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Converting New Patients

into Patients of Record

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There are two types of new patients. The first are Word-of-Mouth Patients.

The second are Media-generated **Patients**, or walk-ins, both of which are shoppers.

You must speak differently to these two types of patients. The word-of-mouth patients come to you more committed to making an appointment. The shoppers will need more persuasion.

Speaking with Word-of-Mouth Patients

Having been recommended by someone who knows and trusts you, the word-of-mouth referral is usually ready to schedule. Cost can be a factor during this conversation but many times, they have already decided to "try" you before picking up the phone. *"Great! We can see you at 10 or 2 today, which is best for you?"* may be the gist of the conversation.

The call that comes in from a marketing effort may take longer to schedule and a certain amount of skill. So many front desk office personnel shy away from using scripts for phone calls and initial patient interactions, but they can be effective. Consider karaoke. Jump on a karaoke stage and try to sing a song you've never practiced and you'll fumble and feel nervous. Go back up there after you have memorized the words and the tune, and you've made it your own, and you're rockin' it! A champion of scheduling will ensure that the tone of voice is uplifting (as in happy to hear from the caller), super empathetic, and using appropriate verbal skills.

Simple changes to word choice can mean a big difference in how the caller feels. If you don't recognize the caller as a patient, it is important to make the person feel familiar and welcome.

Consider the difference:

"When was your last visit to the office?"

Caller: "Oh, this is my first time."

VS.

"Have you been here before?"

Caller: "Uh, yeah, I've been going there for years. My kids, my parents all go there, and I have referred a hundred patients. You don't know who I am?" This is an exaggeration, but you get the point.

Speaking with Media-generated Patients

Having seen an ad or your office sign on the building, a media-generated new patient has only your ad or curb appeal to inform their decision. They can typically be skeptical, fearful, and/or have an emergency. The first question may be, *"How much do you charge for a...?"* Answering this question can have a negative emotional effect on the caller who thanks you and hangs up. Now they can call around to find the cheapest dentist. Quoting a price can also give them the perfect reason to NOT schedule anywhere!

It's normal for potential patients to investigate prices and compare, but so many team members lose confidence because quoting fees of any kind can result in a noncommittal outcome. Try asking questions. Find out why they called. "That's a great question Mr. Smith. Do you mind if I ask you a little bit about your tooth?" The caller perceives this as needed to get a price. Using the most empathic voice, ask, "Is it keeping you up at night? It is? Oh no. Is it sensitive to hot or cold? Not yet? Hmmmm. Well, I know Dr. T would be very concerned and want to see you as soon as possible. Why don't you come in for a no-charge evaluation today? We won't do anything without your permission. How soon can you be here?" These choice words, and your tone, have now turned you into the caller's trusted "advisor".

Congratulations! Your new patient has come in and the exam is complete. The financial advisor enters the room and sits in front of the patient. *"Well Mr. Smith, I'm so* glad we were able to provide you with a no-charge evaluation today. It appears Dr. T has seen some other areas that he's concerned about so we'll be taking a full set of pictures for you today. The fee is \$ and we'd like to know if you can take care of that on your way out today." If the patient says he forgot his wallet, take the PA, make your recommendation, and let the patient go, no-charge as promised. If he patient agrees, take the FMX and the rest is history!!



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