

Executive Summary: “POC-in-a-Box” - Integrating Preventive Diagnostics Into Dental Care

HMDS x Henry Schein Collaboration

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Millions of Americans see their dentist more regularly than their primary care physician, yet routine dental visits rarely include screenings for systemic conditions like diabetes or hypertension. Henry Schein’s “Point-of-Care-in-a-Box” (POC-in-a-Box) aims to change this by equipping dental teams with a compact diagnostic solution capable of delivering key systemic health and wellness indicators chairside during a hygiene visit. While the clinical rationale for these screenings is well understood, the pathway to widespread adoption remains uncertain. Our team set out to determine how dental practices can seamlessly incorporate POC testing into the patient journey and how to drive meaningful patient demand for this new model of preventive care.

Understanding the Challenge

Although early pilots show promise, POC testing in dental settings has not yet reached mainstream adoption. Providers cite workflow disruptions, unclear patient acceptance, and reimbursement ambiguity as key barriers. At the same time, 30 million patients visit a dentist but not a PCP each year, exposing a significant missed opportunity for early disease detection. The central question became: How do we design a patient-centered experience that motivates both dental teams and patients to adopt POC testing?

Approach

Through a combination of provider surveys (354 respondents), competitive product analysis, workflow mapping, and patient-segment behavioral research, our team built an integrated strategy that moves beyond technical feasibility toward true patient adoption. We defined an end-to-end patient journey and used insights from urban, suburban, and rural populations to tailor messaging that aligns with each community’s values, motivations, and barriers.

Key Insights

Provider demand is strongest for diabetes and vital-signs screenings, which together represent more than half of the total POC testing market. Provider interest reaches 76% when operational concerns are addressed, with mid-career dentists (ages 45-54) emerging as ideal early adopters. In rural communities, where access to medical services is more limited, demand for diabetes screening is particularly high (74.8%).

On the patient side, research uncovered three distinct behavioral archetypes:

- Urban patients, who value speed, convenience, and seamless integration.
- Suburban families, who prioritize trust, credibility, and preventive health.
- Rural communities, who respond most strongly to proximity, affordability, and reliability.

These insights shaped a messaging strategy designed to resonate with each group's unique concerns.

Solution

Our final recommendation centers on three pillars:

1. Define a universal product offering: Standardize a consistent set of diagnostic tests to ensure clinical relevance, standardization, and ease of training across practices.
2. Create a streamlined, replicable workflow: We designed a patient flow that integrates into the standard hygiene appointment without adding chair time, enabling frictionless adoption by clinical teams.
3. Tailor marketing and messaging to patient segments: Urban, suburban, and rural patients receive targeted communication, digital ads, posters, mailers, or community-based materials, built around their inferred motivations and barriers.

Impact

By redefining the patient experience and aligning it with dental-practice workflows, this strategy positions dental offices as proactive entry points into whole-health care. The model expands access to early diagnostics, increases patient engagement, and provides Henry Schein with a clear roadmap to scale POC-in-a-Box nationwide. Ultimately, the project reframes dentists not only as stewards of oral health, but as essential partners in preventive medicine.