

Ep #186: Paul Goodman - Dental Nachos



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Dr. David Phelps

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Dr. Paul G.: What I wanted to point out is, a dentist has gone to school for eight to ten years after high school, a lot of times. Then you have a dental assistant who comes from a totally different area of life, different life experiences. Then you have this person who's got 10 years of post-graduate experience, talking to somebody who is a single mom and living paycheck to paycheck, and that's a whole skill set that's difficult.

You are listening to the *Dentist Freedom Blueprint* podcast, with David Phelps. Navigating you through the uncharted waters of a turbulent economy with straight-forward advice to, transform your practice into a self-sufficient cash machine, compound your net worth assets, and multiply, multiply, multiply your passive cash flow streams.

Dr. David P.: Good day everyone, this is Dr. David Phelps of the Freedom Founders Mastermind Community and Dentist Freedom Blueprint Podcast, here today with what's going to be a very fun and maybe even a tasty interview today, well you'll find out why, but with me today is Dr. Paul Goodman. Paul loves three things in life. His family, helping dentists and nachos. Not necessarily in that order, 'cause you probably put nachos first, I'm just guessing.

Dr. Paul G.: Yeah, yeah, I would have, but my family wouldn't like that, but I might.

Dr. David P.: They might not like that. As a dentist speaker and coach, Paul is on a worldwide social media and in-person campaign to do the impossible, that's encourage dentists to be nice and care about each other. So let's welcome Dr. Paul Goodman. So, Paul, what's this thing about dentists being nice to each other? I mean ... is there is

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some infighting, is there some debates among the rank and file?

Dr. Paul G.: I mean, I definitely want to say first, thanks for having me on, it's an honor to be here, I've followed a lot of your stuff and learned a lot, David, so I appreciate that very much and glad to be talking to you.

In terms of being nice, I say that people go to dental school as normal people and then they go through dental school and they come out on the other side as a different person. And in some times I feel that's like just the fault of how dental school instructors make you feel, how the school makes you feel. How there's really nobody there thinking about you, supporting you, I always kind of ... I went to Penn and it's kinda like a headless horseman. You would go to one department, finish this requirements, go to another department and you almost needed like a buddy that would take you around the dental school, but there really wasn't one.

Also, I don't understand, I love teaching, I teach people a lot of things, and I'm actually a fairly good golfer, back in the day, I don't play as much any more, we know that's a technique sensitive sport, and if someone showed up and shanked their first shot, I wouldn't be like, "Well you're never gonna get good at this, you might as well quit."

I feel like dental school instructors do that and it's really not fair because these are just young people starting out and I was very lucky to have a dad, because I had considered actually leaving dental school, 'cause I said I had these other passions and I was doing all these other things, and am I doing the right thing with my life? He was an awesome dad and worked up with me until 2016 when he passed away. He was great. He said, "I will support

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you in whatever you do. You can decide to do anything. But I just want you to know that everything that happens in dental school is essentially meaningless. Just get out and you practice then." He was 100 percent right, but it was not easy to understand that when you're going through it. I actually make a lot of comments. They make it the dental student hunger games. They make us compete on this weird stuff like fillings and crowns.

You have a lot of knowledge in the medical space. I mean no one does not graduate from dental school because they didn't see enough appendixes being taken out. But in our dental school, if you don't do enough of a procedure, you don't graduate. But you have no control over who comes in. I mean, the further I get away from it, the more insane it seems. I think that makes dentists not want to talk and be nice and collaborate 'cause you're on your own and I always loved that. And I always loved organizing things at school, played intramural basketball, did stuff with my classmates, maybe I always feel like, and I would say, dropped in a vat of nacho cheese, but I remained unaffected by the dental school experience from an interpersonal experience with my friends, or the other classmates.

I never really felt jealous of them and I was not the best dental student in everything. I was fairly good with the academics. I had more struggle with some of the free clinic, but whether I was really good at something or if I was struggling, I just really enjoyed communicating with my friends and my classmates, and I think some of my class would remember that about me, but most dental students leave kind of not liking each other.

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Dr. David P.: Yeah, you're right and it's hard for me to believe because I'm a few years your senior, so, but it's the same thing. I was back in school in the early '80s and no different from what you're describing today, and of course I know you're still very connected with teaching and so you're right there with the docs that are in school, the ones just coming out, so you still see the same thing. It's very archaic. It doesn't make sense. I still don't get it today. So, you're right, I think there's an indoctrination that happens to students as they go through dental school and come out on the other side and it is, unfortunately, a competitive in nature versus collaboration, which is a difference in mindset. It's a difference between-

Dr. Paul G.: And also, it doesn't have to be that way because, what's a shame is they make you compete and then you all go into your own practices or jobs or whatever you do and you never compete again and it's just kind of sad to me that they make you do that at that time. And what I really believe, and actually some of the people on the Facebook groups that I've become friendly with, Gerald Benjamin, who's a high level dentist as is, they should allow you to do some clinical work when you arrive, because I truly believe if they did that, some students would leave dental school and not want to be there, which is good for them.

Dr. David P.: Mm-hmm (affirmative).

Dr. Paul G.: Since they do book work for two years, by the time you get to clinic, you're like, I'm too far into this to leave. So, I actually believe that that's a bigger part of it too, that they should allow you to practice what it is like to dentists right up front with some Class I fillings, and I don't know ... I mean do you play golf or tennis or anything like that?

Dr. David P.: Tennis for me, yeah.

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Dr. Paul G.: So, I mean tennis, a good example. Everything about tennis is like, you hit some good shots, you hit some bad shots, you use some strategy, you see how it's going. So the setup to learn on plastic teeth is just horrible. Because I've never seen a plastic tooth walk in, and I've never done a filling on a tooth, and they always say this, and I think it's like a joke, they always say the virgin tooth. I'm like it seems like what has this tooth been doing or not been doing. I always say the untouched tooth. But remember we used to have untouched teeth that we would just drill into. That never happens in the real world. So, even the teaching processes is somewhat crazy.

Dr. David P.: So, you know we talked a minute about your mission in life and I really see, you're a very mission based person. You have a great sense of humor.

Dr. Paul G.: Thank you.

Dr. David P.: You're great at storytelling, you're great with analogies and metaphors, which are all part of being someone who's a great teacher. Connecting the dots, helping in this case, young students that are coming out of school today with, we know, massive amounts of debt, and really coming out and wondering in many cases, what did I get myself involved in. I've sunk cost, as you said time, all the capital investment into it, and then they come out and go, my path is pretty constricted here, I don't really see a great way out, so I gotta go work for corporate. I can't really fire up my own practice, I don't know what I don't know, and we got the managed care going on. It's just a, it's kind of a mess for those who don't have any guidance. As you said, no one to give them a different pathway, a different outlook, and I see that as a big mission. You're out there in a big way. You wear a lot of hats.

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Dr. Paul G.: Thanks.

Dr. David P.: I gotta commend you for balancing so many things and so many passions in what you do. You practice now with your brother. You said your father passed away two years ago, a great father, a great mentor, was the one, as you said, didn't force you into dentistry, but I think I saw somewhere that originally you either wanted to be a well-known famous attorney-

Dr. Paul G.: Yeah.

Dr. David P.: George Clooney on ER.

Dr. Paul G.: I thought maybe girls would like him so I was like if I do that. I tried to get that haircut in college and my mom was like, you look ridiculous, and I did look ridiculous, but his ER haircut. Yeah, I went doctor, dentist or lawyer. My dad always just said towards the end of his life, he saw how dentistry really changed. He recommended it for the lifestyle, working with people, making a difference. He was someone who, he didn't want to do any of the business things. You know, he was in our town from age 28 to 68, 40 years in the same town. Classic like everybody knew Dr. Goodman. Coached all the sports teams, him and his partner.

But I did learn, him and his partner at least worked together, so I saw an example of two dentists working together. Still extremely rare, right? The solo model. He always wanted to work with someone, cover vacations. And it wasn't really about the money, you know. It doesn't mean they aren't successful dentists, but to him, he wanted to be able to leave his office and have someone cover, vice versa. Talk about cases to some degree. And when I came on, we bought a satellite practice and we did

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other things, we incorporate specialists, but they just don't teach business collaboration in any way, and we're facing that today where these solo practices are just getting You know, dentists are very dramatic. When you say they're getting destroyed, they say I know a guy that's doing well, but I do these practice transitions and it's not easy for the solo practitioner, and they're not the ones on Facebook bragging. They might be the ones on Facebook sending you private messages saying, hey Paul I have this practice and Seinfeld has a great joke, he said everything's great or it stinks, right, he said sucks, like it's the best restaurant and dentists are such like that, right.

Most of it's in the middle and dentists don't like the middle. It's a clinical failure or a clinical success. My friend, I still don't know what these means, David, I know a lot of people crushing it and a lot of people doing poorly. So, I like to sort of describe things with a more realistic approach from seeing all these practices, but as you see on Facebook, sometimes I get some blow back from other dentists who sometimes don't want to see that it's raining outside.

Dr. David P.: Yeah.

Dr. Paul G.: If you turn your head to the left, you're gonna see it raining.

Dr. David P.: Yeah. I see you as very practical, very reality based. You're not a downer by any means. You're just about reality. So here's the reality. So let's talk about what we can do with the reality. Let's not fake it, let's not pretend like, thump our chest and it's all great, because everybody knows there's always obstacles and challenged and setbacks in everybody's life, nothing's perfect. You know you gotta push it out there, you gotta test it and if you got

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good people around you, you can figure it out. You know, having role models, people who have blazed a path ahead a little bit, that's really the way to go.

You know, one of our colleagues, Chris Griffin, I don't know if you know Chris well or at all-

Dr. Paul G.: Oh yeah, I don't know him well, but I've seen him on-

Dr. David P.: Chris said something the other day, I just caught it, and he said just kind of anecdotally, when he lectures or speaks, and he'll ask his audience, "What are the three biggest challenges or your biggest dislikes about practicing dentistry?" And the response typically is staff, patients and insurance. Well, that's kinda the whole thing rolled up so if we don't like that or if we can't deal with that, then what the heck, what is this whole vision of being in practice and professional and having respect, but also serving people. It sounds pretty negative to me.

Dr. Paul G.: It's also a-

Dr. David P.: Is that true? Is that your sense of ... 'cause you deal with so many people-

Dr. Paul G.: I would agree with him. And what happens is dentists in general make it look too easy, so it's changed a lot over the years, but still my dad would say, he had staff and he had hygienists and he has assistants, and of course the internet, they would take longer lunches, it always looks like ... I'm sure I don't want my daughter to go into dentistry because I love her, but if she did, I'm sure my life now, even though I think it's crazy busy, 30 years from now they'll have to see more patients and more stuff. But everybody had that human element of having to manage your team and that's just another classic example, David,

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of how dental school doesn't prepare you. Because this is totally nuts. We have dental students who know nothing and we don't even given them dental assistants to work with. They have to work ... I actually think it's, I mean, I'm not gonna be, what I say is torture, it's just a really bad system. Because when you come out you have to work with a dental assistant.

I'm at my office, I actually really like my team, just like a family, not everyone gets along all the time. Everyone has their own things, ever go on a family vacation with 10 people? On the sixth day you're like I do not like these people, they're your family, I'm like I know, I still don't like them. We're working in a small environment.

What I wanted to point out is, a dentist has gone to school for 8 to 10 years after high school a lot of times and then you have a dental assistant who comes from a totally different area of life. Not a better area, not a worse area, but just, they have different life experiences and then you have this person who's got 10 years of post-graduate experience talking to somebody who is a single mom and living paycheck to paycheck and that is a whole skill set that's difficult.

Dr. David P.: Yeah, no, no question about it. No question. Let's go back to what we were talking about a minute ago about collaboration and the fact that dentists, just by nature, by training are not good collaborators, but the fact that the whole environment is forcing, except for maybe a very small percentage who can remain in a boutique type practice, forcing collaboration. Again, no training, no ability to share the marbles, share the nachos, whatever, it's just like these are mine and I'm not good at that. You

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and your brother, and with your father, you had what, three practices?

Dr. Paul G.: We have two locations and in our other location, we kind of have three mini practices stuck together there like a nacho plate. So we've acquired a few practices, but I'm good with two locations right now. So we have one location that has three practices kind of combined in it.

Dr. David P.: And of course, you've got this kind of this 30,000 foot elevation view because you've also been involved in transition, your brokerage, so you get to look over and see many, many scenarios. So based on what you know about dentists and lack of ability to create synergy and partnerships or models with multi dentists, where things are going with the DSOs, what do you foresee? What's coming down the pike?

Dr. Paul G.: I mean, that's a great question. I'm like 40, medium age, I used to be a little better shape, you know you're speaking, you're a dad, I'm a very balanced person with thinking about my physical appearance and my fitness, but let's just say I would like to lose 10 pounds, because you know I don't exercise as much. I know the answer and someone can tell me, a personal trainer, a coach could tell me. Let's say the answer is counting calories, that's part of it, that's a great way to lose weight. Almost anyone does it, Weight Watchers, it works. So they'll say, I want you to count calories, and I'll say, I don't want to do it. They say, well you're not gonna succeed, and they're right. And they are 100 percent right.

I can tell you that I'm in Pennington, New Jersey. There's probably eight dentists here. Just use our example. I could solve the problem, but it's, no one's gonna want to do it. You have to build a large space together where

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there's at least 12 to 16 operators, brand new place. Then everyone has to take their practices as owners and join together, I'm just gonna use four owners at 25 percent each and let's just say every practice has a million, four million, one roof, that's a powerful operation. That's an operation that can compete with DSOs in the sense of pricing and scale and you know, David, I really do love dentists and maybe it's like an affliction, I wish I had an affliction like being able to dunk a basketball, that's a better affliction, but dentists are very dentist. I always say, that's so dentist. They say the DSOs, they get great deals on supplies and that's how they do it. And it's just so dentist to me. Because that is just a small piece-

Dr. David P.: Right.

Dr. Paul G.: Of their success and it's like, in a million dollar practice, someone spent \$60,000 on supplies a year and then someone comes in and says we have the best deals ever, \$40,000. That's not gonna change their future. What changed their future is being able to negotiate with insurance, being able to share staff, being able to have a specialist come in. I mean I can give the playbook, I can give the counting calories, but the four dentists would have to get along and I don't know if they've done anything in their life to be able to do that because I use this joke, let's say it's me, you, Chris Griffin and I don't know, my brother, Jeff and we're all together, everything's going well and one person has to manage it, right. So first of all, someone's gonna need to be paid to not do a lot of dental work and those people are going to have to understand that.

And let's say that's me, and I say, "How's it going Dave?" You're like, "It's good, but I noticed that Chris was using

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too many cotton rolls and I think that's unfair." I'm like not the point, we're getting along, but that's what happens in partnerships, a lot of things. I work with Rob Montgomery, we're the dental amigos. He's a dental focus attorney and partnerships are hard in any endeavor. I think doctors do better, you know why? It's kinda like when you first get married, you're like, I wanna see my wife all the time. Then our wedding anniversary's coming up, my wife and I really love each other, but you're like, I don't need to see you all the time. I'm sure she says that about me. So to use that with partners, I think with dentists, they actually see each other too much in the same building.

Dr. David P.: Yeah.

Dr. Paul G.: ENTs are all running, maybe texting and sometimes that, I think, creates a better partnership. But that's the playbook that you asked about for collaboration. But every time I put that on one of the groups, people say that will never happen, then I say well, you're all gonna get-

Dr. David P.: Pharmacies.

Dr. Paul G.: You're gonna go to CVS and look ... that's gonna be you.

Dr. David P.: Yeah, yeah, exactly. So with young dentists coming out and again you help with residencies and training and getting mentorship, but they're coming out with so much debt, what would you say is the return on investment? The time, the number of years in school and the cost of the education. Does that still produce an ROI that's valid today?

Dr. Paul G.: It does not. I mean it's just as simple ... here's one ... dentists always want studies, like show me the studies and in dentistry, by the time they do a study, they're

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studying something that no one does anymore. So it's like, we gave out a study on amalgam versus composite. By the time it comes out, like nobody cares, right? So, it's like studies are ... I'm not saying anything wrong with studies, but stories are important too.

I mean Pasquale Venuti who's coming to speak with us in Philly, great guy in my group, and he talked about this, so I don't want to hijack what he says, and like, here's the story. I got out in 2002, I have a lot of friends, who I have today, who are practice owners, doing well as practice owners. I'm just gonna say that they earn between \$300,000 and \$600,000 a year, just to use that. As associates all of us were offered the equivalent of \$120,000 as a starting salary, in 2002. Here's the story. That starting salary, it's the exact same salary today, for an associate. But, we took out \$200,000 in debt, and I was lucky that my dad was able to do most of the dental school for me, so I want to be transparent with that. But let's say you had to take out \$200,000, now they're taking out \$500,000. You were one of our investing experts, that's a math problem, right?

Dr. David P.: It is a math problem, yes.

Dr. Paul G.: So, but, the other thing to say is, we went from \$120,000, \$140,000, \$150,000, got experience, maybe bought a practice and kind of a normal cycle. Now these associates sometimes are stuck between \$120,000 and \$160,000 for a long time because, I love food, I was a waiter for many years, that's how I think I learned how to talk to people, and when you're in a restaurant and you have a 9:00 reservation, the 7:00 people may not get up, and you're stuck in the lobby. Then the 11:00 people, they come, now there's a bigger backlog. So these older dentists,

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which is their right, or senior dentists, or seasoned dentists. I always said, my patients, I always go, "Hey Mrs. Smith, your teeth, they're very seasoned." They go, "Does that mean old?" I said, "That's what you said, not me." There's a backlog, they're practicing longer and then the good ones are being bought by corporate. It's not insidious, it's not evil, it's because the 64 year old dentist doing a million dollars a year will sell to corporate, work for two more years, I'm gonna say he's gonna get \$800,000 for his practice and then earn another \$300 for two years, that's \$1.4 million, or he could sell to someone for \$700,000 and leave. So that's part of the problem.

Dr. David P.: Yeah.

Dr. Paul G.: Actually, not part, that's the driving factor of the problems.

Dr. David P.: Big part. Yeah. Yeah. Do you see the window of the practice values particularly being pushed up by corporate, by the DSOs that have been buying pretty heavily the last few years? Do you see that continuing on?

Dr. Paul G.: Oh for sure.

Dr. David P.: Do you see that foreclosing?

Dr. Paul G.: More people are ... see, there's more DSOs and more people coming into the space because it's become popular. It's one of these things, like, does it matter if you're kind of successful as a DSO? That could still be good. So maybe the ones that are giant, Aspen, Heartland, 100 locations, 200 locations, but I know a lot of medium sized ones. They have \$50 million under their DSO, that's not so bad. Then maybe there's new ones that do \$15 million. I mean you're a business guy. What if you're a DSO or a corporate group and you have \$15

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million under your ... that's your program and you make 10 percent profit each year, you make \$1.5 million. I meant that's just your business and I see that happening because dentists are healthier, they're living longer. The young dentists are adverse to taking out more debt, even though that's not a bad decision, still there's some aversion to it, which I understand, and it's a very interesting dynamic that's happening now, because I'm in Pennington, New Jersey practicing, Philadelphia where I live, so I operate Philadelphia, New Jersey, New York, Delaware practice sales. Maryland. I have 20 buyers to every one good practice that wants to be sold.

Dr. David P.: So still very strong. Very strong.

Dr. Paul G.: Yeah.

Dr. David P.: Because you deal with and talk to a lot of dentists, different positions in their career. Those that desire to retire, to sell or maybe some that are in the process, what's some of their biggest challenges? And the reason I ask this is because I talk to a lot of dentists too, not because I initially help them sell their practice as you do, but they talk to me about, "Well, you know, David, if I sell my practice I've been told I can net out this much after taxes, blah blah blah. I just don't know if I have enough." Are you finding a lot of docs that are in their late 50s, 60s-

Dr. Paul G.: Sure.

Dr. David P.: They're at that point where they are still working but they just don't know if they've got enough after selling practice and what to do with that money.

Dr. Paul G.: I mean I run a lot of seminars for sure. I run a lot of seminars for practice transitions just trying to get

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responsible information into the space, sharing, sometimes that results in clients, sometimes it does not, no big deal either way, but I'm trying to tell those doctors to start planning earlier. Learning what it means, learning who can buy it. Used to be five years, so when I had a seminar, sometimes I do them for free. I do them for free, I get some sponsors and I say to someone, why don't you come, and they go, "I don't want to sell my practice for five years." I said, "Just 'cause you come, you don't have to leave selling your practice."

Dr. David P.: That's right.

Dr. Paul G.: If you're gonna have children and there's a good seminar on having, I don't know it fits for us, if there was a good seminar on sending your children to junior high and i have a four year old in Philadelphia, we should go, we should just learn about it and that's a big problem too, because they have mismanaged expectation. I have a million stories, funny ones from sellers. I walk in the person doesn't know how math works. Their practice has \$400,000, they tell me they want to sell it for \$500,000, I say it just doesn't work that way. They say it has so much potential. It's like when someone's told them their practice could be a model, right. Everyone walks around the streets of these cities telling young girls you could be a model.

Dr. David P.: Right.

Dr. Paul G.: If they want to charge you money to join their modeling thing, that's not a serious agency. If they're gonna pay you like a super model, then you are attractive enough to do that. People are doing that with dentists and their practices, saying, "Oh, you'll get a million bucks." They hear this from some guys, so I'm at least trying to put out

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some good systems on it and have them think about it and usually they're pretty appreciative. I was at some very interesting, I'm trying to bring buyers and sellers together. I try to have events that are fun.

Dr. David P.: Yeah.

Dr. Paul G.: Get some medium age dentists like me together. Like we can all talk a little, it's fine, so.

Dr. David P.: Yeah, no, that's good. What about loss of identity? When someone has been a dentist, been dentist-ing for many many years and all of a sudden the hat's gonna come off, I mean is that a fear factor for many?

Dr. Paul G.: You know two years after I still say dentist-ing, but unfortunately my dad passed away very surprisingly and suddenly, but he had said that, we didn't expect that to happen of course, but he actually had said that, it was a very ... my dad was a very bright guy. He wasn't as outgoing with me as with other people, he was great with his patients. But he said, you know, it would be hard to go from being needed every day to not needed. And for him it wasn't about money, it was just like, he was a very, very scheduled guy, always wanted something to do. If he had a day off he would fix things around the house or buy stuff or play golf and stuff, so he was saying like you lose a schedule you lose that, so if you want plan for it appropriately, figure out how that's possible. You may merge your practice into a practice with me and my brother, we've done that. We had a guy for six years here. From 67 to 73. But you have to create a solution for yourself. You have to go into it with a really open mind. Getting the most money doesn't mean you win in anything, right?

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Dr. David P.: Mm-hmm (affirmative).

Dr. Paul G.: So it's like, dentists don't even know how to keep score either. I try to put out in these groups that your life is no different if you make \$450 or \$700,000 a year. You know that. Your life is not different. Yet dentists chase this thing and then they don't take care of other things. When they say, "Oh, I'll go buy a practice in the rural area and I'll make more money." Okay is your wife gonna want to move there? Do you have any friends there? Because this is what life is about.

Dr. David P.: Yes.

Dr. Paul G.: So like you may make \$600,000, but you don't have any social network.

Dr. David P.: Yes.

Dr. Paul G.: So it's, you know, I find this to be fascinating to me. Obviously I like working with dentists 'cause I'm doing it all the time, kinda like you are too, but you see inside their dentist minds and my goal is to kind of mold them earlier to make ... I'm really into dentist decision making. Develop your dentist core in the dental school time, so I know you help with that too.

Dr. David P.: Yeah, no, that's good. Well Paul, lots of wisdom for a guy that's 40.

Dr. Paul G.: Oh, thanks.

Dr. David P.: That says a lot for you, but I think it says a lot for your parents, your father, who obviously instilled a lot of values and a lot of discernment in the way that you look at life and that's gotta be a part of how you look at everything in

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life, because you seem to be very well led in your thought processes.

Dr. Paul G.: Thanks.

Dr. David P.: So I have to give you a lot of kudos for-

Dr. Paul G.: I appreciate that.

Dr. David P.: This is the first time we've actually talked in person, but I have just followed you and see what you ... and you're very diplomatic, but you also make people think and I think that's important. In the right way, you make people think. That's what we all have to do. We all have to think, but we need someone to punch us sometimes in the face and say, "What are you doing, c'mon snap out of it," right?

Dr. Paul G.: I kindly annoy people. I annoy you through kindness, right?

Dr. David P.: There you go, I like that. So real quick, we'll wrap up here. So where did the whole Dental Nachos thing come from? Where did the nachos thing come from?

Dr. Paul G.: I mean I was a chubby little kid. I was always athletic, but I remember when we would go out holiday shopping and of course my mom passed away a long time ago, but she was awesome too, and she helped me be who I was, but I remember this, with the suburbs of New Jersey, where do you want to eat. You're nine years old. Ground Round, Chi-Chi's, this place and I always picked the Mexican place because they would give you the chips right away, and they were free.

Dr. David P.: Yes.

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Dr. Paul G.: And then I worked at one of those places when I was in great shape and you could eat chips all day long. I was 19, awesome shape, great metabolism, and I always find Mexican places are fun, people like it, they join and nachos does do ... they're messy, but you share them. When people say, Andre Sheridan's my buddy and he says he likes tacos, but nobody shares tacos. Want a bite of my taco? Like that's disgusting, right? Then I thought, my wife helped me come up with the name, because I'm a broker, practice person, speaker, friend to dentists, so it kinda represents me and I'm not really a marketing guy, but I did pick, I think, one of the most beloved foods on the planet. So, people are sending me nachos to my phone all the time. They go, "I don't think these are worthy of the group, but I just want to let you know I'm eating nachos," and I said, "I appreciate that. A) There's no standard for the group, all nachos can go one there." But I think that was, you know, I think there's something fun about it and I just like that.

Dr. David P.: Again, it says a lot about you. So people who want to look you up, obviously your Facebook Group, Dental Nachos. Dentists Helping Dentists, is that a domain site or a company?

Dr. Paul G.: I actually built out dentalnachos.com to try to put everything on there and we have a podcast, the Dental Amigos, so we have thedentalamigos.com and I appreciate you letting me, I always say, if there's one thing I can say, out of all the things I do on Facebook, I still love live events and we're having one with Pasquale Venuti in September at the Union League and I like when people come out, meet everybody, and you know my grandmother would not believe this, David, but some people they feel like they're not gonna like me. You know,

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my grandmother, Baba, she would say, "That is impossible, Paul." There's something really funny that happens, when I went to Voice of Dentistry, the Nifty Thrifty Guys saw me speak and I was done speaking they walked up to me, and they go, "Wow we really liked your talk and you were funny and we really like you." And I go, "Oh thanks." And they go, "We didn't expect to like you."

Dr. David P.: Really, oh wow.

Dr. Paul G.: I go that part in your head, but no I said, "Why?" And they said, "Well 'cause all the way you post." And I just want to put this out as our last thought. When you comment on Facebook, you can't control how the person reads it in their head. So, as I talk, I'm so much different-

Dr. David P.: Yes.

Dr. Paul G.: But sometimes I think people read it, whether they have their own sense of insecurity, not that that's bad, or their own upsetness, or they had a bad day, and sometimes they read it and sometimes they get abrasive. So come out and meet me in person, you're gonna like me more than you think. You know.

Dr. David P.: That's a great point. And you know I fall in that same trap, from the standpoint that, you know, I'll read something and when I get to meet the person, I go, oh my gosh it's totally different. So, I think we all have to keep that in mind when we're doing all the commenting on the forums. If people would just chill down a little bit and just relax and not read so much into it because you're right, it's different when you're just texting or shooting brief posts on threads.

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Dr. Paul G.: Yeah, so I appreciate you letting me talk about that and I hope we get to meet in person too someday.

Dr. David P.: No doubt we will. So dentalnachos.com is where kind of the umbrella is. Drpaulgoodman.com, where your dental practice is. What is dentistboost?

Dr. Paul G.: Oh, dentistboost is awesome. We just did the first one in Philly. It was for students, residents, dentists up to six years. It exceeded my expectations. We had 20 dentists live learning with myself and Dr. Greg Charles from Dental Clinical Pearls. Amazing. We talked about mind, words and hands, trying to train all that. And then we did this live stream where people could watch in from all over the country and the people that I have doing that, who are amazing, they really made you feel like you were there. So we're gonna do another one of those in October, so that's on dentistboost.com, so I appreciate you had mentioned that.

Dr. David P.: Awesome. Yeah, no, I love to promote people that are just doing good things in life, business and for our profession, and you're definitely one of those Paul. So thanks so much for being on today. I really appreciate it. It's been fun and we'll share a plate of nachos, I know, in the near future.

Dr. Paul G.: Definitely. Come to El Vez. Thanks David for having me, it was a great time.

Dr. David P.: All right, you bet, take care.

Dr. Paul G.: Thanks, you too.

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