

MC2 Implementation For Doctors

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1. Headspace/Decision

- a. Energy
- b. Neurological
- c. Get past what if's?
- d. Change is good if quality improves
- e. Clarity
- f. Strategy/Plan
- g. Easier Cash Practice Model

2. Communication is Key:

- a. Confidence
- b. Excitement
- c. Achievement
- d. Something Better

3. Patient Scenario's/What can you expect

- a. "We are so excited?"
- b. "I am happy, why the change?"
- c. "This makes me a little nervous"
- d. "No way, I want it like it always has been"
- e. "Have you been doing it wrong all along?" (Rare but prepare)

4. Staff and Plan and Systems

- a. Crucial to start adjusting them 1st
- b. Let them experience the difference
- c. Face up
- d. The need for Resting and how to accommodate

5. Methods to Implement:

- a. Run a Case study with a select number of patients
- b. Start with a re-evaluation
- c. Utilize scanning as a entry point
- d. Just plain ask and try with honest feedback
- e. Transition Slow (New patients only)
- f. Modify in sequence
 - i. Utilize analysis-Adjust diversified
 - ii. Next week- utilize drop/diversified
 - iii. Following week- Utilize instrument/drop mixed
 - iv. 1 month mark- just utilize instrument and get feedback
- g. Send and Invite to patients to try a new neurologically based technique starting at (Date)- you will be surprised as how many want to try it

6. Creating an atmosphere of Wellness/Lifetime Care vs. Pain Care

- a. This is crucial to success
- b. What you choose to say will impact this implementation exponentially
- c. Why stop doing something that makes you feel/function great