OraCore AI

PRACTICE PLAYBOOK



The Front Desk Text Playbook

Ten ready to use replies for the patient texts your team answers every day, and a one week way to see if they get used.

NOVEMBER 2026 | FOR OWNERS, OFFICE MANAGERS AND FRONT DESK TEAMS

THE SHORT VERSION

Your front desk answers the same ten texts every week.

Rescheduling, insurance, parking, payment, hours. Most patient texts are the same handful of questions, and each one gets typed from scratch by whoever picks up the phone.

A shared library of approved replies fixes that. Your team answers in seconds, every patient gets the same accurate answer, and nobody guesses at policy. But a library only helps if people use it, and a large new study on AI drafted patient replies points the same way.

The finding that matters. In a JAMA Network Open study of 983,154 patient portal replies, faster replies were linked to the messages where clinicians used the AI draft. But after rollout, drafts were used on only about 5% of messages (9,757 of 185,355), and replies were 8.6% slower overall.

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THE EVIDENCE

What the study found

Columbia University Irving Medical Center studied 983,154 first replies to patient portal messages from 1,542 clinicians between 2023 and 2025, before and after Epic's AI drafting tool was switched on. The results were published in JAMA Network Open on October 30, 2026.

983,154
first replies to patient portal messages studied

29.5%
shorter turnaround on messages where the clinician used the AI draft

9,757
messages answered with a draft, out of 185,355 after the tool rolled out

8.6%
slower replies overall once the tool was available, and no real change in after hours replies

Source: JAMA Network Open, October 30, 2026. These are associations from a medical system, not a dental practice.

What that means at a dental front desk

- **Usage is the whole game.** A reply only saves time when someone sends it. Measure use, not features.
- **Approve once, then trust it.** Staff skip templates they're not sure are right. A doctor or office manager signs off on each reply one time.
- **Make it easy to find.** Save replies in the texting tool your team already uses, named the way they talk.
- **Start small.** Ten replies your team uses beat fifty nobody opens.

THE TEN REPLIES

Copy, fill in the brackets, approve.

Everything in [brackets] is yours to fill in once. Have the doctor or office manager approve the final wording before anyone sends it.

01 Rescheduling

USE IT WHEN A patient asks to move an appointment.

> Happy to help! We have openings [day, time] and [day, time]. Reply with the one that works, or call [phone] and we'll find another time.

MAKE IT YOURS Offer two real openings. Asking "when works for you?" starts a long back and forth.

02 Insurance

USE IT WHEN "Do you take my insurance?"

> We work with [plans]. Call [phone] with your card handy and we'll check your benefits before your visit.

MAKE IT YOURS Never confirm coverage by text. A real benefits check needs the card and a call.

03 Parking

USE IT WHEN A new patient asks where to park.

> Parking is [where]. Look for [entrance details]. If you can't find a spot, call [phone] and we'll help.

MAKE IT YOURS If your texting tool allows it, attach a photo of the entrance.

04 Payment options

USE IT WHEN "How can I pay?" or "Do you offer financing?"

> We take [cash, cards, HSA and FSA cards] and offer [payment plans or financing]. We'll walk you through your estimated cost before treatment starts. Questions? Call [phone].

MAKE IT YOURS Keep dollar amounts out of texts. Estimates belong in the treatment conversation.

05 Hours

USE IT WHEN "Are you open Saturday?"

> We're open [days] from [hours]. Book anytime at [link], or call [phone] during office hours.

MAKE IT YOURS Save a second version with holiday hours and swap it in each season.

06 Forms

USE IT WHEN A visit is booked and forms are due.

> Here are your new patient forms: **[link]**. They take about **[X]** minutes, and finishing them before your visit saves time at check in. Questions? Call **[phone]**.

MAKE IT YOURS Send it when the appointment is booked, not the morning of.

07 Directions

USE IT WHEN "How do I find you?"

> We're at **[address]**, **[landmark]**. Map: **[link]**. Call **[phone]** if you get turned around and we'll guide you in.

MAKE IT YOURS Name a landmark people can actually see from the road.

08 Running late

USE IT WHEN "I'm running 15 minutes behind."

> Thanks for the heads up! If you can make it by **[time]**, we can still see you. If not, reply here and we'll find you a new time.

MAKE IT YOURS Write your real late policy into [time] so every person on the team answers the same way.

09 Recall

USE IT WHEN A patient is due and hasn't booked.

> Hi from **[Office]**! You're due for your next visit. Reply with a day and time that works, or book at **[link]**. Reply STOP to opt out.

MAKE IT YOURS Send only to patients who agreed to get texts from your office, and run it against your recall list once a month.

10 Cancellations

USE IT WHEN A patient cancels by text.

> Thanks for letting us know. Your **[day]** appointment is canceled. When you're ready to rebook, reply here or call **[phone]**. **[Your cancellation policy, if you have one.]**

MAKE IT YOURS State your policy once, politely, and leave the door open to rebook.

THE LINE YOU DON'T CROSS

What always goes to a clinician

Templates are for logistics. Anything about a patient's mouth, health or treatment gets a person with clinical training, every time.

Route these to a clinician

- Pain, swelling or bleeding
- Anything after a procedure or surgery
- A broken tooth, lost filling or crown
- Medication or prescription questions
- Questions about a diagnosis or treatment plan
- Anything that sounds urgent: call the patient back right away
- Anything you're not sure about

Keep patient details out of general AI tools

Use an AI chat tool to draft the generic wording only. Never paste in names, dates of birth, phone numbers or anything about a patient's care.

The texting platform that actually sends messages to patients handles patient information, so it needs a business associate agreement with your office.

Before any template goes live

- Check it against your office policies and any state rules that apply to you.
- Confirm prices, plans and hours are current. Update the library whenever they change.
- Make sure every reply ends with a way to reach a real person.
- Set an after hours auto reply that points patients to your emergency line, and to 911 for emergencies.

MAKE IT STICK

Roll it out in one week

DAY 1	Pull the last two weeks of patient texts. List the ten questions that come up most.
DAY 2	Fill in the brackets for your office. The doctor or office manager approves every reply.
DAY 3	Save them as quick replies in your texting tool, named the way your team talks ("parking", "late").
DAYS 4 TO 7	Use them. Keep a simple tally of which replies get sent, or check your texting tool's reports.
WEEK 2	Count. Rewrite or delete anything nobody used, and add the next question your team keeps typing by hand.

Build your own with AI

List your office's most common questions (generic wording only, no patient details) and paste them into any AI chat tool with this prompt:

PROMPT

Write a short, friendly reply from a dental office front desk for each question below. Under 40 words each. Use [brackets] for details we need to fill in. Flag any question that needs a clinician instead of a template.

OraCore AI

About OraCore AI

OraCore AI builds AI for dental practices. OraCore Scribe turns appointment audio into structured clinical notes, and Ignite brings forward insights across your historical visits when you ask questions in everyday language.

OraCore AI is led by Brad Hutchison, who spent a decade running a dental group before building software for dental teams.

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Source

JAMA Network Open, October 30, 2026. Study of AI drafted replies to patient portal messages at Columbia University Irving Medical Center.
jamanetwork.com/journals/jamanetworkopen/fullarticle/2856029

The replies in this playbook are general examples for nonclinical patient messages. Review them against your office policies and applicable state rules before use. They are not clinical, legal or compliance advice.