

**Dr. Charles Blair's Revenue Enhancement Program for the  
NEW DENTIST IN PRACTICE  
Establishing Fees and Insurance Coding Consultation**  
*"This consultation is perfect for training business staff prior to opening for business!"*

This consulting service is for the dentist establishing a brand new fee schedule for a NEW practice. It includes a review of insurance coding issues and suggested protocols (how to charge for x-rays, exams, etc.). If you have purchased an existing practice with a current fee schedule, you should instead consider an analysis of the existing practice's fees and procedure mix. Contact our office to request the appropriate form and information for Dr. Blair's "Peace of Mind" Revenue Enhancement Program.

Current Date:		Date you plan to open new office:	
Doctor:		E-mail:	
Work# (    )	Fax# (    )	Home# (    )	
Address:			
City:	State:	Zip:	
How did you hear about Revenue Enhancement?		Who may we thank for referring you?	
Have you worked prior to this as an associate?		Will there be more than one DDS in the practice?	
Number of staff members hired and their positions (attach second page for additional staff description):			

**Type of Practice:**     General Dentistry     Pediatric     Prosthodontics     Periodontics  
(Note: At this time, fee data consulting is not available for Oral Surgery, Endodontics or Orthodontics.)

**Zip Code for Practice Location:** \_\_\_\_\_

**Revenue Enhancement Program for the New Dentist in Practice**

Fee: \$695

Credit Card:    \_\_\_ Visa    \_\_\_ MasterCard    \_\_\_ AMEX    \_\_\_ Discover

Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

**Consulting Confidentiality Agreement**

In consideration of Dr. Charles Blair agreeing to analyze and consult with me regarding my fee structure and procedure mix, I declare and agree that all information provided is for my exclusive use. My individualized report and fee data will not be shared with any other dentist, individual or entity. I understand that disclosure and dissemination of this information to another dentist or dental society could violate price-fixing, anti-trust or copyright laws.

**UPON COMPLETION**, mail form and required data to:

Dr. Charles Blair & Associates, Inc.  
ATTN: Debbie Hains  
Pinnacle Professional Park, 547 Highland Street, Mt. Holly, NC 28120  
866-858-7596 (phone) 704-822-3142 (fax)