



## WESTERN PRACTICE SALES

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**John M. Cahill Associates**

**#D-997**

**San Jose, California**

Step into this pre-dominantly fee-for-service practice with a stable, loyal, long-established, multi-generational, family-oriented patient base where patients appreciate a broad spectrum of quality dental care ranging from Ortho, Implants, Reconstruction to Perio treatment, reflected by high acceptance, participation and involvement rate in complex treatment plans. The Doctor averages 14 patients per day and generates approximately 2-4 new patients per month.

*Already primed for success, all it's waiting for is your talents and skills!*

Conveniently located in a highly visible, easily accessible, attractive, well-maintained, single-story Dental Professional building on major thoroughfare in desirable neighborhood, this office occupies approximately 1,008 square feet and consists of 3 fully equipped ops and plumbed for 1 additional, Reception area, Doctor's office, Business office, Sterilization, Lab, Digital X-rays, Dark Room, Storage and Restroom.

***Full Price: \$230,000***

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

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Edmond P. Cahill, JD

**800.641.4179**

► **Honesty** ► **Integrity** ► **Professionalism** ► **Experience**

**We look forward to serving you**

**#D-997****WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES****\$230,000****PRACTICE INFORMATION SHEET****OFFICE OPERATION INFORMATION**

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		1 – 7	1 – 7	7 – 1	7 – 1		
Doctor's Hours		1 – 7	1 – 7	7 – 1	7 – 1		
Type of Practice:	<b>General</b>		Reason for Selling:		<b>Retirement</b>		
Years established:	<b>37 years</b>		Days worked past 12 months:		<b>~ 132 days</b>		

**OFFICE SPACE & LEASE INFORMATION**

Is the building/suite owned?	<b>No</b>	Is building available for purchase?	<b>N/A</b>				
Is the space leased?	<b>Yes</b>	Is lease renewable?	<b>Yes</b>	Is lease assignable?	<b>Yes</b>		
Term of Lease:	<b>Currently on 5-yr extension option</b>			Expiration date:	<b>June 2016</b>		
Do you share space with another dentist?	<b>No</b>						
If yes, percentage of Associate's Production:	<b>N/A</b>						
Will Associate stay on with practice?	<b>N/A</b>						
Rent per month	<b>\$ 2,857.05/month</b>		Common area/ maintenance fees / taxes included?	<b>Yes</b>			
If not included, current amount?	<b>\$1,700.00</b>		Are utilities included? If yes, which?	<b>No</b>			
Is the rent considered above, below or at fair market value?	<b>Fair Market Value</b>						
Office Square footage:	<b>1,008 sq. ft.</b>		Carpet?	<b>Yes</b>	Air conditioning?	<b>Yes</b>	
Number of fully equipped ops:	<b>3</b>		Plumbed for additional ops?	<b>Yes</b>			
Reception area:	<b>Yes</b>	Dark room:	<b>Yes</b>	Doctor's office:	<b>Yes</b>	Lab:	<b>Yes</b>
Laser:	<b>No</b>	Digital X-ray	<b>Yes</b>	Intra-oral Camera:	<b>No</b>	Cerec:	<b>No</b>
Business office:	<b>Yes</b>	Restrooms:	<b>Yes</b>	Sterilization:	<b>Yes</b>	Storage:	<b>Yes</b>
Description of office building, Location and attributes of practice (a brief description):	<b>Attractive, single-story Dental Professional building w/ excellent signage and visibility on busy thoroughfare bustling w/ activity and traffic flow</b>						

## PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative	<b>16.73</b>	Diagnostic	<b>13.74</b>	Hygiene		Dentures	<b>4.31</b>
General Operative	<b>30.43</b>	Endo	<b>3.72</b>	Ortho/TMJ	<b>3.69</b>	Perio	<b>2.11</b>
Oral Surgery	<b>1.80</b>	Implant	<b>14.16</b>	Crown/Bridge	<b>5.68</b>	Adjunctive	<b>3.59</b>

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

**Complex: Oral Surgery - 3<sup>rd</sup> molar extractions, Implant Surgery, Perio Surgery**

Type of patients as a percentage of collections:

Insurance **54** Private Pay **46** Other **None**

Does your practice participate in "Care Credit"? **No**

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

**United Concordia, TriCare (retired military): < 10 pts w/ each Plan**

Estimated Number of Active Patient Files ("at least one visit in the past 2 years"): **~ 500 - 550**

Number compiled using: Practice Software \_\_\_\_\_ Hand Count \_\_\_\_\_ Estimate **Yes**

**\*SELLER IN NO WAY WARRANTS THE EXACT ACCURACY OF PATIENT FILES. IT IS THE BUYER'S RESPONSIBILITY TO DEFINE AND VERIFY ACTIVE PATIENT FILES WITH A CHART REVIEW.**

Average number of New Patients per month for past 12 months: **~ 2 - 4**

Average number of patients per day? Per-Doctor: **~ 14** Per-Hygienist: **N/A**

Hygiene days per week: **N/A** Percentage of Production by Hygiene: **~ 30%**

Average age of patients: **Family range: ~ 30 - 70 yrs.**

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

Type of recall system used? **Pre-scheduling, Computerized Postcards, Follow-up Telephone Calls w/ 80% efficiency**

Number of recalls per month? **~ 75**

What types of Practice Promotions are in effect? **None**

## EQUIPMENT & LEASEHOLDS

Occasionally some specialized items may be excluded from the sale, such as: Articulators, Endo and/or Implant Systems. These items will be referenced as "excluded" on Seller's Equipment list. In addition, Buyer understands that the following items may also be excluded from the sale: diplomas, certificates, cameras, photographs, artwork and miscellaneous personal items.

Describe age and characteristics of leasehold improvements:

Average age of Equipment: **~ 30+ yrs, New Kodak X-ray system w/ desk top computers**

Any equipment leases? **None** Equipment is right/left-handed/convertible? **Yes, convert**

<b>PERSONNEL</b>				
Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
<b>Charside</b>	<b>4 days/wk</b>	<b>July 1979</b>	<b>~ \$ 40,000/yr</b>	<b>Yes</b>
<b>Office Manager</b>	<b>4 days/wk</b>	<b>1992</b>	<b>Non-salaried</b>	<b>No</b>
Do family members work in the office?	<b>Yes</b>	If yes, how much are they paid?		<b>- 0 -</b>
Has staff left the practice recently?	<b>No</b>			
Is there a practice management consultant?	<b>No</b>			
<b>PRACTICE FINANCIAL PROFILE</b>				
<b>Last 3 years' Gross Collections from Tax Returns:</b>				
2010	<u>          <b>\$ 316,483</b>          </u>	2009	<u>          <b>\$ 340,508</b>          </u>	2008 <u>          <b>\$ 376,208</b>          </u>
<b>*Collection amounts are approximate and should be verified by Buyer</b>				
Number of statements sent each month?	<b>~80</b>	Is pegboard or computer?	<b>Computer</b>	
What type of computer?	<b>Desktop Windows X/P</b>	What software?	<b>Easy Dental</b>	
Is software transferable?	<b>Yes, Transfer Fee and Annual Support Software upgrade to be paid by Buyer</b>			
Fees Schedule:	<b>Available upon request</b>			
<p><b>NOTE: The Seller has furnished the preceding information to WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES. This information has not been verified. A potential Buyer should verify the accuracy of all information to his/her own satisfaction.</b></p> <p><b>WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES are agents of the Seller and therefore represent the interest of the Seller. We strongly advise a potential purchaser to seek independent counsel to represent his/her interests. Counsel may be, but is not limited to, an attorney, accountant, appraiser, broker or management consultant. Fees of such counsel are the sole responsibility of the purchaser.</b></p>				