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Seven Conversations You MUST Have with Every Patient

Would you rather your patients got health care advice from you, the under-qualified drug-store clerk or the local pharmacist?

By Donald M. Petersen Jr., BS, HCD(hc), FICC(h), Publisher and Sandra Pearce

How many times a day does this happen? A patient leaves their chiropractors office, never having had a conversation with their doctor about their nutritional needs. Now thinking seriously about their health, that same patient proceeds directly to the grocery store (or pharmacy or warehouse store) and purchases a bottle of vitamins. They make their choice based on pure guesswork, or perhaps even worse, they rely on the opinion of a clerk who may have no clue as to the relative value or worthlessness of the product.

In effect, the one person who could have given them the most valuable and useful information their doctor of chiropractic - has abandoned them in a time of need.

As lifetime chiropractic patients, we have almost 80 years of experience with a significant number of chiropractors. Almost all of these chiropractors had shelves stocked with vitamins, nutritional supplements, pillows, orthotics, and other sorts of therapeutic aids. Most of the time, sadly, these shelves were just gathering dust.

The chiropractic community speaks firmly and loudly about wellness. Yet when it really matters, in those one-to-one moments with patients, it has been our experience that it is the exception, not the rule, when our practitioners have given us serious consultations about the very things that promote health and wellness.

A New Boldness

It is on this basis that we would like to encourage a new kind of boldness in your communications with your patients. Your patients are searching the Internet, asking their friends and watching nonstop drug

commercials on television in an effort to manage their health. You really need to be part of the conversation.

Of course, there is the right way and the wrong way to have these conversations. This is probably where most DCs get hung up. They know what their patients need to hear; however, they just aren't sure how to say it in a manner that will be well-received.

Why Bother?

There are many reasons why you should be talking to your patients about more than just their spine. Here are some of the most important ones to consider:

- You have the knowledge they need.
- Information is flying at your patients from many sources; information that forms their health philosophy.
- Your conversations can help expand their perceived value of you from a spine doctor to a full-fledged health and wellness doctor.
- The majority of consumers are going to purchase health products whether or not you talk to them about it.

Its How You Say It

Sometimes the hardest part of a conversation is the opening line. Starting with a question usually leads to a discussion. The well-educated patient will seek out a chiropractor who asks questions, has talks with them and makes recommendations. They will have their own opinions, but will also respect yours as a health care provider because they know you will be focused on their overall wellness. The patient new to chiropractic will also be receptive. So, when you ask a question, they will answer, and the conversation can start.

Who Knows Best?

You already positively affect the lives of your patients through your chiropractic adjustments. You relieve their pain, correct spinal issues and positively influence their quality of life. But are you doing all that you can? Are you taking advantage of the opportunity they are giving you to help them enjoy a healthier life on all levels?

You know your patients lifestyles, including their diet, supplementation (or lack thereof), exercise and behaviors that affect their health, positively and negatively. So heres our question to you:

Would you rather your patients got health care advice from you, from the under-qualified clerk at the drug store, or from the phar-macist who recommends a pill for their symptoms and knows nothing about the actual causes of what ails them?

Must-Have Conversations

Here are seven must-have conversations for you to have with your patients. These are just the beginning, but will lead you and your patients into a relationship whereby you are their first resource for all health care information.

1. **Posture and Support:** This is a great place to start. How your patients stand and sit has a significant impact on their health. This is a toe-to-head issue. There is a reason why the majority of DCs offer orthotics/stabilizers/lifts to their patients. This conversation is very important and should take place on a regular basis as you observe your patients.
2. **Diet:** Most people know that they arent eating as well as they should. Many of your recommendations will not be associated with a product or service you offer. You may even point them to some of your favorite Web sites. Ultimately, you will want to discuss greens products, whole foods and supplements.
3. **Pain:** For most people, pain suggests poor health. Rather than over-the-counter medications, your patients would prefer real solutions. This is another opportunity to serve your patients more completely. Effectively addressing the source of someones chronic pain, even partially, will result in great referrals.
4. **Nutrition:** Most patients are already taking their vitamins. Finding out what they are taking, and their effectiveness and appropri-ateness, are all important. Many consumers weve talked to are still taking supplements that are no longer appropriate for their age/stage of life. This also gives you the opportunity to monitor their nutritional needs. This is something no one else is doing.
5. **Exercise:** Again, most people are not getting the exercise they need. You can easily offer a simple exercise routine for most pa-tients. You have access to home-exercise and therapy products that will cost your patients less than a gym membership and allow them to exercise at home. Some of your patients will need referral to a personal trainer. This is a golden opportunity to establish a referral relationship with trainers at your local gyms.

6. **Sleep:** The average person spends approximately 30 percent of their life in bed. Sleep posture and satisfaction are major issues for many people. Again, these conversations can lead to advice and product recommendations that can make a real difference in your patients quality of life.
7. **Health Information:** Everyone talks about how to achieve health, but many sources of this information can be very slanted and suspect. Your Web site should be a source of broad-based health information. It should also include an e-mail newsletter that you can send to your patients and that they can then forward to their family, friends and co-workers to effectively introduce you to them. Your communication on the Web will lead your patients to rely on you as a trusted source for health information.

As your conversations continue, they will be more specific to your patients stage of life and lifestyle. Some of your discussions will focus on what your patients need to hear, as opposed to what they want to hear. These conversations are much easier once you have established a trust relationship.

Keep a Chart of Your Conversations

Just as you note your other findings, keep a chart with the date of each health conversation you have with each of your patients. You can also note when the next conversation should take place. This will be especially important as your patients move into different stages of life and as they experience various health challenges. Over time, your health conversations will result in greater health and a much better quality of life for your patients.

For some examples of how to start these conversations, please see the role-playing scripts (right) we have provided.

To give you some ideas on how to set up and maintain a record of your must-have conversations, you can use a sample document that you can download and modify at www.dcpracticeinsights.com/downloads/conversationchart.doc.

Providing Quality Service and Opportunities

Many DCs are queasy about pushing products and services on their patients. Perhaps youre one of them.

However, consider this: Every time a patient walks through your clinic door, they are inviting you to talk with them about their general health and wellness. By accepting their invitation, and ethically providing them with the things that truly will improve their condition, you can ultimately help them live healthier

lives.

Role Playing to Get The Conversation Started

Lets use some role playing as examples of how to get the conversations started. Mrs. Jones comes to you with pain in her mid-thoracic area, which is her usual primary complaint. Shes in a great deal of pain, so of course you address that first. There are also a few things other than her primary complaint that you know about her. She has poor posture, she carries things that are too heavy (like multiple bags of groceries), shes overweight, she doesnt exercise on a regular basis, and she takes an over-the-counter multi-vitamin.

Conversation #1

Doctor:

Have you ever done exercises to help your posture?

Mrs. Jones:

Ive done some yoga before, but its been a long time.

Doctor:

Lets improve your posture to help your spine. Id like you to start a home exercise program between appointments.

Now you have an opening to discuss the home therapy equipment you carry.

Conversation #2

Doctor:

What type of pillow do you sleep on?

Mrs. Jones:

Im not sure, but I bought it from a department store.

Doctor:

Id like you to use something with more support that will be therapeutic.

This is your opportunity to discuss the pillows that you sell.

Conversation #3

Doctor:

What vitamins do you take?

Mrs. Jones:

I take brand X that I buy at the drug store.

Doctor:

I want you to take extra vitamin D that is more absorbable than what you can get at the store.

Now you can talk about the difference between what you offer and whats available in a retail store, as well as the difference in how they are processed.

Click [here](#) for more information about Donald M. Petersen Jr., BS, HCD(hc), FICC(h), Publisher.

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