

Ep #250: Dr. Chris Bowman - Building a Practice by Intention



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David Phelps: Good day everyone. This is Dr. David Phelps of the Freedom Founders Mastermind community and Dentist Freedom Blueprint Podcast, today with a good friend of mine. I haven't had a chance to talk to him for some time, so this'll be as interesting for me as it will be for you today.

I've got today with me, Dr. Chris Bowman. Chris, how are you doing, sir?

Chris Bowman: I am great, David. It's so good to talk to you and great to be here with you and your listeners.

David Phelps: Well, it's fabulous to have you back and find out what you're doing, where you are in your career and a lot of things that you've done in your career, which I think will be interesting for our listeners today because you bring a very wide perspective.

So let's go back. Did you graduate in the early '90s, about '94? Is that what I ascertained?

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Chris Bowman: That's exactly right. University of North Carolina, Chapel Hill School of Dentistry in 1994, undergrad there, same school, 1990. I just stayed in school until we won a basketball championship. Luckily we did otherwise, I think the longer you're in school, I call that being institutionalized.

David Phelps: Right.

Chris Bowman: So a good thing we won in '93, so I got out in '94.

David Phelps: You got out in '94. Did you work for someone else? Do you associate for a couple of years before you opened up Advanced Industry of Charlotte in '96?

Chris Bowman: Yeah, I sure did. I didn't feel completely ready to run my own show in 1994 and I joined a large practice in a town North of Charlotte, which allowed me the freedom to ultimately do what I thought I wanted to do, which was to operate a practice in a larger city. I didn't have to worry about a restrictive covenant, which is good for younger doctors to consider.

If you're going to join a practice and if you think you know where you want to practice, find a place that's not too incredibly close to where you think you might want to be so that you have the freedom to go where you want to go later on.

David Phelps: Smart advice right out of the bat. So I'm going to dig a little bit deeper with you. I want to give a little bit more of your overview and your background a little bit so listeners know a little bit more about you.

So as we just indicated, Chris has been licensed and practicing since '94, he opened his own practice, Advanced Dentistry of Charlotte in '96. He's got a top ranked practice and I'll talk to you about that a little more today, how you get there if someone

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wants to aspire to have the kind of practice you have and where we are in the marketplace today with the industry.

The focal points in your practice include elective cosmetic dentistry, aesthetic restorative dentistry, six month smiles, adult orthodontics, Invisalign and Clear Correct orthodontics, pinhole gum rejuvenation, obstructive sleep apnea treatment and sedation dentistry.

Also you started Dental Insiders, which is a place where you provide coaching, consulting, training programs for dentists and dental team members. You started that in about 2005 I believe.

Chris Bowman: That's right.

David Phelps: You currently reach well over 3000 dentists, both here in the US and internationally. You've got several levels ranging from e-letter subscribers to private coaching clients and your Dentists Success Blueprint program.

You also are a clinical instructor for Six Months Smiles since 2011. I knew that about you because I've seen you on the circuit talking about that. You also founded the Get More Yeses Advanced Dental Communications course in 2014 for doctors and their dental team members.

You've also been a major contributor to a lot of the publications that we all know of: Dental Economics, Profitable Dentist, 1000 Gems, other online publications and forums. Many programs you've lectured at, I won't name them all here, but just put this to say that Chris has been around the block a few times.

You're also married, a proud father of three children and you've got your family awesome lab dog, Cooper. There's the big picture of Dr. Chris Bowman.

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Now, let's go back to '96 when you were starting out. You had a couple of years getting your feet on the ground and you talked here a minute ago about how it's important for young dentists who are considering that. I think most dentists today probably coming out of school, particularly with the debt loads, probably shouldn't jump right into trying to own their own practice even if they can get the financing. Getting some experience, so being observant of a restrictive covenant which most offices will have so you don't put that into place and restrict yourself from where you want to ultimately practice. What else should young dentists be looking for in those first few years of getting experienced? What are the keys that they should do, getting themselves ready perhaps to own a practice of their own?

Chris Bowman: Yeah. Boy, that's a great question. I would go back ... It may be a little late to say this for some, but if you have some dental students listening or some even pre-dental students listening, which I'll bet you do, I would say, "Look into two different areas of focus from an educational standpoint."

One would certainly be business and I would include entrepreneurship in that category, not necessarily academic business, but more real world practical business and entrepreneurship and marketing ideas. A second thing would be psychology. I stumbled upon psychology as my eventual major in college. My first thought was I needed to be a chemistry, a biology major to be a healthcare professional, but I soon realized that those things weren't going to really help me be a better dentist and really how you communicate and interact with people. That's the key. I became a psychology major and when I took first courses, I realized it was a great fit for me.

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Even even after graduation from dental school, it's never too late to look into those two major topics: business development, to include all aspects of that, and also psychology. What makes people make ... What causes them to make the decisions that they make? Obviously those decisions often don't make sense, so there's got to be something else that drives that. It's psychology.

David Phelps: No question about it, Chris. You're absolutely right. We're in a people business and even though our technical skills are exquisitely important and how we treat and solve problems for our patients, if we can't communicate, if we can't employ the leadership we need to have great teams around us to allow us to do what we do best, yeah, everything else becomes like the old hamster wheel. You just feel like you're spinning plates trying to figure this stuff out. I think that's a key.

What would you also say in terms of the actual place, the mentorship, the type of office practice? There's private practice opportunities and associates. There's corporate today. Can you give a little bit of an idea? Because I know again, young people coming out of school, the debt thing, the debt load today for most is scary. So I think the first thing that we're looking at today, which I get it, is, "I've got to get a paycheck just to pay the debt load." How do you balance the two, making sure you're getting paid to pay off the debt, but also getting the really key experience? What would you look for there if you could ...? I know it's a broad question, but what are some key elements to look for in that particular practice setting?

Chris Bowman: Sure, yeah. Well, I totally get the idea of, "Gosh, I've got a lot of debt and I've got to go handle that debt and I've got to go find an opportunity that pays me well." That's certainly where the corporate entities have swooped in and taken over and

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provided a solution for younger dentists that at least solves the financial part of it.

Then there's also the satisfaction side of it, the occupational and business satisfaction. Are you satisfied doing what you're doing? I'm a big believer that ultimately, eventually if you're not doing what you like to do, it will catch up with you at some point in your life. So I would look for places where you can do more of the dentistry that you want to do, and again, that may be a bit of a challenge when you're just starting out because you may not be clear exactly what you want to do starting out.

But I would say ... Let's say you get into a practice and you're working and you're doing fine and you've got that box checked, "Okay, I'm making income, I'm paying the bills, I'm paying down my loans, I'm getting that going," then you can begin to think about what's your long range plan? What's your five year, 10 year, 20 year plan? What type of a practice do you want to have?

Obviously the majority of dental practices today are competitive fees, PPO involvement, and obviously we've seen many, many cases where that model can be extremely successful. That's not the type of practice model that I have. I do have the benefit of having started my practice 23 years ago. I'm still currently only involved with one group and I'm sure you could guess who it is, Delta Premier. But aside from that, I have no other PPO involvement, and that is obviously a tougher road to follow when you're starting out in practice.

If you want to do that however, if you want to have a niche practice, if you want to have a practice that zigs when everybody else is zagging, I think there's actually a gap in the market for that. I believe that there's a gap in the market for a

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smaller boutique-y upper end practice. Now along with that though, goes the caveat that I think you've got to have number one, like you said, you've got to have great technical skills and you've got to have impeccable communication skills and you've got to understand things like customer service. Those are the kinds of things that people command when they begin to pay out of pocket for procedures. Now what you gain on the other side is you gain profitability and you gain the freedom to do more of the dentistry that you want to do.

That's the path that I've chosen my entire career. I've been, I guess, fortunate, blessed, and also I've worked hard at it. Those are the things that to me are important and if those are things that are important to some of your listeners out there, then I would encourage them to to pursue that path. You don't have to follow the path that is the most beaten down path. You can forge your own path and I believe that in dentistry, niche dentistry is the way to go.

In other words, figuring out which solutions can you provide that you enjoy doing that solve problems that patients know that they have. That could be a solution such as a solution to being unhappy with your smile. Certainly being unhappy with missing teeth, which leads to things like dental implants of course. All those different niches serve a common or a well-known problem. When you can be known as the solution to certain problems, and I believe the more specific the problem, the better, then you can really build a following in your area and you can become known as as the person to go to for those particular things.

David Phelps: I agree. I think when you become niched and you actually speak to a specific clientele, a patient base, about specific problems, when you're speaking to them because you can then

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yes, then you can become the boutique, you can become the purveyor of the solutions to those problems that they only want to go see that expert and not just a general broad-based, capable but maybe not specialized, dentist.

Now, the question here for you Chris, is how does that look from a demographic basis? You're a relatively large metropolitan area, Charlotte, for sure. It's growing like crazy where you are, so a very vibrant economy. Is that a requirement to have that kind of a niche practice or could you go a little bit more rural, semi-rural and still have a calling where you would draw from a larger base? You work with a lot of other practitioners and dentists and I'm sure this discussion comes up. What do you see there? How important is the demographic and the affluence of the target base?

Chris Bowman: Yeah. I'm so glad you asked that question because it's interesting. Just about a month ago, I was at a dental practice in a very small town that's about an hour and 40 minutes outside of Detroit, Michigan. I think we would all agree that that's not necessarily the most affluent market in the country. The town literally is about 2500 people in the town. It was awesome. I was there for a two day coaching and I did my entire two day communications course just for that practice.

A great doctor, great team. They do a lot of bread and butter dentistry. They do some focused niche dentistry, but I was able to help them do more of what they want in their market. A niche doesn't necessarily have to be super expensive or high fee. I will say that niches ... Certain things do tend to command higher fees because there may be less competition for those particular services. A pinhole gum rejuvenation is a great example of that.

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I do believe, David, that you can accomplish this in any market. It may be a different ... There may be a different way to market that. I encouraged this doctor in his local market to use radio because radio really casts a wide net and in a smaller market it can be much less expensive than than for example, trying to market here on the radio in Charlotte where it's very expensive and it's something I've chosen not to do.

You know what? Using social media today, I'm just now beginning to utilize social media as a marketing means more than I ever have. That's getting ready to blow up for us. That's another way that you can reach people that you wouldn't normally be able to reach.

There are ways to do it in any market. I know this speaks to that common question that we have heard from ... Or the common comment that we have heard from one of our mentors, Dan Kennedy, when he says, "But my practice is different or but my area is different." And it's really not that different. There are going to be some differences, but it doesn't preclude you from doing what you really want to do.

David Phelps: Do you think it's feasible for a dentist to start out in practice ... As you said, there are many practices that can do quite well with more of a PPO, a managed care insurance driven component. Is it feasible, do you think, to have a hybrid practice where maybe a younger dentist is starting out as we all did and you see yourself in three years, five years, 10 years out as wanting to be a practitioner that has a lot of skillsets, the kind that you have, that you've grown and developed over the years Chris, it didn't happen overnight. You chomp things down over time and it became skilled in a lot of areas where you are today. It's not going to happen overnight.

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So as a young dentist who is building their practice and has this vision for more of a niche, can you have a hybrid where you're serving a broader base, more bread and butter, but could you also market in a certain way ... You talked about marketing, a message to ... Another segue. What if someone got really good at sedation, they added that component to their practice or maybe it's sleep apnea, obstructive sleep, they add that component. Would you market a specific part there and could you incorporate that into a practice that's more bread and butter and make that as a stepping stone is what I'm looking at?

Chris Bowman: Yeah, absolutely. I think that's a wonderful way to start a practice for a younger doctor because we would probably both agree that the fastest way to grow a practice today, with rare exception, might be to be a part of some PPO plans and start a practice and get some influx of new patients. Then from that patient flow, those niches, those niche procedures, will be there in that patient base.

I do believe that you can build a patient base through that model effectively. Like I said, we've seen countless examples of that. It used to be back when the PPO stuff was starting out, we were a lot more against that. We were like, "Oh, this isn't going to work or be profitable." Well, many have shown it to be profitable.

But I believe that you can develop a niche following. Many people call it a practice within the practice. You can certainly develop that by solving specific problems within your own practice. Probably the safest way to build a practice, in my opinion. I think if you go out there and just try to build a niche practice from scratch, solving one or two major problems, that might be very difficult to do. I do believe that the safest way would be to build your practice with good patient flow and then

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begin to make sure your patients know about the things that you can do for them.

That's a major problem that I see, or I should say an opportunity, that I see as in a lot of practices. Their patients don't even know what they can do for them. The only people that are going to tell the patients what you can do for them are the doctor and the team members. I cringe when I hear this and I've got to admit it happens occasionally in my practice, I will occasionally hear a patient in my practice ask one of my team members, "Are you taking new patients?" And I'm like, "No. Why don't they know that?" Well, we're busy people and we don't often have the opportunity to remind our patients. They see that we're busy. All those things come into play and that's something that I focus on in my communications course, is making sure that doctors and team members really let patients know what they can do for them so that patients know what the opportunities are for their health and their smile.

David Phelps: The communications aspect, and you've already mentioned it Chris, but I'm just going to jump back on that, that's such a key part of just success in any part of one's life; personal life, family life, business life. What I've found so many times is that I think that I have communicated well to somebody, it could be my spouse, it could be my daughter, it could be a staff member, it could be a patient. I think I've done a good job in my head. But what we forget to know is that we all come from a perspective. we come from experience, we come from doing what we do well and we assume many times that the other person has the same perspective and knowledge based experience. What we know Chris is they don't. We have to find different ways, better ways, and not be afraid of being repetitive sometimes. Right? Don't you find the same thing?

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Chris Bowman: Yeah.

David Phelps: We might say it one way, one time, but we have to look the other person in the eyes and just make sure and maybe have them repeat back. This is a big part of what I know you teach in communications. I can't emphasize enough what you said earlier, this is such an important part of life and business that learning this early on could be one of the big leverage points in a younger person's practice, both with team and with patients and learning how to do that. You just said it, sometimes you hear it in your practice where up or a patient will ask, "Do you take new patients?" And you're just saying, "Oh my gosh, let me pull ..." well, what hair you have left, Chris. I don't know.

Chris Bowman: I don't have any left.

David Phelps: You probably pulled it all out. Speak to that a little bit. I'm talking about communications here and we're talking about a young doc who wants to get things going. The experience part, the experience and having a team on board that is espousing the kind of experience and skillsets that you have. You, the doctor, can't be yourself, all by yourself because you're busy, you're busy focusing on treatment. What are some of the keys to getting a team on board? Again, big, big question. I know you do seminars on this, but give some key nuggets for our listeners who are probably fighting that age old problem of, "I'd love to do dentistry, but my staff, I just have so many problems with my staff."

Chris Bowman: Sure, sure. Yeah. That's something that again, this is right up my alley. I'll start by saying that communications, in my opinion, it's the one thing that allows you to do more of what you want to do and less of what you don't want to do, because

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if you can't communicate properly ... Let's say you're a dentist and you really haven't learned those skills yet, well, you're going to be relegated to doing the dentistry that happens to come in the door and you're going to have to do what, quote, unquote, "You feel like your patients need," the ability to ethically influence patients to make better decisions for their own dental health. This all has to be the ethically, unfortunately, it can be used unethically, but it has to be used ethically to help patients make good decisions that are in their best interest. I think that's where a major misunderstanding is.

So to that point, a couple of things that I'll point out' in dental school we were all taught about the same way. We were taught, and also assistants and hygienists, they were all taught about the same way in school. We were taught how to do things. We were taught how to fix things. Now before that, we were taught how to diagnose things. But the jump was pretty quick. It's was like, "Okay doc, what's the problem here?" You diagnose the problem and then, "Okay, what's the solution?" A crown, for example, for a broken tooth. Well, "Okay, let's show you how to do a crown." Well, unfortunately for many doctors and team members that haven't really learned the proper communication skills, that's the way they describe things to their patients.

They say, "Okay," David, if you're my patient, "Okay David, do you know you've got a broken tooth here or you've got a tooth that's about to break. You need a crown." They just jumped straight to the solution without really developing the problem and how it progresses if it's not treated. Then a dentist might go through the process of how they do the crown and they call that educating the patient. Well, we're not trying to teach patients how to become dentists. Like you said, we don't think like they

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do and they don't think like we do. We've got to present things to them in a different way.

I'll say this too about about doing dentistry. No one wants dentistry, no one wants dental treatment. But what they do want is a solution to the problems that they know that they have. Would you agree that that's the case that they don't? Most people just don't want dental treatment, but they want the solutions to the problems they know that they have. Would you agree to that?

David Phelps: Yeah. They're looking for a certain outcome and if you can express and help them visualize what that outcome looks like when the treatment is finished, then that's how you can get buy-in. Right?

Chris Bowman: Right, exactly. So if they want solutions to the problems they know they have, then if we can get better at presenting the problems and presenting the conditions and showing them how those conditions and problems are not moving in the direction that they want their oral health to go, then patients will begin to request the solutions. They'll begin to say, "What could you do about that? How can you fix that? I don't want this to continue inside my mouth." Again, whether it's something more benign, like a smile that they don't like, that can be a big problem for someone if they cover their mouth when they smile, if they avoid taking pictures, that's a huge source of embarrassment and lack of confidence.

If it's something more pain oriented, then those problems are obvious, but you and I both know that most dental problems have no pain and symptoms. We must get really good at presenting problems and conditions to patients so that they literally become uncomfortable with their current conditions

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because most people perceive dentistry to be something that's uncomfortable anyway. They've got to be more uncomfortable with the way things are so that they overcome the objections or the anticipated discomfort, whether it be physical discomfort or financial discomfort, of getting the dental work done.

I think that's a big missing link in communications is when I can help a team and a doctor focus on communicating the existing conditions and problems with the patients through digital photography and the proper conversations to have that are engaging and that are interactive. It's not just talking at a patient. When I can help them with that, that is when the light bulbs go off and frankly, that's when the numbers go up in the practice.

David Phelps: Yeah. Outstanding. Chris, we've talked a little bit earlier about styles of practice. Talk a little bit, if you would, about the importance of positioning once practice, not only for where the doctor feels that they are today or maybe where the doctor wants to be in two or three years, but go down the road in a career. How important is positioning a practice so that you have maybe multiple exit strategies or maybe if you want a position to bring on associates or partners, how should want to look at that?

How should one make decisions today, younger in career, when they don't really know yet, but to the lay of the land so that they've got more options, and perhaps down the road 20 or 30 years whenever that's going to be, for a potential exit. Is that even feasible to look at that today in a younger career position?

Chris Bowman: I think it is possible. I'm a little farther down the road, but I'm certainly looking in that direction and I'm at a point now where I have 25 years in practice and I have to be looking in

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that direction and I've been looking in that direction for quite awhile. One thing that I've seen here in Charlotte, which many of you that don't know is it's a large banking center. Bank of America is based in Charlotte, Wells Fargo and First Union National Bank merged a number of years ago after the financial crisis and First Union Bank, which was really heavy on the East coast, based in Charlotte, North Carolina. A lot of major banks, First Union and Wacovia, both were joined together.

So anyway, the point I'm trying to make is that I've seen time and time and time again, a small bank will get started in Charlotte and then that bank will grow, they'll provide wonderful service for their clients. Then eventually in a couple of years or a few years, that bank will be bought by a bigger bank and then that bank will be bought by an even bigger bank.

I've seen through my own patients that are bankers, their goal, in some cases, is to get their bank to a position where it's increasing in revenue, it's increasing in profitability and it's going up where then they decide, "Okay, I'm going to transition and one option is I'm going to transition into a larger entity."

That's certainly an option that dentists have available to them. It's become a lot more prominent in the last, I don't know, five or 10 years, where dentists could consider that approach. Then there's the other approach, do you want to open more branches? Many, many dentists now are opting for opening multiple practices. I've seen it more, I don't know about you, David, I've seen it more in the last five to 10 years than I think it's ever happened in dentistry.

David Phelps: Yes.

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Chris Bowman: I think it's obviously a great model for the doctors who choose to do that. One word of caution is that I would say you want to make sure that each one of those branches, each one of those practices is, in and of itself, profitable. You don't want to be working like crazy for five practices that are just marginally profitable when you could have one or maybe two that are insanely profitable.

David Phelps: I totally agree.

Chris Bowman: Yeah, so I've worked hard to make my practice very profitable. I've got one practice. I come from the solo doc background and so I've worked hard to make my practice as profitable as it can be, and frankly, my second practice, so to speak, is the other things I do, you know? That's how I operate, which is different than, than many. But yeah, I believe that you can grow something, and I would say that when it comes time to think about transitions, I think the last thing you want to do is begin to sell your practice or think about selling your practice when it begins to decline or when you begin to slow down. I know that's something that you preach, David, and that's something that is a big mistake. No one ever wants to sell a declining asset.

I've seen that happen many times in dentistry. To me it's unfortunate for the doctor that poured his or her heart and soul into the practice for X number of years and now they're getting a diminishing return on that practice.

David Phelps: Yeah, well said. Well said, Chris. So 2020, what's that going to look like for you? You just mentioned something that I think it's very important for every dentist as they go through their career. You've got to have something that's next for you and you've had a next all along or very early on in practice

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because I think it's because of your curiosity. Number one, you want to improve yourself. You have curiosity about lots of things in life besides just the clinical part of dentistry. We already talked about that you do coaching, consulting because you do a lot of research. You love to be in the game. You have that next light out. So how do you see 2020 opening up for you? What's your mix between practice and outside coaching, consulting, lecturing, the things that you also love to do?

Chris Bowman: Yeah, great question. Clinically my goal is to continue my practice and continue to grow it. We grew well over \$100,000 this year and the year's not closed out yet of course, but we've grown over the last year. In my 23 years, I've had one year of negative growth and I'm sure you can guess when that occurred.

David Phelps: Probably so.

Chris Bowman: It was actually 2009. It was the only year where we had negative growth, but like I said, we've been very blessed and I've worked really hard to develop that practice, so the practice is going to be humming along. I'm expanding my communications course to more locations around the country. We're in the process right now of finalizing some dates and locations, but no matter where you are in the country, we plan on having my course in the, maybe the Phoenix, Scottsdale area. We're also looking at Dallas, Chicago, Florida, maybe Boston, and the Charlotte, Raleigh area, just so we can cover the whole map throughout the course of 2020.

And again on the niche front, I've been doing Six Months Smiles and different orthodontics for adults. I call it adult cosmetic orthodontics. We've been doing that now for 10 years. I'm looking to expand the implant niche in my practice. That's

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something that many doctors have developed very well. I'm looking to develop that further and.

keep working on those niches. So for other doctors out there, I would consider, what is something that you may want to add to your practice? Where is a gap in your market? Your market being your practice or your practices. Where is something that if you can provide this solution for your patients, it'll make a big difference for them and for you and your team? I would focus on something like that.

Those are all the things that I'm working on for next year, developing my clinical skill as always. Like you said, we have to make sure that stays razor sharp and working on my communications.

I want to say I never did get to this, we jumped in, but the reason I became proficient in communications is because I was solving my own problems. My problems early in my career is I was so eager to help my patients and I was so eager to solve their problems that I made all the mistakes that could possibly be made in communication/ I got tired of watching the backs of my own patients heads walking out the door, sometimes never to return.

That's where the impetus came from me to learn, "Hey, why is this happening and what can I do about it?" That's where the communication thing came from. Yeah. That's where I'm headed in 2020 David, and I'm just as excited about this coming year as I have been about previous years.

David Phelps: That's the way you want to roll through life. Well Chris, how can people best find you? Website, contact information, how should they go about it?

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Chris Bowman: Sure. I'm going to give them something real simple. It's my email address. I would ask any doctor who is interested in communicating with me to email me at Chris@dentalinsiders.com. It's C-H-R-I-S@dentalinsiders.com. We are currently revamping our website which is Dentalinsiders.com. That's probably going to be launched at the beginning of the year. On that website is going to be listed all the courses and locations and all the different ways.

I'm also available, I think I mentioned earlier, I was at that practice outside of Detroit about a month and a half ago. I was at another practice in Cincinnati, Ohio back in May. That was two practices, 43 team members. I've been to large cities, small towns, everywhere in between. I'm available for practices that want me to come in and coach them privately as well. All that information is going to be on the website, but for doctors who want to reach out to me before then and maybe cut in line, you could just email me.

David Phelps: Excellent. Well Chris, thank you so much for your time today. It's great to catch up with you. I can highly tout Chris's expertise and his passion. I think the big thing is Chris, I know you're passionate about what you do. You're passionate about how you serve your patients as well as build teams. If anybody's looking for any of the aspects that Chris has figured out in his own life, his own career, figuring out solutions to the issues we all come up with, that's the best person to learn from, when you've overcome the things that we all deal with.

So Chris, thanks again for your time today. I really loved the conversation.

Chris Bowman: Hey, same here. David, it's always a pleasure speaking with you.

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