

WHEN YOU ARE RUNNING BEHIND

How to regain control without rushing the dentistry or pretending the delay is not affecting everyone

This guide addresses a clinical day that is running late - not an empty schedule, cancellations, or patients failing to show. The first task is to understand what created the delay.



RUNNING BEHIND IS A FACT - NOT YET A DIAGNOSIS

Once the day is late, everything can feel like one problem. It is not. The response depends on whether time was lost to the clinical situation, the schedule design, the workflow, or your own current pace.

Do not rush before you understand what you are trying to recover from.

WHAT MAY HAVE CREATED THE DELAY

1 THE CLINICAL SITUATION CHANGED

The procedure became more complex, new information appeared, or the patient required care that could not responsibly be compressed.

2 THE PLANNED TIME WAS UNREALISTIC

The appointment length did not match the procedure, patient needs, or level of support required.

3 THE WORKFLOW STALLED

The room, instruments, materials, images, assistant, or necessary information were not ready when needed.

4 AN INTERRUPTION DISPLACED THE PLAN

An emergency, consultation, equipment problem, or unplanned responsibility consumed time.

5 YOUR CURRENT PACE NEEDS ATTENTION

A repeated procedure, decision, transition, or documentation task is consistently taking longer than expected.

STOP THE SILENT DRIFT

The delay becomes harder to manage when everyone can see it but nobody names it. You do not need a perfect rescue plan before communication begins.

1

PROTECT THE PATIENT IN THE CHAIR

Determine what must be completed appropriately and what should not be rushed merely to recover the clock.

2

ESTIMATE THE REAL DELAY

Replace 'almost done' with the most accurate estimate you can give based on what remains.

3

IDENTIFY WHO IS AFFECTED NEXT

Look beyond the next patient. Determine which appointments, team members, rooms, and commitments are now involved.

4

TELL THE RIGHT PEOPLE

Give the team enough information to update patients and adjust the day without requiring them to guess what is happening.

5

MAKE ONE OPERATIONAL DECISION

Move, shorten, reassign, delay, or protect what is appropriate. Do not create five improvised changes that produce more confusion.

Important: A scheduling problem does not become safer because the dentist silently absorbs it by moving faster.

COMMUNICATE THE DELAY WITHOUT CREATING MORE CHAOS

Use the smallest amount of language that gives people something accurate to act on. Adjust these examples to the actual situation.

TO THE TEAM

This appointment needs approximately ___ more minutes to complete appropriately. Please update the next patient and let me know what needs a decision.

TO A PATIENT WHO HAS BEEN WAITING

I really appreciate your patience. I want to stay respectful of your time. I expect it may be another ___ minutes. Would you be comfortable waiting, or would you prefer to reschedule?

WHEN THE CASE CHANGED

I need approximately ___ more minutes to complete this appropriately.

WHEN THE APPOINTMENT LENGTH IS THE PATTERN

I am consistently needing more time for ___. The scheduled time needs to reflect that while I work on improving efficiency.

Avoid saying 'five more minutes' because it sounds better. Avoid disappearing into the operatory while the team invents an explanation. Accuracy is more useful than reassurance you cannot deliver.

DO NOT CALL EVERY DELAY A TIME-MANAGEMENT PROBLEM

Review one late day closely enough to find a useful change. Do not turn it into a vague conclusion that you are simply too slow.

1

WHERE DID THE DELAY BEGIN?

Name the first meaningful change in timing, not the moment everyone finally noticed.

2

WHAT CREATED IT?

Clinical complexity, unrealistic appointment length, workflow failure, interruption, personal pace, or more than one.

3

WHAT WAS WITHIN MY CONTROL?

Be honest about your preparation, decisions, transitions, documentation, and communication.

4

WHAT REQUIRED A SYSTEM CHANGE?

Identify what depends on scheduling, staffing, setup, equipment, or another person's decision.

5

WHAT ONE CHANGE SHOULD HAPPEN NEXT TIME?

Choose something specific enough to test: time, preparation, assistance, sequencing, communication, or case selection.

You do not protect the schedule by rushing the patient in the chair. You protect the next schedule by understanding what made this one late.

A short guide can give you language and a place to start. It cannot see your schedule, hear your conversations, or weigh the trade-offs in your position. Without context, even good advice stays generic.

For a deeper dive, explore the New DDS Unfiltered Digital Library or work directly with Dr. K.

NewDDSunfiltered.com

Professional note: This guide is for general education and workflow reflection. It does not replace individualized clinical, employment, legal, safety, or practice-management guidance.