

35 Ways for a Medical Office to Aggravate and Lose Patients

The following may sound too facetious but these are offenses committed regularly in medical offices. Hopefully your practice commits none of the following:

1. Use a voice mail system that puts patients on hold for a long period of time and/or has a long confusing selection of commands to reach the party they want or a live person. After all, they are used to this with business corporations, so, why should your office be different?
2. Make sure the thermostat is set to keep the exam rooms cold, particularly for senior citizens.
3. Don't answer incoming phone lines until 5 or 6 rings. It's probably only a new patient wanting to get their health care problem resolved.
4. Do not review the appointment book on the status of scheduled patients prior to their visits. That way when a patient comes to the check in area and announces their name; the receptionist can say to them, have you been here before? What are you here for? Which doctor are you seeing? The patient can then feel like he/she is a surprise with no preparation by the office staff.
5. The receptionist should not smile or welcome a patient when checking in. They should keep their head down; look too busy and annoyed that the patient has shown up.
6. After a patient has been in the waiting room for over 20 minutes, do not apologize or give a reason. If you do, they may think that you think their time is valuable.
7. When the nurse or medical assistant comes to the waiting area to receive a patient, shout their name loudly like a drill sergeant. Tell the patient (do not request) that they sit on the exam table. If the doctor is running late, do not tell the patient. The patient should sit on the uncomfortable exam table with a gown for at least 20 more minutes. The patient has already made it to the exam room, so waiting time there really doesn't count, right? Do not offer them to sit more comfortably in the side chair and by all means, never keep the patient advised after waiting for a long time.
8. Use cheap paper gowns that fly open instead of more comfortable cloth gowns.
9. Make sure doctors do not apologize when entering a patient room after a significant wait and do not offer a reason for the delay.
10. When the doctor completes his/her visit with the patient, make sure the patient is not given clear instructions on exiting the office. By all means do not usher the patient to the billing or appointment areas, lab or other treatment rooms. Let them find it themselves. The doctor, nurse or medical assistant are too busy and must rush off to their next patient. Always appear rushed and do not spend any time asking patients a second time if there are any questions.

11. When ordering lab tests, do not tell the patient exactly what tests and why they are being ordered. Don't give any indication or give a vague indication when the patient will get lab test results. If you do give a time, do not commit to it. When giving the results of lab tests, make sure the patient receives a report that makes no sense to them. Do not go over the lab report or explain ranges and exactly what patient should or should not be concerned about. Simply say, the lab tests were okay.
12. If a patient requires blood drawing, make sure the blood drawing chair is exposed to employees or other patient traffic. Make sure there is no privacy. The technician should tell the patient to sit down, not request it. When drawing blood, the technician should carry on a casual conversation with another employee. Again, do not advise when tests will be completed or if anyone will call them by a specific date or time. Always leave the patient guessing and apprehensive.
13. When sending out billing statements to patients, make sure the computer generated format is confusing so that the patient does not know what is to be paid or if it is still being processed by insurance for payment.
14. When referring patients to other physician offices or facilities, just give them the appointment time, phone # and name of facility. Patients don't need to know anything else about going to another strange place and people.
15. Leave patients with unanswered questions. If they have a question on billing; be vague and do not answer completely. If you are not sure of an answer, certainly do not offer to get the right answer from another staff member. "I don't know" will suffice.
16. If a patient is angry, simply say, "I'm sorry" and roll your eyes. Do not offer any further assistance or report the problem to others to get a solution. Downplay the seriousness of their complaint.
17. Don't tell a patient his/her diagnosis. Let them guess what was written on the encounter form that had some kind of strange abbreviations and codes.
18. Don't use layman terms. Assume that a patient would rather be told they have sinus braycardia rather than slow heart rate, cerebral hemorrhage instead of stroke, or otorrhea rather than ear discharge.
19. When giving patients several instructions for their care, do not provide this in writing. Let them try to remember it all, particularly for senior citizens. This also applies to the medical assistant that takes the blood pressure. Don't advise what the reading is; just say "It's okay" or say nothing at all.
20. Make sure you "talk down" to patients. After all, the doctor and office staff are the educated professionals, not the patient. Make the patient feel that he/she is solely dependant upon the doctor and staff and that he/she is lucky that you are providing precious time and extreme knowledge.

21. Make sure the patient is totally confused about their insurance coverage. Offer no help or resource. Give the patient the look of, "It's not my problem."
22. Leave food and drinks visible in clinical and patient flow areas, so that it leaves the impression that there is one continuous party going on.
23. Never completely listen to patients. Always look as if you are bored or not interested in what they are saying. Dodge questions that are difficult to answer. Look like you are annoyed when a patient keeps asking questions. By all means, don't look like you are generally concerned about the patient's problem.
24. Make sure there are opportunities in the office for patients to overhear employees laughing, talking about other persons or expressing general complaints. Make sure telephone conversations with patients by the receptionist can be overheard easily by patients in the waiting area. Clinical staff should let patients hear them talking about patients, grumbling about losing a patient chart or complaining about being so busy.
25. Keep a sliding glass window closed off between the receptionist and waiting area and don't open the window right away when patient approaches.
26. When a patient calls for an appointment, tell them you are "all booked up" or "you might be able to squeeze them in". That keeps the patient ever so humble that you might help them with their health care problem but don't bet on it.
27. Don't return calls to patients the same day. One or two days later is fine. If you feel it is probably not important, don't return the call at all.
28. Keep your waiting room stocked with real old magazines. Do no straighten them up during the day; leave them scattered all over.
29. When a patient is in the exam room with the doctor, encourage office employees to barge in for any reason. Also, providers should go in and out of the exam room several to get a supply item, check records, take a phone call, chat with a nurse, look at an x-ray, find a medical assistant, or speak with a drug rep.
30. Make sure drug reps and suppliers are roaming the halls during peak patient flow and make sure employees give them attention. Patients like to see this.
31. When a patient calls for an appointment, do not try to accommodate his/her needs by offering alternative times and dates. Just tell them when you are booking them.
32. When a patient requests copies of medical records for himself/herself or to transfer to other parties, tell the patient his/her chart cannot be found right away and it may take considerable time before their request can be completed. Keep this a low priority for the office staff even though it is a high priority to the patient. When patients request a 2nd and 3rd time, tell them you will look into it.

33. Allow office staff to wear whatever they want. Avoid any dress codes such as smocks, uniforms or name tags that would project professionalism. Super casual is “in” and employee comfort is more important than appealing to patients.
34. Play “rock and roll” or “wild country” music in the waiting room. Make sure the music selection is what employees want, not what might be soothing to waiting patients.
35. Display several, not just a few, signs and notices around the check - in area that tell patients all your rules and requirement for getting paid. Rather than explaining your policies in a written handout or brochure or verbally by the receptionist, patients need to get blasted right away about how they are going to pay for your services.

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Marketing Handbook for the Physician Practice](#)