



Dental Patient Referral Program Checklist 2026: Tracking & Incentives

Program Design & Structure

Define the core mechanics of the referral program, including reward types (discounts, gift cards, or service credits) and eligibility criteria for both referring patients and new patients.

Referral Reward Type

Write something...

Target Audience Segments

- ☐ Existing Patients
- ☐ Local Business Partners
- ☐ Social Media Followers
- ☐ Internal Staff Members

Program Terms & Conditions

Write something...

Reward Delivery Method

- ☐ Account Credit
- ☐ Physical Voucher
- ☐ Digital E-Gift Card

Minimum Referral Threshold

Enter a number...

Program Launch Date

Enter date...

Marketing & Promotion Assets

Verification of all physical and digital promotional materials, including in-office signage, social media graphics, email templates, and website landing pages.

Promotional Channels Utilized

- ☐ In-Office Signage/Posters
- ☐ Email Newsletter Templates
- ☐ Social Media Campaigns
- ☐ Patient Referral Cards (Physical)
- ☐ Website Pop-ups/Banners
- ☐ SMS/Text Message Blasts

Promotional Tagline/Copy

Write something...

Approved Graphic Assets

 **Upload File**

Primary Launch Date

- ☐ Q1 Campaign
- ☐ Q2 Campaign
- ☐ Q3 Campaign
- ☐ Q4 Campaign

Campaign Objectives & Target Audience

Write something...

Staff Training & Communication

Ensuring all front-desk and clinical staff are trained on how to pitch the program, handle inquiries, and explain the incentive structure to patients.

Staff Members Trained

- ☐ Front Desk/Reception
- ☐ Dental Hygienists
- ☐ Dental Assistants
- ☐ Office Manager
- ☐ Dentists/Doctors

Training Date Completed

Write something...

Key Talking Points Communicated

Write something...

Training Resource Status

- ☐ All manuals updated
- ☐ Scripts available
- ☐ Pending review

Trainer/Manager Acknowledgment

Tracking & Documentation Workflow

Establishment of the process for logging referrals in the Practice Management Software (PMS), ensuring patient records are linked to the referring source.

Referral Source Category

- ☐ Existing Patient
- ☐ External Professional (Specialist/GP)
- ☐ Social Media/Digital Ad
- ☐ Community Event/Sponsorship

Referring Patient Name

Write something...

Date Referral was Recorded

Enter date...

Documentation Completed

- ☐ PMS Note Added
- ☐ Patient File Updated
- ☐ Referral Tracking Spreadsheet Updated
- ☐ Incentive Voucher Issued

Screenshot of PMS Entry/Confirmation

 Upload File

Staff Member Verification

Incentive Fulfillment & Redemption

Standardized procedures for auditing earned rewards, applying credits to patient accounts, and managing the delivery of physical gift cards or vouchers.

Reward Type Redeemed

- ☐ Account Credit
- ☐ Gift Card
- ☐ Service Voucher
- ☐ Product/Merchandise

Redemption Date

Reward Value (\$)

Patient Account Number

Verification Steps Completed

- ☐ Referrer identity verified
- ☐ New patient treatment started
- ☐ Credit applied to ledger
- ☐ Incentive logged in CRM

Proof of Voucher/Receipt

 Upload File

Staff Verifier Signature

Performance Monitoring & KPIs

Monthly review of referral volume, conversion rates of referred patients, and total program ROI to assess the program's impact on practice growth.

Audit Period Date

Enter date...

Total Number of New Patient Referrals

Enter a number...

Referral Conversion Rate (%)

Enter a number...

Total Revenue Generated from Referrals

Enter a number...

Program Performance Rating

- ☐ Exceeding Targets
- ☐ Meeting Targets
- ☐ Below Targets

Analysis of Performance Trends & Growth Opportunities

Write something...

Practice Manager Approval

Compliance & Legal Review

Ensuring all promotional offers comply with state dental board regulations and anti-kickback laws regarding patient incentives.

Compliance Checklist Items

- ☐ State Dental Board advertising guidelines reviewed
- ☐ Anti-Kickback Statute (AKS) compliance verified
- ☐ No 'unethical' value/incentive limits exceeded
- ☐ HIPAA-compliant patient data handling confirmed

Legal Review Notes

Write something...

Last Compliance Audit Date

Enter date...

Compliance Officer Approval

< Previous

> Next

👍 Finish

🔧 Generate Sample Report