

CLINICAL COMMUNICATION SERIES

The Hygiene Handoff Script

Six sentences that hand the doctor a patient who already feels known — and hand the patient a doctor they already trust.

The handoff is the shortest appointment in your practice and the most expensive one to get wrong. **In thirty seconds, the hygienist either transfers trust to the doctor or makes the doctor start from zero.** Run the same six beats, in order, every time.

01 The Introduction — **have we met?**

The wording tells the doctor three things at once: the patient's name, the name they prefer, and whether the two of you have met before.

SAY IT: *Returning patient: "Dr. Smith, you remember Mrs. Jones?"
New patient: "Dr. Smith, I'd like to introduce you to Mrs. Jones."*

02 Common Ground — **give the doctor a bridge**

You've had 20 to 40 minutes with this patient. Hand the doctor one thing they share — a school, a team, a hobby, a hometown. Ten minutes of rapport in ten seconds.

SAY IT: *"Mrs. Jones is also a serious Italian cook — she was telling me about the sauce she makes."*

03 The Feeling — **name the emotion in the room**

For some patients a dental visit is nothing; for others it's anxiety, guilt, or real excitement. Name it out loud so the doctor can meet it with empathy — one of the fastest trust builders there is.

SAY IT: *"Mrs. Jones told me she's been a little anxious about today, and she was glad we took it slow."*

04 What We Gathered — **the record**

Report what was collected today: health history, images, radiographs, periodontal probing — anything the doctor should have in front of them.

SAY IT: *"We updated her health history, took four bitewings and a panoramic, and completed full perio charting."*

05 What We Found — **set the table**

Say what the findings revealed, then name the treatment you believe the doctor may recommend. This is the beat most teams skip — and the one that lets the doctor confirm rather than introduce.

SAY IT: *"Everything is stable except #30 — there's a fractured cusp. I talked with her about how a crown would protect it."*

06 Where We Stand — **done and still to do**

State what was completed today and what remains, so the doctor knows where to pick up and the patient hears a plan, not a surprise.

SAY IT: *"We finished her cleaning and fluoride. She's ready for your exam."*

All Six Beats, Out Loud

Thirty seconds, spoken at the chair — never in the hallway.

THE COMPLETE HANDOFF

01 “Dr. Smith, you remember Mrs. Jones? 02 Mrs. Jones is also a serious Italian cook — she was just telling me about the sauce she makes from her grandmother's recipe. 03 She mentioned she's been a little anxious since her last visit, but she's feeling good about being here today. 04 We updated her health history, took four bitewings and a panoramic, and completed full periodontal charting. 05 Everything looks stable except number thirty — there's a fractured lingual cusp, and I talked with her about how a crown would protect that tooth. 06 We've finished her cleaning and fluoride, so she's all set and ready for your exam.”

Make It Stick

Coaching notes for your next morning huddle.

DO THIS

- **Deliver it at the chair.** The patient should hear every word. A hallway handoff builds nothing.
- **Use the name they use.** If she's Mrs. Jones to you, she's Mrs. Jones to the doctor.
- **Hunt for common ground early** in the appointment so you're not scrambling at the end.
- **Keep the order.** The sequence is what makes it repeatable across every operator and every provider.

NOT THIS

- **Reintroducing a patient the doctor has already met.** Nothing burns trust faster.
- **Shortcutting to the clinical findings.** Data with no human beats first reads as a sales setup.
- **Skipping the feeling.** The anxious patient who is never acknowledged is the patient who doesn't schedule.
- **Withholding your recommendation** because “that's the doctor's job.” Set the table.

Role-Play Scorecard

Watch a live handoff. Check the beats you actually heard.

#	THE BEAT	WHAT YOU SHOULD HEAR	HEARD
01	Introduction	Correct name, correct form of address, clear signal of whether they've met	☐
02	Common Ground	One specific, human detail the doctor can pick up on	☐
03	The Feeling	The patient's emotion about being here, named out loud	☐
04	What We Gathered	History, images, radiographs, probing — stated plainly	☐
05	What We Found	Findings <i>and</i> the treatment the hygienist expects the doctor to recommend	☐
06	Where We Stand	Completed today, still to do, patient handed off ready	☐

WHY IT WORKS: patients can't evaluate clinical skill — they evaluate whether they feel known and whether the team agrees. A structured handoff delivers both in thirty seconds, before the doctor ever picks up a mirror.