

Topic: Marketing.
Subtopic: Generating referrals from other medical professionals

Author: Dr. John Pammer, PA

I always send a letter of thanks with the report of any patient that is sent to us by the area MD's. We have cultivated a large base of referral docs over the years and this was done by sending out literature on what Chiropractic does and does NOT treat. We also refer our patients to these providers when the need arises, not only with ortho/neuro problems, but also with other organic problems. We encourage our patients to get colonoscopies if an indication arises; get a bone density study for our patients who are "shrinking", etc. Thus over the years we have become known as good EB CHIROPRACTORS who treat only what we can achieve results with. We have dinner, and play tennis with many MD/DO's in our referral list.

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Author: Dr. Ronald J. Farabaugh-OH

Develop a marketing packet for your office consisting of the following:

- (1) Nicely designed pocket folder with your name, logo, picture, etc. on the outside, and on the inside,
- (2) A Q and A about chiropractic in general focusing on the myths versus truths, and basic questions that most MDs, or attorneys have about our profession or case management in general,
- (3) A prescription pad with directions to your office,
- (4) Rolodex cards, both large and small,
- (4) A research paper/summary,
- (5) 12 business cards
- (6) A brief bio, including your picture, describing you and your office.
- (7) A CD or DVD containing a PowerPoint describing your office.

Hand deliver these packets over lunch to at least one MD and one attorney every week. Build relationships...one at a time. Over time you'll receive large amounts of quality referrals. Don't delay, get started on this packet today.

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End every consultation with this line: **"After I examine you and review your diagnostic studies (x-rays, MRI, whatever), if I think I can help you, I will. If I don't think I can help you, I'll tell you that as well and make a referral to someone else I think may be able to help you. Is that OK?"**

Using this line, which is not just a line, but the way I live my life in daily practice, I've become known to my patients as someone who will not accept a patient unless I believe I can help them.....and it's true. As a result, my patients trust me, and I receive a large number of referrals based upon this principle.

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Author: Dr. James Winterstein, ILL

Obtain copies of a positive article about chiropractic care from a scientific journal and send them to your local Family Practice Doctors, with a letter indicating your willingness to accept referrals.

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Author: Dr. Rob Leach

Might I suggest as a starting point the most recent RCT showing chiropractic better than placebo for herniated disc/sciatica (Spine J. 2006 Mar-Apr;6(2):131-7. Epub 2006 Feb 3)?

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=pubmed&cmd=Retrieve&dopt=AbstractPlus&list_uids=16517383&query_hl=2&itool=pubmed_docsum

Topic: Patient Care

Subtopic: Using your time wisely.

Author: Dr. Howard Levinson

My suggestion: KISS. Treat your patients with the same care and attention to their health that you would your family, insured or not. If you find that you are spending a lot of energy and time battling the chiro vendor and/or MCO, isn't that energy better spent on getting people well.

Topic: General Advice

Subtopic: General

Author: Dr. Robert Leach

So new chiropractors out there this is all I can say as you hear us old timers rant and rave, MAKE CULTURAL AUTHORITY HAPPEN on a daily basis in your towns and communities. LEARN AS MUCH AS YOU CAN about health and be careful of extreme positions like anti-immunization. LEARN FROM, QUOTE, AND APPLY TO YOUR PRACTICES new research findings. WE MAY NOT GET OUR RESEARCH SHOWING WE'RE BETTER THAN PLACEBO/NATURAL HISTORY FOR HERNIATED DISC ON THE NIGHTLY NEWS NEXT TO THE DRUG ADS, BUT WE CAN DAMN WELL MAKE SURE OUR PATIENTS HEAR ABOUT IT TODAY.

Any of you new guys that want to see some things that can be done, take a look at the main page of my website at www.drleach.com Have links to CREDIBLE websites regarding health such as USDA's www.mypyramid.gov and the www.cdc.gov website and teach patients how to get credible information. NEVER MAKE STATEMENTS OR CLAIMS YOU CANNOT SUBSTANTIATE. YOUR WORD is all you have in your community.

Topic: Patient Education

Subtopic: Pamphlets/Brochures/Videos, etc.

Author: Dr. JC Smith

I'm a strong proponent of patient education. It's inexpensive, very effective, easy to do and improves patient rapport unlike anything else. Indeed, if you're not teaching your patients, how else will they learn?

If you're not already, I suggest a PowerPoint slide show doing a Health Class or Back School. We do both: I teach a 90-minute Health Class wherein I teach how to prevent a back attack, a heart attack, and a fat attack. My CAs do a 60-minute Back School wherein they teach the ABCs of the ADLs.

I also have a Publisher template by which I have made 485 brochures to date, most of which are downloaded from the net. At every office visit, I had one out in sequence to get patients up the learning curve about chiro care, nutrition, supplements, exercise, and whatever interesting topic is currently floating around. It takes all of 2 minutes to make a brochure.

Another inexpensive yet powerful tool is a New Patient Introductory CD that explains the madness behind our methods, introduces you (and not DD or BJ or Harvey) to your new patient, and explains to them that the disc theory is dead and that most back pain stems from joint dysfunction. I also quiz my NPs on this CD: I tell them at our next meeting (the ROF) I will ask them one question: What are the 3 principles of spinal rehab? If they've already listened to my CD since it's a great recruiting tool as well, or if they're a smarty pants-type of patient, then I'll ask them a second question: How many joints are there in the spine?

Give these tips a try and don't be surprised if your patients are a lot smarter!

Topic: Community Involvement

Author: Robert A. Leach, D.C., M.S., F.I.C.C.

For those seeking ideas on how chiropractic physicians can improve their cultural authority and enhance their practices even in these times when insurance companies and other payors are making it more difficult to expand our services to those in need.

I've been involved in youth soccer here for two decades, and am passionate about promoting youth fitness. You guys may not be aware that Mississippi may well lead the world in pediatric overweight, and we currently lead the U.S. in obesity and coronary rates. So if pediatric overweight is an epidemic in the U.S., its worse in Mississippi. When young doctors get passionately involved in their community doing things they believe in, good things happen. I NEVER promote chiropractic or even bring up chiropractic on the soccer field or at the Sportsplex. I don't work with the kids because I'm trying to promote my practice, but because I passionately believe in youth fitness. When a young chiropractic physician gets involved for the right reasons, I believe good things happen. Don't think for a minute that the majority of the club's 700 plus players, their 1400 plus parents and grandparents, and others don't appreciate my efforts, and those of the countless volunteers who work with me as president of the Council. And they know I'm a chiropractor, so some of them do wind up using my professional services. However, again, you don't do these things for the wrong reasons, but when you do them for the right reasons I think people know. Anyway, to read more, read this article I submitted yesterday that appears in today's Starkville Daily News, about what we can do in Starkville to promote Physical Fitness and Youth Sport Month, http://www.starkvilledailynews.com/index.php?option=com_content&task=view&id=15361&Itemid=106 or visit our club's website to see what we're doing, www.starkvillesoccer.com <<http://www.starkvillesoccer.com>> , and find something in your community that you believe in, and help others.

Topic: Clinical Information/Public Lecture
Author: Dr. John Pammer

Measure the height of all female patients starting at age 40 and compare on a twice yearly basis. This helps to determine if the patient is osteoporotic and then you can send her for a DEXA scan. You also can counsel on the proper dietary changes necessary to manage this prevalent condition.

If the DEXA report is -1 or lower, we refer the patient to her GYN, with a letter and the scan results. This helps open the door for further referrals from the GYN, since they see patients with LBP during pregnancy.

Give presentations to the local elderly housing units. These patients love to know about arthritis, LBP, neck pain, etc. We always leave stretching exercises for them to try.

Topic: Patient Care
Author: Bradley C. Sikes, DC

Take care of the person in front of you. So often, chiropractors are overworking practice building techniques to get new patients or convince people they need to return for many visits. Instead of doing good work and letting the results and a happy patient speak for themselves, they're trying some new gymics to manipulate people. Do you like being treated like that? I hate when people do that to me, so I don't do it to other people.

I'm always amazed at how much these lifetime wellness subluxation chiropractors have to keep marketing their practice. If they were really educating their patients and converting them to their chiropractic paradigm, they wouldn't have room for new patients. What their really doing is manipulating people, wearing them out, and watching them go, to never return. Sadly, many of them will never return to any chiropractors office.

Topic: Office staff
Author: JC Smith, D.C.

The key to a great office is a great staff trained in clinical skills, management skills, and people skills. Sadly, most chiro office see a turnover rate every 9 months or less according to one study done by Cleveland CC. They're given a decent salary or benefits, nor retirements. So they soon leave looking for better jobs.

I daresay most clinicians, DC or MDs, are "cooks who don't know how to run their restaurants." As Michael Gerber wrote in his book, "The E Myth," most technical people are clueless about operating the business that does the technical work. Hence in our profession we see a bunch of practice management firms that can help in this matter.

So, my advice to any DC is to find good staff, train them well, reward them often with money and praise, and then you will slowly build a good team that makes your office work like a well-oiled dynamo.

Enjoy "Cooks & Chiropractors" @ <http://www.stopronberg.org/COOKS1.htm>
"Building a Practice from the Inside-Out" @
<http://www.stopronberg.org/Building%20a%20Practice%20from%20the%20Inside.htm>

There will be a quiz!

Topic: Community Involvement
Author: Todd Truble, D.C.

I believe in getting active in the community, especially when the chiropractor practices in a small town (6,000 or less). If the chiropractor has an excellent reputation in the community, opportunities will and should open up. For example, since there are so few medical practitioners in rural areas in America, schools, health departments, and state and federal institutions are always looking for safety presentations for their employees (no one wants to do them). Health fairs, science competitions, scoliosis screenings at elementary or middle/junior high schools, etc. are opportunities. Sitting on church boards or civic groups is another opportunity for chiropractors to be part of the mainstream. I practice primary care/specialty chiropractic, so I must know how to read a lab report to make the proper referral when needed. I must know how to read an x-ray, MRI, CT, and perform exams and orthopedic tests to treat and refer when appropriate. This has been one of the biggest secrets of practice building for me. I talk anatomy and physiology with other health care professionals.

I have a "flying seven" chiropractor who practices about 40 minutes from me. He is in the 300 a week club, does no exams, does not write down notes, moves people in and out like cattle, and rates the success of his practice by his pva (patient visit average). Each year he has tried another new "gimmick". He has built his reputation as treating a patient's insurance card (12 visits used in a few weeks) and taking people off work for extended amounts of time. He has not sat on any of the boards in the community. He is in my definition a "grabber" and just wants to make as much money off of chiropractic as he can. Companies are starting to slowly eliminate him so he constantly has to come up with another gimmick. I hope this helps.

Topic:
Author:

