. So my practice is not big. I actually have plumb for seven operatories but I don't use seven. I use two of them for storage, I use two for myself, I've got three for my hygienist but I've got two hygienists so the one's like an overflow room so it's low volume. One of the things I do when I see patients per day, I really see about four to five doctor patients a day, I don't like to see more volume because I feel like I can't impart the value, I can't do the work that I want to do and so this is the type of office that I wanted, this is my vision that I accomplished.

Howard Farran: So let me ask you the big bad grizzly bear out there in dental world is chain dentistry. Do you think, you're 35, do you think when you're 65- the CEO's of these chains are saying that half the people in dental school right now will never own a practice. Do you believe that? I mean you're 35, when you're 45 or 55 or 65, let's say 45, ten years from now, do you really believe that half the dental students in dental school today will never own their own practice and can't even do anything you're talking about or do you think, what do you think about corporate dentistry?

Tuan Pham: I think unfortunately I'm not a fan of corporate dentistry because it's owned by- in many cases you have to be officially a dentist to own the chain but they hide it under rules and contracts and stuff like that. I think corporate dentistry is unfortunate because it's run by people that are business people, solely business people and they're all talking about the bottom line dollars for their company.

The downside to dentistry as many people discuss is that the cost of dental education is costing so much now. When I graduated it was still a lot, it was like \$120 000 in loans where now for many schools, especially private schools they're going up to \$300 000, \$400 000. There's a guy that's close to like \$450 000 and if you break it down to what you have to pay per month that's so much.

If I were out of school and I had that debt load, well there's two ways of thinking about things. I believe that the traditional form of thinking is that, you know what I'm going to get a job and I'm going to work hard, physically hard, see more patients to pay off my loan and that's how the average person thinks. And that's alright, they're going to work and who offers these jobs the most? Corporate dentistry. So I think eventually yes, more people will work for corporate dentistry because we are burdened with the high

cost of dental education. I'm kind of an outlier I think, I don't really think like the average person I think, so if I had \$450 000 of loans or whatever I would say to myself okay, I could work for a chain act, work my butt off or how could I get ahead real fast? I'm a kind of risky guy. I would learn as much as I could. I would roll the dice and buy either a very successful practice or take a big loan on top of my loans, build my practice, ramp it up, learn everything on marketing, management, how to drive patients to my office, how to retain these patients.

I would do everything to build myself up so I could pay off my loans real fast. In my case I paid off almost a million dollars worth of loans in under five years. I'm just like I'm going to get rid of this debt because I bought a CEREC machine, I bought a periolase, I bought all the things because that's the style of dentistry I want. That's not the average person so to answer your question, unfortunately I think as time goes by we will have more people that work for corporate dentistry because we are burdened by the debt of dental school. And it's getting ridiculous because it's profit center for dental school.

Howard Farran: Okay so you're talking about the burden of debt from dental school, what about the burden of debt, I notice on Dentaltown I always look at what people are searching each month. Obviously if the item cost \$100 you're not going to spend three hours deciding which one to buy but if something cost \$100 000, you're going to spend tens of hours figuring out where to save. So there's some big high price stuff out there so talk to these people out there who are looking at like \$100 000 to go from a 2D to a 3D X-ray machine like a CBCT, or \$100 000 to go from using a lab up the street to CAD/CAM or \$50 000 to go from no laser to a laser. Talk about, would you mind talking about those big cash decisions?

That's when they're really starting out. That's where Dentaltown- when I say no dentists have to practice solo again, that's when the reps then giving them their pitch, they're like I don't want to be pitched by a rep, I want to log onto Dentaltown and talk to all these amazing minds like yourself. Talk about those three very expensive decisions.

Tuan Pham: Sure. Reps, when they come to you they're just like any business person. It's their job to sell things, I fully respect that but I'm the type of person, I never make a decision on the spot. You might tell me everything, I might make the decision five minutes later when you've left but I never make a decision on the spot because I like to do research.

I think Dentaltown is great because there's so many people who will give you feedback personally if the product is successful for them or not.

But to answer your question about these expensive products and what you buy, once again, I think your vision of what your office will be, what the type of practice that you

want to work in ultimately determines everything. If I work in a high volume Medicaid office, do I want to buy a periolase or a CEREC machine?

Probably not because some of those procedures are really time consuming. The population of patients that would come into my office probably could not afford some of the procedures I offered, so I wouldn't buy those machine.

If my office were fee for service and I had a lower load and I have types of patients that are into these procedures, if my population of patients value certain services more then I would buy those machines. When it comes to buying products, I think everyone should research the product itself first but then really think about your office.

Will it fit in with my style of practice and what I want? If my style of practice doesn't fit with this then it's okay not to buy these things. You have to make that personal decision for yourself but it has to match your vision about everything and what you truly want and what you're truly aiming for has to match up.

Does that make sense?

Howard Farran: Yes it does, and to me, and I went to MBA school at Arizona State University and I just see that as market segmentation like there's a Chevy, a Pontiac, an Olds, a Buick, a Cadillac and I love my area. I'm in Phoenix for like one quarter of my five mile pie is the Guadalupe Indian Reservation where most people have dirt floors and I love those people to death and I see dentistry as I'm a doctor. I'm there to help you, rich, poor, it doesn't matter. I love those people, I love doing an extraction and then the next lady might be middle class and the next lady might be expensive and I like doing all those procedures.

So which of those three did you buy? Did you go CBCT? I know you went CEREC. Did you go CBCT? Talk about that decision you made. Because people realize now you're a low volume, high quality, spend more time- that is your unique selling proposition.

If it was a car, what would you call it? If the analogy to your practice was a car, would you say it was a Chevy, a Pontiac, an Olds, a Buick or a Cadillac or is it like way out there Lamborghini?

Tuan Pham: Oh no, I'm not a Lamborghini, I'm probably like an Audi. I'm like a German luxury car. I'm not an exotic Italian car where I do super high-end full mouth rehab cases, no. Actually my practice is really bread and butter. I do quadrant dentistry. I refer a full mouth rehab. I do very routine cases. That's what I enjoy to do.

No, I do not have a cone beam machine. I have a CEREC machine, two milling units.

Howard Farran: Two milling units?

Tuan Pham: Yeah because one of them is older so I bought the MC XL.

Howard Farran: Talk about that decision; why did you spend six figures on a CEREC machine?

Tuan Pham: Control. When I do dentistry I like to be fool proof. I like to take full arch impressions, I like to make sure I see every single thing in my margin, I don't want to think about anything. I like to be as straight forward as possible so that when I sent it to the lab they have to think about it even less.

The problem is, even though I like to use personally local labs because if there's just a mailing issue, communication issues, they're just down the road, they're in town, it's easy just to talk to them. The problem is I could never personally myself find a lab where I would do things and things would just slip in with minimal adjustment.

Even if I took, at least to myself, beautiful impressions that looked flawless I didn't have the control like I wanted to. So I decided to get a CEREC machine because that gives me ultimate control. If something doesn't fit right it's ultimately my fault. Was my margin not as smooth? Did I know pack the cord clearly enough so I could see my margins and trace it without even thinking about it? Did I image it with an undercut? Did I image it incorrectly? Did I under powder it, over powder it? It's all me.

If the contact is high, did I leave it on the computer too high or did I not check how the patient was biting down on the sides of the buckle bite? It's control.

One of the things I'm doing now is, I like for implants I like to do custom abutments. I like to have everything custom because I want a nice emergence profile and I want all these things and I switched labs because I had problems with my local lab and then my new lab that I'm using, I get these crowns back and I would adjust the occlusion too much.

So I said you know what? I'm going to learn myself. I've been watching nothing but CEREC doctor videos, I've got all my parts in and I'm excited because I got my first case of milling my first abutment coming up so it gives me the control.

Howard Farran: Are you placing the implants?

Tuan Pham: No, I actually, unfortunately I'm not one of those dentists that place the implants. What is the percentage of general dentists that place implants?

Howard Farran: Well essentially in the United States, so there's 220 countries, in the United States where we have 150 000 dentists and 25 000 of them are specialists, general dentists hardly ever place implants but when I go to Brazil and India and China, where they really don't have the nine specialties, they all place implants.

It's amazing because you go to China, their total length of time- in America we say dental school is four years but did you have a four year undergraduate degree?

Tuan Pham: Yeah but I finished in three. I'm a nerd.

Howard Farran: So did I, I did mine in three too, but we all have eight years of college pretty much. You and I have seven but in China pretty much everybody, total school is maybe only four, five or six years and they're all placing implants.

Brazil, it's kind of funny when you go to the four fastest growing economies of BRIC- Brazil, Russia, India and China, but when you go to Brazil, India and China you have two traditional schools. You have the old British Empire type schools where they do four years undergraduate and four years of dental school. Then you have the private schools and my God, like in Brazil and India and Africa a private school could be nine months. It could be two years. It could be three years will be the longest private school- I haven't seen a private school that's three years.

Those kids walk out there and place implants so I think the fact that since we have oral surgeons and periodontists and all these specialists, especially ortho, I remember when I was in dental school I asked them how to do ortho and they said if you want to learn how to do ortho go to orthodontic school.

And I thought well what about half the dentists in America that go to a small town, I mean for every guy like you in Austin, there's a guy out there in some town of 5000 in Texas that doesn't have an orthodontist. So it's pretty weird.

I want to tell you one thing, in economics they call it the law of unintended consequences where the politician will pass a tax and they're not aware of what other things it does and what I thought was neat about the CEREC is I obviously had gone from eye vision to loupes and I magnify everything three and a half X but I think the best thing that CEREC did for me is when you're scanning that prep and you see your prep 40 times larger, you look around saying I hope no one sees this! And for me I didn't realize how much of a horrible prep you could do and send it to the lab and they could just put Die Spacer in and just cover up all your craziness and now when I'm looking at this stuff at 40x I spend more time on my preps- my preps tripled in quality, in fact Mile Detolla was telling me the other day, now he knows when he's smoothing a bur, a finishing bur, when he sees a white line he doesn't even have to scan it to know that 40x is going to be a huge divot.

So whenever he's smoothing out and he sees like a white flash, he's like divot, smooth extra. I think a lot of doctors are having a hard time seating crowns, they just always blame it on their lab. They're like oh my God this crown I had adjusted and it's so hard to get in. Yeah dude, maybe you have a horrible prep. Maybe it was rough and then you

see some of these guys on Dentaltown that the prep looks like it was almost polished acrylic. Those are the crowns that drop in. So seeing anything 40x larger just makes you better.

Tuan Pham: I agree with you. I see some of my early, my initial CEREC crowns and I always take a post op X-ray to make sure the margins are closed and stuff like that, and they're closed but I wear higher magnification now but I can look at my initial ones and I'm like man, that margin could have been a lot smoother. My margins now are way smoother because you're right, if you blow them up and you're just looking at them, you're like what? That doesn't look good and now you just know.

Howard Farran: What type of magnification are you wearing on your eyes?

Tuan Pham: I think I wear three and a half.

Howard Farran: Three and a half and do you wear a light on your forehead?

Tuan Pham: Of course, that's the best.

Howard Farran: Yeah. What light are you using? What light and loupes are you using?

Tuan Pham: I used to use Orascopic but now I use everything LumaDent. I use LumaDent through the lens, I think it's three and a half, I think it is or three point two or something like that, and I use their light, and all my assistants, all my staff they have their own lights and stuff because when they do work they can just see more.

Howard Farran: That was a big deal for my quality too. You go into a dental office and the dentist has loupes on but his assistant doesn't, his hygienist doesn't and it's like you know you need them, why would you not have your clinical assistant and your hygienist- I know this dentist who's completely out of his head because his hygienist left some tartar or whatever and you could see it on the bite, and I'm like well, she's the same age as you? You're both 40 and you're wearing three and a half's and she's wearing naked eye vision.

Tuan Pham: You know what, it's crazy, if you ever take off your loupes or you turn off your light and you try to look in someone's mouth, you're like I can't see anything!

Howard Farran: I'm so spoilt now that I had a loupe issue, one of them fogged, so I told myself I'm done for the day, and they're like are you kidding me! You didn't wear loupes the first five years of your practice, I said well I can't do without. So now they have two loupes and two lights because they had no idea that Howard would cancel patients if his loupes went out.

Tuan Pham: I have backups of everything now, same thing.

Howard Farran: Yeah redundancy. So what is the low hanging fruit would you say, you have 48 video tapes, how many hours would it take just for a dentist listening just to watch those from start to finish?

Tuan Pham: I'm not exactly sure but I think it's in the 13 to 14 hour range.

Howard Farran: And you're right about weekend courses, I'm only going to say one thing about weekend courses. When I look back at like the five weeks I spent at the Pankey Institute, now a decade or two decades later, I think the neatest thing about going to those courses was meeting people like you at those courses. I look back and I went through the whole seven three day weekends and I mean some of those guys are still my best friends in implants, so I like the social side. That's what I love about Dentaltown. I love meeting people like you. I love the social aspect.

As far as learning information, it's amazing how all the research is coming out saying the whole education system in America is wrong. A kid can't learn from eight to three thirty, that's not how a brain works and pretty much after an hour the brain's done and needs to walk around and eat something and scratch or do something and I love how your videos- talk about the links to your videos.

Tuan Pham: Sure, like I said there's a reason that I picked the videos between- not too long- like 15 to 20 minutes. Some of them might actually be a little longer but I don't like to keep them too long because there's statistics somewhere that I did research on Google somewhere. It says that people's video attention for watching videos online is about 15 minutes or so. After that they start losing attention so I like to get my, you know when you go to courses there's a lot of filler. There's a lot of hey, anyone have questions, let's take a break and do stuff like that. So when you're in my videos, because I'm writing it and I'm to the point. I'm pretty concise. I try to pack all the information in such a manner that you can understand it in about 15 to 20 minutes and each video highlights what you should implement and think about for the next week or so.

Like I said, I think to learn stuff it takes your mind time to marinate on the things that you learn. Some of the things might be simple principles but they're profound and if you don't give yourself time to analyze it and put it in your psyche, you're not going to implement it. You're not going to understand it fully.

For example, I'm a fly fisherman and there's something in fly fishing called a double haul, which is a type of casting and I read this double haul so many times and I practiced it and I could not get it done and then finally I just said whatever, I read it and went to sleep, in my dream I remember distinctly in my dream my brain figured out how to do it and in the morning I woke up and I could do it. It's because your brain needs time to analyze these things and just figure it out for yourself.

Howard Farran: So you talked about fly fishing, in creeks in Texas for trout, what do you fly fish for?

Tuan Pham: Well in Texas you can fly fish for bass in the freshwater but I really like saltwater fly fishing.

Howard Farran: Ocean?

Tuan Pham: Yeah, like in the bay. That's the best type of fly fishing.

Howard Farran: You mean the Gulf of Mexico?

Tuan Pham: Yeah, like even on the bay. I like doing shallow water fishing like knee deep or ankle deep and you look for these fish called red fish and you'll see the tail, I'll stalk them all day, I'll wait or I'm on a boat with my buddy and we'll stalk them. You look for the fish and you look for activity on the water or you look for their tails out and then you sneak up to them and you cast your fly and you catch them. I love it because it's a challenge.

Howard Farran: You know Jerome Smith on Dentaltown out in Lafayette, Louisiana?

Tuan Pham: What's his name?

Howard Farran: Jerome Smith.

Tuan Pham: No, I don't know him.

Howard Farran: He taught me how to do that on the Bayou, Louisiana. So what kind of beer do you drink when you do that?

Tuan Pham: Actually I do not drink beer when I fish.

Howard Farran: You're a purist. Only when you watch football?

Tuan Pham: Only when I watch football. When I'm fishing my brain shuts off, like my thirst and my hunger, everything, it's like my fish radar goes on.

Howard Farran: I want to move your amazing mind to the most stressful part for dentists. I mean they told me this for 27 years. They would much rather do a root canal, filling or a crown than try to manage staff and I don't want to throw anybody abridge but if you worked in dentistry, 98% of your employees are women and we have half the graduating class is women, half are men but let's talk about the most stressful part. When I ask dentists what's the worst part about being a dentist, they say managing five women. That is so hard and I don't want to sound sexist or anything it's just what they tell me.

Let's switch gears to that. What would you tell a dentist that says, tell me if you don't see this, after every time he does a root canal he gets up and goes to his office and shuts the door? When you're doing a football game the head coach is standing there on the sideline the whole game. I've never in the MBA said well where's the coach? Oh he just went back to his office underneath the stadium and closed the door.

So the dentists, when they're done, they don't walk the office and go talk to the front office and pick their head in the room, they don't have a sense of what's going on. They go back into their cave, their man cave, and shut the door and when I talk to staff like, what is your practice or how often do you have staff meetings? They go are you kidding me? My doctor is either doing a root canal or he's in his office with the door shut.

So that's the most stressful thing these dentists tell me. Give them some advice, some low hanging fruit on how to interact and manage and lead two receptionists, two assistants and a hygienist.

Tuan Pham: Okay well the first thing is a lot of offices, and you can read on Dentaltown, a lot of people don't like staff meetings. I have a staff meeting every day, it's not long, it's not complicated, it's like eight minutes. If you have routine staff meetings, what does it allow you?

Howard Farran: Is this the team huddle in the morning? Is this eight minutes before you start? Okay so you're talking about a morning huddle.

Tuan Pham: Morning huddle. Some dentists don't like to do this and I don't really know why but personally I love it because it starts your day. It gives you a couple of opportunities. When something goes wrong or there's an issue that bothers you, remember your staff might not realize this because perhaps you didn't voice it to them or you never addressed it or they approach some situation that you've never even covered, but something if it's in your head and bothers you, if you have a morning meeting every day, what does that mean?

It means that whatever offending issue to you is very fresh in their mind. One of the things that people teach in management you can read about is that if you have an issue with someone, you should not let it fester because if you tell them five months from now, hey remember that one time you did something? They're going to be like no, what are you talking about? If you have an offending issue and you address it in the moment or very soon after it, the person's going to remember it.

Hey Sally, yesterday we had this thing and blah blah blah, they're going to remember it. So one of the things I like to do is I have a morning meeting every day. We go over what patients we're seeing and we go over things like what's the upcoming treatment, what do we need to talk about, who do we ask for referrals, referrals will bring traffic to build

your online presence. If I have an issue with something and often times it's very minor. Hey Sally, I didn't like it that after you mentioned to me to do the hygiene check, you had to wait on me a little bit and you didn't show the patient pictures of the teeth of upcoming treatment. That's perfect time to go over these things. So little things like that of course she'll remember, she'll go yeah, you're right but having a morning meeting is an opportunity for you to go over these little things.

Howard Farran: I've got to stop right here and throw you under a bridge. You're 35 and progressive. All hygienists tell me, their doctor doesn't allow them to talk about dentistry, show them x-rays because they're diagnosing and if they start saying you're going to need a crown there, they get in trouble. So talk to that doc right now who's handcuffed his hygienist. She's not allowed to say this tooth's going to need a crown, this will probably need a root canal. She's not allowed because she's diagnosing and that's illegal in the state of Texas and you know it doc.

Tuan Pham: Sure. Absolutely, a hygienist and an assistant cannot diagnose. They do not have the right to diagnose. But you have the ability to talk about, say hey you can plant the seed. One thing I learned one time when I was designing my office I hired Design Ergonomics because I wanted to maximize my space and I was very curious. I was like how does David Ahearn, the owner of Design Ergonomics do work? So I kept bugging them and finally they transferred me the call and he called me back or something like that and I had this time to talk to him and I was like what do you do?

What do you do to know what's going on and he told me some secrets. He was like I have my hygienist cover things that she suspects is going on and so he just told me very briefly about it and so I thought about it and I expanded on that and this is how I do it in my office. Your hygienist and your staff cannot legally diagnose something, but certainly if they're in the mouth and they're working on teeth and they see a tooth with a big crack or obviously a big cavity, you know, they can- I call it in my video series co-diagnosing, I made up that term, I don't know if it's a real term or not- certainly they can show the picture and be like oh Mrs. Smith, I don't know if you saw this tooth right here. You can see that there's a big hole here, there's a fracture, there's probably something going on here. Looks like possibly a big cavity.

Dr. Farran is going to come in, he's going to confirm all these and he's going to discuss it with you. So they can do what's called planting the seed. Anything that they see they can show, that's why you have intraoral cameras. They can show all these things and they can plant the seed to the patient of possibly what's going on.

I make sure they tell them all these things that they're saying, they're just showing you the facts of what they see, but Dr. Farran, myself, is going to come in and confirm if these are true or not. So to those people that say oh, I don't want my hygienist doing

anything, you're missing out because one of the things that you can read about is that for a patient to understand or accept something they have to hear it multiple times. There's like a magic number, I'd say at least three times or more. If you can have your hygienist, your assistant talking about it when they hand off, your front desk and also talk about calibrating your staff meeting that everyone in your office should understand, and I do this with all my staff at least once a year, I show them x-rays of things, I show them pictures of things but we call it a calibration meeting where they understand what I'm looking for, why we do all these procedures, how it affects the patient, how it benefits the patient and I answer all their questions if they don't understand it.

If I have a new employee I might have a lunch with her where I go over all these things so that she understands it so everyone's on the same page. So when my hygienist or my assistant, no they cannot legally diagnose anything. They do not tell the patient you have a cavity here and we need to do this. They may say look, do you see a hole here? We see cracks here? You see this big black thing? That's kind of soft, there's a broken part of your tooth. Dr. Farran is going to come in here and he's going to tell you what's going on, but they can plant the seeds. They can show the patients everything that they suspect is going on, but of course never legally diagnosing.

Howard Farran: So on those memory stay, whenever I read memory stay they say that you're right, you've got to hear it multiple times, also it helps to see it and hear it. Multiple senses. So on intraoral camera help this guy alone, what intraoral camera did you buy? Do you print out a Polaroid picture or is this digitally on the screen? Do you still use film x-ray or did you go digital and do you think explaining dentistry is better with an oral picture on a computer screen or a digital x-ray picture or does it really not matter?

Tuan Pham: Sure. So in my office I have big TV screens. I think they're close to 30 inches I believe, I'm not sure, that comes from the ceiling down so we show all our x-rays or all our pictures up there. Now I believe in everything in life there's a cost and benefit ratio, like I can buy \$5000 cameras that show every single detail in the world but honestly, do I really need that?

Now believe it or not, I get my cameras, I don't buy very expensive cameras, I use cameras off eBay, I put plastic sleeves over them for obviously infection control but they're just simple cameras.

Howard Farran: Do you mean an extra-oral camera or you mean an intraoral camera?

Tuan Pham: Intraoral cameras.

Howard Farran: What brand? You mean just anything used?

Tuan Pham: I just went on eBay and I looked up intraoral camera and I bought one that's like \$150 or something like that, just to test it out.

Howard Farran: Did you start a thread on this on Dentaltown?

Tuan Pham: No, there are other threads but there are many people on Dentaltown that have used these very similar cameras. I think they're called MD740 or something like that.

Howard Farran: Please email me that. I've got to see that. That's amazing. Because there's no reason intraoral cameras should be ten grand right?

Tuan Pham: Well there are some that have very high quality optics but the question is, it's like everything cost and benefit, if you're just showing a patient and it's clearly a broken tooth or clearly big crack lines, how much resolution do we clearly need? If my camera shows it I'd rather have 50 of these backup cameras in case they break, I'll just hook another one up rather than having one super expensive camera that I have to shuttle between all the rooms or share. I'd rather have more little ones.

Howard Farran: So you went on eBay and typed in what?

Tuan Pham: Dental intraoral cameras and then I saw some and then I searched Dentaltown old threads just to see people's responses of what worked or not. I just took a gamble, I don't really care it's like \$150 or something like that, if it breaks then whatever. It's not the end of the world I spent \$150 on it.

Howard Farran: And you know what one of the biggest unused, hidden, secret assets of Dentaltown is? The free classified ads. I mean dentists will go off and buy the most expensive stuff and like dude, there's 10 of them for sale on the free classified ads for half off, a third or a quarter. Okay so you went to eBay and typed in intraoral camera. Are you using film or are you using digital?

Tuan Pham: I'm everything digital.

Howard Farran: Do you have a need to print out the x-ray or just showing it is enough with the camera and the x-ray, is that enough or are you printing them out or?

Tuan Pham: I don't print them out. I train my hygienists and my assistants to show things that they know that I would show the patient so before I step in usually they've already shown the x-ray if it's significant. If you can see the calculus or you can see big cavities or obviously anything a non-dental person can see, I make sure they show. If it's a tooth with a broken cusp, a big cavity, a busted out- I mean you've seen those teeth with huge grey halos on a facial cusp because there's like big decay and we show it.

You asked the question earlier, what works best, well pictures work best- well not work best- but sometimes a picture is worth a thousand words. It gives them very clearly a view of their tooth that they've probably never seen in their whole life but one of the things that I also talk about in my lecture is that you should always anticipate what the patient is going to think and you can address their objection before it is one.

A lot of times people look at a picture and they're like, I love it when people have teeth that are broken or obviously a bit cavity, and I'm like you see that? And they're like dang doc, that doesn't look good. I'm like does it hurt? They're like no. So if you can address their objection why their tooth doesn't hurt even though there's a big hole, that's glorious and that's where I think a lot of dentists need help on is that the communication aspect of it is very important. People might look at something but if you don't address what they're thinking ahead of the time, why doesn't my tooth hurt when it looks like this? And if you create a story using analogies or stories, whatever you want, you paint them through this path where you show them this picture and you say hey, this is why your tooth doesn't hurt because enamel is the hardest thing in your body, in the middle of the tooth there's a nerve, you've got to eat through all the stuff before it gets to the nerve and the average person has no discomfort until the cavity is on top of the nerve- boom that makes sense to them and all of a sudden they're like now I see, my dentists, this finally makes sense to me. I see the value. I'm going to go do this now.

Howard Farran: So I want to say one comment on that. I also think that when I grew up, my mom had a very Catholic- my two older sisters went straight to the Catholic nunnery right out of high school. I noticed that in 17 years of going to mass, 100% of every morning no one ever raised their hand and asked the priest a question. I think that when hygienists and assistants show them stuff, the patient is more relaxed to ask them a question, where they might not want to ask a priest or a rabbi or a doctor and all that stuff and also they might think the doctor lives in a big house with a fancy car and is trying to sell me a root canal, but when the sweet little dental assistant or hygienist says you need a root canal- I only get you for eight more minutes and I hope you come back another day and do another one with me.

So if you're a- because I know what these dentists are thinking, they're saying well doc, if you're a low volume, high quality patients, where are you getting these patients? Is it because since you're slowing down and taking the time it's all word of mouth referral or are you also augmenting that with any marketing, is there any marketing helping you find these types of patients? Can you spend- I've only got you for seven more minutes. Can you talk about that a little bit?

Tuan Pham: Absolutely. Well I think there's three tiers of patients okay, I'm just going to call them tiers for the sake of it. There is the type of patient that is mostly concerned about the cost, and that's typically the DMO Medicaid crowd, there's the type of patients

that's the fee for service crowd, which are more concerned with quality or perception of quality and making themselves feel important and having time with the doctor and then there's the mid crowd which is like the PPO one that is concerned with that but more swayed by prices.

So once again I go back to vision because you need to understand which market that you're aiming towards. If you market wrong towards the type of market that you intend to be then you shoot yourself in the foot. So I understand my market, I'm a fee for service office so I do a lot of marketing. I took it a little easy this year because I wanted to just work a little less but next year I'm going to ramp back up, next year I'm going to send at least 100 000 mailers.

Howard Farran: Direct mail? You're still into the old school, old fashioned print direct mail in the mailbox?

Tuan Pham: I swear it works.

Howard Farran: Is this a one mile radius of your office, a two mile, three mile?

Tuan Pham: I do three zip codes which I think goes up to about four miles around my neighborhood.

Howard Farran: Four mile diameter?

Tuan Pham: Yes.

Howard Farran: Okay four mile diameter.

Tuan Pham: Because I actually learnt over the years certain areas not to advertise to because I realized I was advertising to these patients when they came to my office like I said, their priorities were different so I would never see them again. I've tailored my advertising but I do a lot of direct mailing. We do get a lot of word of mouth. Location is certainly important. When I first came to this area there were three dentists before that didn't take this because the cost of buildup was very high but I'm like this location is golden. The average dentist thinks that hey, this is just all cost, but I'm like the cost of my location clearly will clearly outweigh the cost that I would spend the difference in advertising.

Howard Farran: So explain that, does that mean you're in a high visible, commercial, retail center? Describe the retail center. Is it a grocery store, what is the retail center?

Tuan Pham: I live in a very nice part of town. It's a very nice part of town so it's a retail center with a grocery store, I'm almost next to Starbucks so it's a very high visibility and if you travel the area it's also nice too because the way that the neighborhood works is that this is where they all have to go pretty much to exit the neighborhood. One thing

you should think about is traffic flow also. I analyze all these things, I drove all through town when I was looking for my location. I tried to learn as much as I could about traffic flow and all these things and I evaluated the neighborhoods and everything.

Howard Farran: What made you pick Austin? Were you born and raised there? Where did you go to dental school and how did you end up in Austin? I know you were born in Germany but how did you fall in Austin? Was that a demographic decision or just that's where you were?

Tuan Pham: No I grew up in Houston and I'm a Longhorn so I went to UT, University of Texas in Austin and then I thought about where I wanted to live. I had the opportunity to move to Dallas and they would have paid me when I was an associate like three times more than what I made but I told myself, long term commitment, I want to live in Austin because I enjoy the city. I enjoy the lifestyle. It's not a concrete city like Houston that's so big I don't get to do outdoor things and so I picked Austin. Long term plan I picked Austin and when I was ready to open I drove all around town. I had a demographic report eventually but the best thing personally in my opinion is going on Google maps, typing in dentists for area that you want to see, you plot them, I print them out, I drove everywhere in the city to confirm these areas.

Howard Farran: Wow that's genius. So go over the details of exactly, to the older dentists like me, you said Google maps?

Tuan Pham: I go to Google maps and I zoom into the parts or areas that I thought I wanted to be in.

Howard Farran: Tell them how you zoom in, what does that mean?

Tuan Pham: Oh I get on my mouse and I get the little scroll thing and I scroll forward so it zooms in closer.

Howard Farran: Okay, desktop not mobile. Okay desktop.

Tuan Pham: Yeah it's easier to do on your desktop because you're using a big screen. I type in dentist and I see where it plots it, and then I look at it and I'm like there's high saturation here or there's an area open spot right here and then I print these maps out and I put little red dots on them and then I got in my car and I drove around the city and once I found the areas that looked good I looked for commercial buildings that were available and then I jotted the information and I drove the neighborhoods.

Howard Farran: Can you do me a huge favor? I'm in about a dozen dental schools a year every year, I lecture there for free. You need to start a thread on how to use Google maps for demographics and some screenshots and then I can email that to every dental student because we know who the dental students are because their email

address is, there's only like 54 different email addresses and every one of those dental schools, about 80-90% of them are members. I'd love you to start that thread and me email it to everybody with a dental student because that's genius.

Tuan Pham: Because I think there's value in a demographic report but remember demographic reports are, they give you so much information. I get this paper and there's so much information but I don't care what people say, to me there's nothing like driving the area because you see the neighborhood, you see the people that live there. For example, if I go through a neighborhood and I see in the immediate area and I see a bunch of lawns that are unkempt, they don't fall under the HOA then that tells me, okay, the type of practice like if I wanted to build a high end practice, would it work in this area?

No, probably because the people that are here, they don't keep their lawn up kept to what is important to them? It gives you a lot of information. Everything in life is psychology. Dentistry is psychology.

Howard Farran: So you're talking about new patients. It really surprised me that a young high tech kid like yourself is into old school direct mail that's been around for a century. That was neat. You obviously went for the location, obviously by going more volume you're going to get more word of mouth referral because you're spending time with these people, but besides location, direct mail and word of mouth referral from low volume spending time, is there anything, any other?

Tuan Pham: One of the biggest growths that I have right now is Google so one of the things that I do now is there's that guy Bob Summers, he types on the Dentaltown every once in a while, he owns that Best Local Reviews website or something like that, that someone posted once and it's glorious and it's genius because they tell you to ask someone for a review at the height of their experience meaning, you're not going to ask someone who had a terrible experience to write a review, you're going to ask them when they're like this is the most glorious thing ever. So the beauty of this program is that it gives you more control because if you ask for a review from someone that likes you, you send them an email through this program, it asks you what they want to rate you. If it says five stars, then they send you to the review site. If it's less than five stars, it sends you to your site that posts your reviews so you can read it but it doesn't go on the public internet.

Howard Farran: And what's the name of that?

Tuan Pham: Best Local Review I believe.

Howard Farran: Best Local Review.com?

Tuan Pham: I believe that's what it's called. In any case, so what happens is like compared to the dentists around me I have at least five to six times the number of Google reviews, my ranking is much higher and I know Google ranks your views and the consistency of it and the numbers of reviews to determine your placement on Google so I not only have a lot of reviews I have current reviews that keep going up, that keep getting posted versus AdWords.

Howard Farran: And that's Best Local Reviews.com?

Tuan Pham: I believe so.

Howard Farran: Is there a thread on that on Dentaltown?

Tuan Pham: There is a thread somewhere and that's how I found out about it. Someone was like I used this program and now I have more reviews and I read about it. It's like \$50 a month or something like that but it's totally worth it.

Howard Farran: Well buddy we are out of time. That was the fastest hour of podcast I've ever done.

Tuan Pham: I had fun.

Howard Farran: I did and thank you for your 8000 amazing posts on Dentaltown. Thank you for Dental Maverick.com. What if someone just wants to send you an email? Can they do that?

Tuan Pham: Sure. They can go to my website, Dental Maverick.com or they can just send me an email to tuan@dentalmaverick.com and it goes to my phone and I'll read it.

Howard Farran: And spell out Dental Maverick just in case they...

Tuan Pham: Sure it's Dental Maverick.com.

Howard Farran: And it's tuan@dentalmaverick.com?

Tuan Pham: Yes.

Howard Farran: So gosh, thanks for an hour, I hope you put up a teaser of your 48 video program. I hope you put a teaser on Dentaltown so the people can stumble on that and thank you for all that you do buddy.

Tuan Pham: Alright well I appreciate it. Thanks for the invite. This was fun.

Howard Farran: Alright, thanks a lot. Have a great day.

Tuan Pham: Bye.