



New Patient Coordinator Enrollment Call Outline

THE BREAKDOWN

Someone clicked on your ad and entered their information for you to contact and schedule an appointment. Time to party RIGHT?

As sweet as that feeling might be, we've only just entered into the equation. **Below we will be sharing our PROVEN 6 step process to get 75-90% show rates on your inquiries!**

It can be intimidating calling the patient when all they've seen is our ad. They **KNOW** you are hoping to sell your treatments to them - they're not dumb. Study our sample script and it WILL solve the patient no show epidemic.

Since our doctors started using this script, they've seen an exponential **INCREASE** in patients showing up. We know it works - not some abstract theory we have thrown into the air.

Let's break down the sample script for you based on the points I gave in the video.

1. STEP ONE: WHY ARE THEY INQUIRING?

New Patient Care Coordinator: *Hi Mrs. Lee, this is Susan from Newport Physical Medicine.*

I'm calling because you reached out to us on our Facebook ad about scheduling a free consultation.

It sounds like you have some chronic knee pain problems.

Mrs. Lee: *Yes, I do.*

New Patient Care Coordinator: *We'd love to help you out with that! Before we schedule an appointment, I'd like to ask you a couple of questions to get an idea of what's going on.*

Mrs. Lee: *Okay that sounds good.*

We've told them who we are and reminded them that we are following up with them based on the Facebook ad THEY signed up for. We've started a dialogue with them and segued into asking the questions we need. THEY contacted YOU.

Here, you can fill in the script based on your info:

"Hi (PATIENT NAME), this is (YOUR NAME) from (OFFICE/DOCTOR). I'm calling you because you reached out to us on our Facebook ad about scheduling (OFFER FROM AD). I understand you're having issues with (PAIN COMPLAINT)."

You get the idea.

2. STEP TWO: HOW LONG HAVE THEY BEEN IN PAIN?

New Patient Care Coordinator: *Can you tell me how long you've been experiencing knee pain?*

Mrs. Lee: *Oh gosh. It's been several years now. It feels like an almost constant pain.*

New Patient Care Coordinator: *I'm so sorry you've had to deal with that kind of pain! It sounds to me like it's gotten worse then, is that correct?*

Mrs. Lee: *Definitely. It was tolerable before. Now, not so much.*

New Patient Care Coordinator: *That must be tough for you to deal with.*

Mrs. Lee: *It really is.*

Ask them their pain. Is it recent? Has it gotten worse? Those are just some basic questions so if you like to ask for more specific information (what kind of pain? Rate it? Etc.) then have at it! It's totally okay to customize the script for your needs.

The main point to get across here is to build empathy. No, you're not acting like a therapist, but it would be crazy NOT to use a therapist's techniques. Acknowledge their pain. Sympathize. They want a willing ear to listen to them because they might not have had that positive experience before.

3. STEP THREE: WHAT ACTIVITIES ARE LIMITED DUE TO PAIN?

New Patient Care Coordinator: *Would you say it has impacted your day to day life? That you're feeling limited in what you can do because of it?*

Mrs. Lee: *I'm retired now so I can limit how much I move my knees luckily, but it would be nice to not have to live with this pain. Especially since I can't go outside and garden anymore.*

New Patient Care Coordinator: *I completely understand, I have my own garden myself. You've lost out on an important hobby of yours.*

Mrs. Lee: *Exactly! I feel trapped in my pain. I need to be on my knees in the plant beds and it's just gotten too painful.*

New Patient Care Coordinator: *We had a patient come in recently that had your same problem. Luckily, we were able to get her back into the dirt in no time.*

Mrs. Lee: *What is the treatment you offer? Would it help me?*

New Patient Care Coordinator: *We have a variety of treatment options based on what we discover in your initial consult. Until you meet with Dr. Campbell, we won't know what will be best for you...but I can assure you we've helped many patients just like you!*

Mrs. Lee: *That's so great to hear!*

This is the key area to build empathy with your potential patient. As I said in the video, you want them to think about what they want out of the treatment. How motivated are they? The better reason they have, the more motivated they'll be.

Here, I've used a hobby as an example. The New Patient Care Coordinator uses this information to find a commonality with Mrs. Lee. The purpose is to build rapport with the patient, giving them more reason to find your practice TRUSTWORTHY. It doesn't need to be a commonality, of course. Merely lending a listening ear will work.

Also, NEVER give more information on the treatments over the phone. This also goes along with not telling them how much the treatments cost. You don't know what will work for them. They might just hear the word INJECTIONS and realize they've done injections before. Now they've written off your practice completely even though it might be completely different.



4. STEP FOUR: WHAT HAVE THEY TRIED IN THE PAST TO RELIEVE THE PAIN?

New Patient Care Coordinator: *I'm glad! So Mrs. Lee, could you please tell me what methods you've tried in the past to solve your knee pain? Medication, treatments, and so forth?*

Mrs. Lee: *I've had surgery in the past but that didn't help. I just take over-the-counter pain medication. I just don't want surgery again.*

Be prepared for some venting here. You know it's hard living with chronic pain. The point here is to listen to what they want out of treatments. Mrs. Lee doesn't want to go through another surgery. Maybe she wants to get completely off of medication. What can you offer Mrs. Lee for her to reach her goals? Is it even possible for you to help her?

5. STEP FIVE: EMPATHIZE AND BUILD CREDIBILITY FOR THE PRACTICE

New Patient Care Coordinator: *Thank you so much for sharing that with me. I hear stories just like yours all the time. Like I mentioned before, we had a patient come in just last week with knee pain and she couldn't garden anymore. Dr. Campbell is one of the best in the world and he was luckily able to get her in and come up with a treatment plan. She's made it back into her garden.*

Mrs. Lee: *That's so great to hear!*

New Patient Care Coordinator: *Based on everything you've told me, it sounds like you'd be a great fit to meet with Dr. Campbell. He's helped thousands of patients avoid having surgery on their knees and I'm fully confident that you'd make a great candidate for our treatment program.*

Mrs. Lee: *Can you tell me if my insurance covers this?*

New Patient Care Coordinator: *Unfortunately, I can't tell you until Dr. Campbell decides what is the best treatment plan for you, if any at all. Some treatments are offered with different insurances, you know? But, I can of course tell you once we have more information from the doctor! We'll be able to tell then if you are a good candidate.*

Another area to empathize and build credibility for the practice. They'll get more comfortable with you because you are listening.

This is where you do that 30 Second Elevator Pitch you always hear marketers parroting at you. Why is Dr. Campbell credible? Are there similar patients he helped in the past? In the script, I brought the conversation back to the garden Mrs. Lee desires. Remind her why she needs help.

Assure the patient that your doctor is qualified. Your doctor is the hottest ticket in town. La crème de la crème. I'm using creative liberties here, but make it clear that Dr. Campbell has a strong potential to help Mrs. Lee.

Reminder: NEVER talk about insurance coverage over the phone. You want and need to be ethical. You can't possibly know the correct treatment until you get her into the consult.



6. STEP SIX: BOOK THE APPOINTMENT

New Patient Care Coordinator: *And just so you know, Dr. Campbell will only take on a new patient if he's confident that he will be able to help them. We don't want to waste your time, money, or have you go through unnecessary treatments.*

Mrs. Lee: *That's so great to hear. I feel like my last doctor was just out to get my money.*

New Patient Care Coordinator: *We want to be your advocate and get you back in your garden! We'd love to get you scheduled for your free consultation. Let me put you on hold real quick to see when we have availabilities.*

Mrs. Lee: *Thank you.*

(NOTE: Put the patient on hold and find a MORNING and AFTERNOON time slot. DON'T ask them when they are available.)

New Patient Care Coordinator: *Okay, I'm back Mrs. Lee. Normally we are super busy but I found an opening this Thursday at 10:00am or next week on Wednesday at 2:00pm. Which of those will work for you?*

Mrs. Lee: *Thursday at 10:00 sounds great!*

New Patient Care Coordinator: *Fantastic! I've put you down for Thursday at 10:00am. So, after we hang up you should be receiving a confirmation email of your appointment with directions to our office and the forms you need to fill out before coming in.*

Also, ask for me when you come in for your appointment! I'd love to meet you and talk shop on plants!

Mrs. Lee: *Thank you for your help, Susan!*

New Patient Care Coordinator: *Of course! I'll see you on Thursday, Mrs. Lee.*

DO NOT ASK THE PATIENT WHEN THEY ARE AVAILABLE.

I'm serious. Say that again. Tattoo it on your body if that works. You don't want them to put off coming in to see you. First off, they could talk themselves out of the appointment when it is so far away. We're trying to avoid no shows, right?

PUT THEM ON HOLD.

You might already know what openings you have, but you want to give the illusion that you are fully booked. You are **EXCLUSIVE**. Your doctor is la crème de la crème.

Give two options for appointments that are as close to this phone call as possible. MORNING and AFTERNOON time slot. In the script, I say "which of those times works for you?" Now she's only picking from those two times. Unconsciously she may be thinking those are her only chances to get her pain taken care of.

FINALLY, tell your new prospective patient to ask for you when they arrive. In their mind, you're buddies now. This also builds upon the trust that you want to build between a patient and your practice.

Study it, memorize it, practice it, worship it. Whatever works!

I recommend practicing with someone using this as a general outline and throw some improvisations in. You want to be comfortable and confident that you can help the patient because you will be able to book more patients than ever. Use this call on Every. Single. Inquiry. And use it with a smile.

If you have any questions then you can set up a chat with your account manager who can help you out. We're on this patient voyage together.



A close-up, profile view of a woman with blonde hair wearing a black headset with a microphone. She is looking down and slightly to the left, with her hand near her ear.

THE QUICK CHEAT SHEET OF THE SCRIPT

- 1. STEP ONE: WHY ARE THEY INQUIRING?**
- 2. STEP TWO: HOW LONG HAVE THEY BEEN IN PAIN?**
- 3. STEP THREE: WHAT ACTIVITIES ARE LIMITED DUE TO PAIN?**
- 4. STEP FOUR: WHAT HAVE THEY TRIED IN THE PAST TO RELIEVE THE PAIN?**
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