Dr. Mary Grace Rizzo-Fryzel
Pennsylvania dentist’s 7,240-square-foot practice is abuzz with high hopes, high tech and happy patients

by Kyle Patton, associate editor, Dentaltown magazine

Dentists spend most of their working hours in their practices, so they usually don’t get many opportunities to see what it’s like inside another doctor’s office. Dentaltown magazine’s recurring Office Visit profile offers a chance for Townies to meet their peers, hear their stories and get a sense of their practice protocols.

In this issue, meet Dr. Mary Grace Rizzo-Fryzel and step inside her amazing 7,240-square-foot practice, housed in a reimagined mall in Scranton, Pennsylvania. Only five years into practice, Rizzo-Fryzel is already crafting a dream practice, complete with some of the best technology available, a rapidly growing patient base and one of the most unique locations around.

OFFICE HIGHLIGHTS

Name and credentials
Mary Grace Rizzo-Fryzel, DMD

Graduated from:
Maurice H. Kornberg School of Dentistry at Temple University

Practice name:
Electric City Dentistry, Scranton, Pennsylvania electriccitydentistry.com

Practice size:
• 7,240 square feet; 15 operatories

Staff:
Three dentists, five hygienists, three expanded-function dental assistants, one office manager, one assistant office manager, one administrative assistant
You have a 7,000-square-foot practice in one of the most unique settings imaginable for a dental office: a former mall that’s undergoing a renaissance.

My practice is in the heart of downtown Scranton, Pennsylvania. The building was previously a retail mall, but after a declining retail economy, and transition of ownership, it’s morphing into mostly professional space known as The Marketplace.

My practice is very patient-centered: People enter The Marketplace via escalators and elevators from a well-lit free garage to the first floor, where my practice is. Inside, the waiting room features more than 20 La-Z-Boy chairs and a disability-accessible bathroom—one of five total bathrooms in the office. A large granite counter functions as the interface between patients and my administrative staff, and patients can enter the clinical area from entrances on either side of the reception area.

The clinical space is divided into areas based on purpose. One hallway is mostly all operatories; the interior houses multifunction hybrid hygiene rooms. The opposite side of the office contains an in-house lab, where I have full milling capabilities; my Panorex and other hardware are also on that side. A central sterilization with counter space and autoclaves connects the right and left hallways of the office. Patient consultation rooms are also contained in a designated area. The entire rear of my office is for my staff. We have a large multipurpose room with a full kitchen, as well as tables and seating for learning sessions. Lastly, there are three offices (two with full bathrooms) that can each accommodate at least one dentist.

There’s a significant amount of activity happening at The Marketplace. Other tenants include a multispecialty medical group, an aquarium and reptile den, a bank, Crunch Gym and Luzerne Community College. Across the street, construction is nearing completion for luxury apartments. It’s a great time to be in Scranton, and I am grateful to be part of its revolution.

You didn’t just up and decide to open one of the largest practices in the state; there was a lot of planning and a lot of experiences that led you to the decision.

I worked as an independent contractor for a few offices, one of which I assumed offered partnership opportunities. Practically speaking, I focused most of my clinical efforts there and worked in two other offices that were closer to where my husband was completing his residency. It became obvious in 2017 that partnership wasn’t an option at the main office—and even more ominous, the owner was exploring options consistent with dental service organizations.

I had zero interest in that model, and the lack of communication and transparency was enough to determine what I didn’t want for my career. My husband, David, and I did a lot of soul-searching and had some significant conversations when we realized what I thought was substantiating a path to partnership was actually practice-building for a practice where I would only ever be an employee.

Fortunately, I’d never signed a noncompete or a restrictive covenant. I was also the main dentist in the office and had a large patient base. Admittedly, at 28 years old, this was a precarious situation, the thought of leaving an office and potentially doing it on my own. Serendipitously, the decision was made for me: My former boss knew that my goals and his were not parallel. I was fired on Good Friday of 2017 after refusing to sign a contract to
be a “forever employee.” Professionally, that was the best day of my life: Practically, it allowed me to advance; on a more personal level, it helped me define what standard I would hold myself to, both professionally and personally. We learn and gain clarity from our hardships. The unknown is scary, and I was afraid of my future.

A close friend of mine, Patrick Perih, called me when he heard the news. He said, “I want you to really figure out what you want and don’t accidentally just go to another practice where you’re going to eventually have the same problems. Whatever you and David need, I’ll support you and I’ll help you in any way I can.”

Within a short period of time, I bought a practice that was less than 2 miles from where I was practicing. The former owner was a well-known dentist for more than 40 years, and the office was archaic, antiquated and in a rough section of town. The business pro forma and practice assessment told a different story, though: The office was open only three days a week, and in those three days its production was higher than what the office I’d previously been at had been doing in a six-day workweek. I rented a billboard on a well-traveled expressway with my name and new location on it. My full name is a mouthful, but unmistakable. Between that and my first social media marketing campaign, I added about 1,000 patients in my first year of ownership.

As I mentioned, though, the building and location were less than desirable. It was obvious by the third month that I wasn’t going to be able to stay there, but I wouldn’t have traded that experience for anything in my professional life. I lived the adage “If I can make it here, I can make it anywhere” every day. I learned how to repair compressors, fix busted pipes and mend leaking roofs. I also saw arrests being made in the parking lot behind me, administration of Narcan to an unfortunate individual who overdosed, and crime scene investigations in the bar next door. But for nearly a year and a half, I lived dentistry there. The office quickly went to being open six days a week and we commonly worked late.

I began interfacing with the Chamber of Commerce, real estate developers, the city of Scranton and builders, exploring all options to relocate my practice. My husband and I were at The Marketplace to support a friend who had just opened a restaurant there, and sitting next to us was John Basalyga, the owner of The Marketplace. We approached him and the rest is a matter of record. I found my ambitions, plans and love for Scranton parallel with John’s. We quickly expedited a lease contract. Henry Schein Dental, The Perih Group and my father, who is an architectural project manager, completed my build-out in record time. Our growth has been phenomenal. Previously, I averaged about 60–70 new patients per month. Since my relocation, I’ve added 150–200 new patients a month.
Let’s go a bit further back. When did you know that dentistry was your calling?

I always gravitated to the sciences and math as early as elementary school. I really wanted to be a veterinarian at one point in time, but then I realized loving animals didn’t necessarily mean I’d love taking care of their medical ailments. I knew in my senior year of high school that I was strongly interested in dentistry. I started working in a dental office during my freshman year of college and fell in love with it.

Which forms of marketing work for you? Does having such a large practice change the way you advertise yourself?

I have a diverse marketing campaign. My first marketing tactics, the billboard and sponsored Facebook ad campaign, were strategic to my efforts when I first went on my own because I had a limited budget and needed patients to know where I went; the old practice wasn’t going to tell the patients. It was weird seeing myself on the billboard, but my patients know me and they recognize me. It also adds a humanistic component to the practice; people associate with their providers more than they do a practice name or logo.

My marketing has increased, and I’ve looked for new ways to reach different populations. In addition to billboards, local magazines and social media, I’ve started with cross-promotion and brand-identity models. I’m the title sponsor for Montage Mountain’s ski race league and I’m also cross-promoting with Electric City Roasting Co., a coffee company based in the greater Scranton area. They’ll be placing my practice name and contact on their coffee cup sleeves as well as creating a private-label bean for my office.

TOP PRODUCTS

1. I absolutely love my Dentsply Sirona Cerec Omnicam and MC XL mill. We nicknamed the Omnicam “Iris” to highlight the importance of the scanner in our office. The milling process saves me from making temporary crowns and eliminates a second visit for inserting a crown. I control the process from start to finish, from drawing my margins to designing my crowns and picking the shade and material. When we mill in-house, we’re able to deliver our crowns the same day. Patients also love not having to sit with gooey impression material in their mouth.

2. I use the Ivoclar Vivadent Programat CS4 furnace primarily for speed crystallization of IPS e.max CAD crowns. Speed crystallization takes only 18 minutes after the crown is milled!

3. Designs For Vision Yeoman dental loupes, 2.5 magnification, with an LED DayLite Wireless headlight (pictured above). The wireless light is extremely lightweight and comfortable. These loupes illuminate and magnify the specific location I am working on. My margins are smoother and my anatomy is precise because I can see so much more.

4. My 411 dental chair, 411 dental stool and Inspire treatment console from A-dec. This setup allows me to treat my patients in the most ergonomic and efficient way possible. The chairs are extremely comfortable, durable and stylish. The treatment console allows for maximum productivity because everything we need is thoughtfully laid out and accessible to my assistants and me.

5. Dentsply Sirona Endodontics E3 torque-control motor. This motor has multiple settings, but my favorite is WaveOne reciprocation. It works quickly and efficiently. The motor itself is small and easy to transport from room to room.
Honestly, I’ve done really well with marketing. Even in my former location in the “bad part of town,” I was adding 60-plus new patients a month. I’ve doubled and tripled those numbers in the first four months in my new location. Of course, a lot of that has to do with appealing to more patients—those who may have refused to go to my previous locations, and those who want to be treated at a revolutionary practice.

I will always consider new marketing methods and I have no foreseeable plan to reduce any of it. It’s working—my practice is growing. I recently hired another dentist, and my brother is finishing dental school and starting in my practice this summer. The marketing works and is necessary for a robust practice. Marketing functions to penetrate patient populations where you are unknown, to unveil new techniques or additions to your office, and to couple with other ventures that give identity to your practice. People really love the support I give to the racing programs, and I love skiing. The only caveat to marketing is, you need something to market. So, if your practice is stale and stagnant, I wouldn’t waste the money. Nobody is going to be enthusiastic to hear more about the status quo.

Tell us about your decision to rebrand your practice. You already had significant name recognition in your area relative to your profession, which is hard enough to accomplish. But then you decided to move away from using just your name and instead pushed out the name of your practice. How did this help?

My intention was never to have my practice name be my name; I did that because it was necessary when I left an existing practice. My practice grew not just with patients, but also with the team. What defines my practice is my team. I’m fortunate to have a group of individuals who really want to be there and give 100% every day. Calling the practice just my name overshadows the countless contributions that they give every day. I also knew that I’d be adding more dentists, like my brother. Additionally, Dr. Daniela Campos joined the practice in January 2019. The name gives us identity. “Electric City” is the namesake of Scranton, and explicit in our brand to the commitment to the city and our patients. In essence, I changed the practice name to better encompass us and define our mission.
Every dentist would agree that communication with patients and your team is vital to keep the practice healthy and prosperous. What are some communication tips you’ve picked up?

Nearly every compliment we receive relates to how a member of our team made them feel—and, likewise, nearly every logistical problem we encounter relates to communication breakdown. Born out of communication are other elements like consistency, accountability and transparency. My best advice is to constantly and consistently communicate. We try to have morning huddles and regular meetings. This helps everyone understand the plan and tease out any concerns.

We also emphasize closed-loop communication—that is, members of our team saying back to another person their request or question. It creates an environment where what is being said and what is being interpreted are one and the same. It also ensures accountability: At some point, what was spoken needs to be addressed to ensure completion.

Patient communication is paramount. Our patients deserve it and we owe it to them. Learn their names. Understand their lives. Ask them their hobbies, concerns and pleasures. Our practice is driven by patient relationships, and we’re better for it. By extension, have appropriate conversations in front of patients. They are taking time out of their day to let us serve them. We try to limit ancillary conversations among team members that are not patient-centered.

What are your short- and long-term goals for your practice? How do you see yourself accomplishing what you need to?

My short-term goals are to anticipate the addition of my brother to the practice and have a smooth and efficient transition to autonomy; to continue to grow Dr. Campos’ patient base; and to develop new incentives for the team. We recently added matching 401(k) plans and more paid holidays, sick time and vacations. We are currently looking at getting a group medical insurance plan.

My long-term plan is to continue to grow. I have a number of dental students who shadow in my office and who’ve expressed interest in joining. As the time gets closer, we will more closely investigate if that involves expanding our existing practice or creating a second location. Fortunately, every undergraduate intern who has worked in this office received admission to dental school. Most recently, one of our students who declined medical school acceptance was admitted to dental school. I like seeing people accomplish their goals.

Also, I hope to set an example with what I’ve done. I am from an era of subprime mortgage loans. I know a lot of people are saddled with debt and are afraid of going on their own, and end up in practices that stifle their potential. I hope people who are hesitant to take that leap of faith look at me and see that it can be done—and they’ll be better for it.

You’ve invested heavily into technology. A lot of doctors are hesitant to make large purchases, but you’ve seen good ROI so far. Which pieces of your practice are you most fond of?

My favorite new piece of technology is by far my Cerec machine. Patients love the scanning process and watching us design their crowns on the screen. We nicknamed our Omnicam “Iris” to emphasize its importance in the office. We have our MC XL milling and grinding unit centrally placed in the hallway behind double glass doors, which allows patients to watch as their crowns are being made. I am excited about learning more about my Cerec machine and my CBCT. I have the Orthophos XG 3D and plan on using it to integrate with my scans and digitally place implants before actually placing them in a live patient. Same-day implants are something I’m hoping to get into soon. I am also keeping an eye on the 3D printers and how they may change the world of dentures.

As a self-admitted workaholic, you’re bound to keep taking on more and more. What do you want to learn to do clinically? Nonclinically?

I’m currently working on getting my implant practice up and going. I would like to explore and implement more laser techniques in my practice. I’d also like to learn more ways to help my team elevate to new potentials, and to better communicate and meet the changing needs of my staff and patients. Nonclinically, I want to learn how to better my business practices, and how to take breaks and step away from time to time.
What’s your favorite patient story?

In the midst of all the high-tech dental equipment out there, it’s easy to forget that ordinary dentistry can be life-changing for a patient. I will never forget what a difference I made in my patient Allison’s life by simply removing all of her decayed maxillary teeth and making a set of complete upper and lower dentures.

We worked with the lab to characterize her teeth the way they were previously in their healthy state. It turned Allison’s whole life around: She got a new job, got married, went on vacation and comes back annually for a denture check and oral cancer screening. Allison couldn’t be happier, and we couldn’t be more excited to be such an integral part of her major life events.

I’ve also had the unique situation of having patients follow me to two and three different offices. For as much as the new office is a comfortable work environment for us, I wanted it to be that much more of an enjoyable experience for the patients. These faithful patients have expressed how proud they were of me for landing where I did. The truth is, I couldn’t have done it without them.

You married your high school sweetheart! How has his support helped you in your professional life?

We started dating on Nov. 1, 2002 and he proposed on Dec 1, 2012. We got married on July 5, 2014. No breaks. No sabbaticals. It has been awesome. We have been through every phase of life together and are each other’s support system along the way. He is a physician and practicing anesthesiologist and his job requires him to plan ahead and anticipate badness, so he tends to have really sound advice and insight. He is a problem solver and commits to solutions—when I have an idea, he makes it happen. We appreciate the uniqueness of each other’s careers. Our first commitment, however, is to our relationship. We strive to invest significantly more of ourselves into our relationship than we do in our own individual and professional lives.

Give us a snapshot of your life outside of dentistry.

I am 30 years old and I live with my husband. We have an almost 3-year-old giant schnauzer named Hans, and are getting a second giant schnauzer this summer. I am a dog person: I train our dog in obedience and advanced protection work. I am an avid skier and I also enjoy running. I enjoy sleeping in, hot wings and laughing. I unapologetically believe in God and pray regularly. I believe all that I am, all that I have, and all I have accomplished are His.