11 Track Your Oldies and They Will Become Goodies

The secret to success is to treat all customers as if your world revolves around them.
Source Unknown

It is always great to attract new patients, but do not forget the additional sources of revenue that are sitting dormant in your practice right now. Develop an efficient patient recall system, and the patients you already have whom you have not seen in a while will add new vigor to your practice. That new vitality can ultimately stimulate the bottom line.

Patients are almost always given appointment cards to remind them about their scheduled checkups. Unfortunately, many patients forget about their checkups or lose the card and "fall through the cracks" of your practice. This chapter provides several methods to fill those cracks and recapture the lost revenue.

Why have a recall system? First, it lets your existing patients know you are concerned about their health. A note, letter, or phone call not only serves as an effective reminder but also shows that you care about your patients' continued well-being. Second, when you remind patients to return for follow-up or annual examinations, you retrieve an excellent source of income that otherwise would have been lost. Finally, a recall system is a medically and legally sound practice. We all are aware of the consequences when a patient with cancer is not contacted to return for a follow-up examination. Documented recall protects against such disasters.

Using a computer is probably the easiest method of generating a list of patients who require follow-up notification (see Chapter 45, Let Technology Simplify Your Life, and the Additional Resources listed at the end of this chapter).

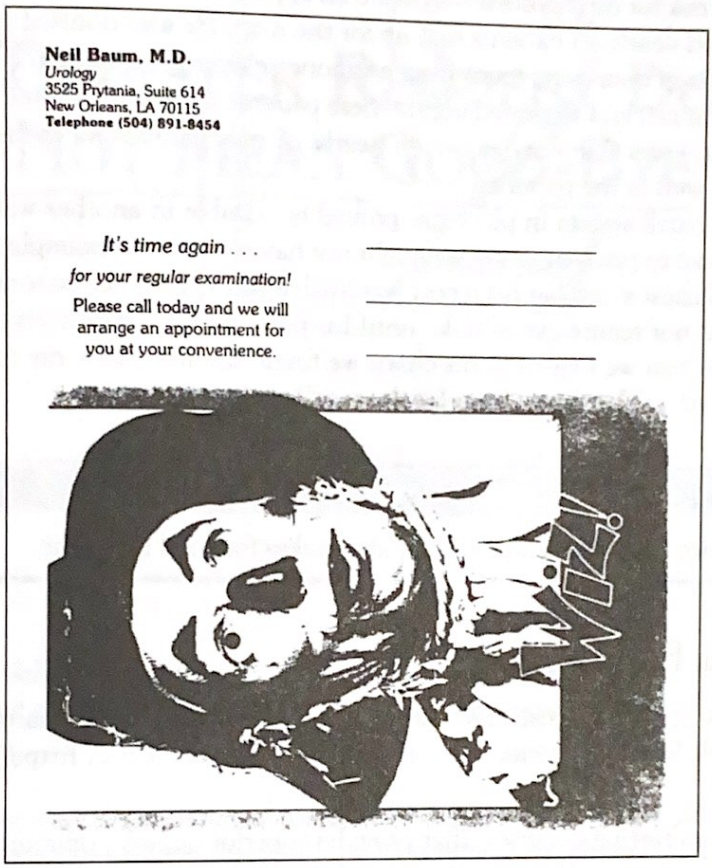
Before I had a computer, my office staff kept a list of patients who needed routine follow-up examinations. Typically, these were patients with cancer or progressive renal disease or patients on a regimen of chronic testosterone injections who required semiannual prostate examinations and PSA testing. We reviewed the list every 3 months. We checked the charts and identified the patients who needed a follow-up appointment. My staff then notified patients with a letter reminding them it was time to come in. We placed a copy of the letter in the patient's chart. If a patient did not respond to the letter, we contacted the patient by phone and documented the phone call in the chart. This "no frills" patient tracking system was functional but very time consuming for my staff. For those practices with an electronic medical records program, recalls can be accomplished with a simple click or two of the mouse. I use MeridianEMR and the program has a health-maintenance module. For patients who need appropriate follow-up for various urologic conditions, the program automatically sends the patient a reminder, and the staff receives a list of those patients and which ones have appointments and which ones need to be contacted for follow-up appointments. So if a patient has a history of hypernephroma, the program automatically notifies them to return for a chest x-ray, a complete metabolic profile, and a CT scan of the abdomen with and without contrast material on an annual basis. This is an effective method of improving the quality of care that you offer your patients.

Another technique is to ask your hospital to provide a list of your patients with certain diagnoses or treatments. Its extensive database should make this request easy to fill. For example, you can request that your hospital supply you with all of the names of your patients admitted in the past 5 years with the diagnosis of diabetes. You can check the patients' office charts to be sure that they have had a referral to an ophthalmologist within the past year or that they have had an office appointment to check their glycosylated hemoglobin level to ensure good control of their diabetes.

If your office is not fully computerized, or the computers are dedicated to other tasks, I suggest an inexpensive patient recall system that I call my "poor man's tickler file" system. Patients are asked to fill out postcards (see Exhibit 11–1) addressed to themselves. Each card is then filed in a box under the month and year the patient must return for an appointment. At the beginning of each month, the appropriate cards are mailed to remind the patients of their appointments. A list of the cards sent out is kept at the receptionist's desk, and all patients who call back for an appointment are checked off the list. Patients who do not call back are contacted by the receptionist. I have selected a unique design for our cards that fits my practice. Often dentists' cards have cartoons about teeth and cavities on them. Many other designs are available. You may want to associate your recall postcards to your specialty or to something about your personality or hobby.

We now use a computerized patient-tracking system created by American Medical Systems (see "Patient Tracker" under Additional Resources). This program allows for easy tracking of patients by date, diagnosis, medication, or any other field or topic that you select. For example, in 1999, patients who were using injections or urethral suppositories of prostaglandin for the treatment of erectile dysfunction wanted to be notified when the new oral medication, sildenafil (Viagra), was approved by the Food and Drug Administration and available in the pharmacies. We used the tracking system and identified all

Exhibit 11–1 *Reminder Postcard Sent to Patients*



those patients receiving injections or suppositories of prostaglandin and sent them a personalized computer-generated letter informing them of the new drug and the necessity of making an appointment in order to obtain a prescription. This resulted in several hundred office visits from existing patients. Not a bad return on investment for a few keystrokes on the computer.

In 2006, we implemented an office procedure for the treatment of patients with an enlarged prostate gland (BPH) using minimally invasive microwave therapy. We were able to use our computer to identify all patients with BPH who were taking medications for the condition. We then notified them that if they were having problems with the medications or the cost of the medications was an issue, we were now offering an alternative using minimally invasive therapy. In the letter, we sent them information on the microwave therapy and a DVD for them to view on the procedure. This resulted in 10 patients who called for more information, several of whom elected to have the microwave procedure.

One of my colleagues, Dr. Mario McNally, purchased a DEXA (dual x-ray absorptiometry) scanner to diagnose osteoporosis. He first used his computerized records to identify

post-menopausal women, as well as men and women who were taking steroids—both of which are at risk for osteoporosis—to make an appointment for a DEXA scan. In his first month, he had nearly 75 patients sign up for the scan. He also notified me about the risk of osteoporosis in men using luteinizing hormone-releasing hormone (or LHRH) agonists for prostate cancer, and suggested urging these patients to obtain baseline DEXA scans. In the next year, I was able to refer to him nearly 25 new patients for scans—a win-win for both of us as well as the patients!

Having a recall system in place has proved invaluable in another way. It has allowed my staff and me to catch mistakes we might not have found. For example, one patient had an abnormal chest x-ray, but his report was inadvertently filed before someone called him back. We did not realize our mistake until his postcard for a return visit came up in the tickler file. When we looked in his chart, we found the misfiled x-ray report, and called him immediately. Thank goodness for the recall system!

The Bottom Line

Tracking is not only good marketing. It also makes for good medicine.

Additional Resources

Postcards for patient recall can be ordered from Semantodonics/SmartPractice, 3400 E. McDowell Street, Phoenix, Arizona 85008; (800) 522-0800, http://www.smartpractice.com.

Sharper, a printing company that provides superior quality communication products essential to attract and keep patients and clients, can be reached by calling (800) 561-6677 or online at http://www.e-sharper.com.

Dubbo Plains is a practice reminder and patient recall system, providing software for your practice to become proactive in managing patients and alerting them to the need for a review of their medical condition(s). See http://www.dubboplainsdgp.com.au/recallandremindersystems.htm.

12 A Transfer Request Does Not Mean Good-Bye

Choose to deliver amazing service to your customers (patients). You'll stand out because they don't get it anywhere else.

Kevin Stirtz

One of the best ways to amaze your patients is to be proactive about the patient who wants to leave your practice and seek medical care elsewhere. Most physicians dislike receiving a form letter requesting that a patient's records be sent to another doctor. Even though patients have many reasons for transfer requests—some of which have nothing to do with the quality of care they have received—it is tempting to sometimes "take it personally," as a slight to you. I was no different. Those requests usually remained on my desk for weeks, waiting for me to dictate a summary and to copy the pertinent lab, operative, pathology, and x-ray reports, but not any longer. After this process happened several times, I decided to turn this negative event into a positive one by following these four steps:

1. I contact the patient myself and ask why he or she is having the records transferred. I have conducted several office surveys, but some of the best information I have obtained is from patients who intend to leave my practice. I have found them to be honest, sincere, and forthright in their responses when I call them directly. This is because I make it clear that I really want to know why they are leaving.

   I would certainly want to know if a patient was leaving because of a rude employee or because he or she considered my fees too high. I want to be apprised of any lack of attention to detail on my part or on the part of my staff. I am also interested in my patients' opinions of the hospital I work with and its services.

Not all reasons for leaving should be viewed as negatives. In many situations, patients request a transfer of records because they are moving to other areas of town or to other cities. Most commonly, patients are joining other health plans and need to have their records for their new doctors.

2. Once I have discovered the patient's reason for leaving, I send the records directly *to* the patient. I learned this technique serendipitously. I do a lot of male infertility evaluations. Sometimes I have to tell a man his situation is hopeless for fathering a child and that he needs to consider either artificial insemination using donor sperm or adoption. Before consenting to these two alternatives, most men and their wives want another opinion. I used to send the patient's records to the other urologist, and when that doctor told him the same news, the patient frequently would request yet another expert opinion. He would thus ask for his records to be sent to a third urologist. I learned I could cut my office staff's photocopying time considerably by sending the records directly to the patient.

   Sending the records directly to the patient accomplishes two goals. First, it informs the patient that I have complied with the request. The patient can now make an appointment with the new doctor, who will have access to the records. Second, if the patient seeks additional opinions, he or she has the records and does not need my staff to spend time making additional copies.

3. In addition to sending the records to the patient, I enclose a personal letter (see Exhibit 12–1). This letter, which reinforces my phone call, explains that the patient is a valued client, that my staff and I harbor no ill will, and that the patient is welcome back to my practice at any time in the future if there should be a change of mind.

Exhibit 12–1 ***Letter to Accompany Transfer of Patient's Records***

Date

Dear [Patient],

At your request, I am sending you a copy of your complete medical records. It has been a pleasure to serve your medical needs over the past months (years), and I, as well as my office staff, will miss you. I wish you continued good health, and if I or my staff may ever again be of service to you, please do not hesitate to call.

Thank you for the confidence you have placed in my medical care.

Sincerely,
Neil Baum, MD

4. Finally, I will often contact the patient by phone in a few weeks and inquire about his or her health. This phone call, when the patient has sought another opinion, serves as a check on my medical judgment. It is always reassuring when the experts agree with you. And if the experts do not agree, you need to know that too. I believe this follow-up call is critical because it demonstrates that you have concern and compassion when the patient knows there could be no ulterior motive. I think this is the image of caring that we, as physicians, want the public to have of our profession.

I have used this simple and effective strategy for several years. Taking a personal approach to an uncomfortable or potentially negative situation is helpful. I have also found that a significant number of patients have returned to my practice. I attribute this "return business" to my use of this strategy. I suggest you give it a try.

The Bottom Line

Let patients know that you do not take it personally when they request a transfer of records. Foster an attitude that you can "still be friends," and you will be amazed at how many patients will return to your practice. There's no better way to amaze them than to be polite and courteous when they ask for their records.