PREFERRED HOURS - EXTENDED CONSULTATION HOURS

PREFERRED HOURS: These are designated hours each day, during which the doctor only treats patients. No examinations, consultations or Reports of Findings are done during this time. This is when the doctor on an expedient basis handles high volume traffic. It contributes to a “no-wait clinic”, as well as getting the most done in the least amount of time, allowing more patients to be helped on a more efficient basis. (See chart below for example)

EXTENDED CONSULTATION HOURS: Designated hours each day, during which the Doctor is available for Consultations, Examinations, New Patients, Report of Findings (all of the days), etc.

Example:

<table>
<thead>
<tr>
<th>Time</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-10:00</td>
<td>Preferred Hours</td>
<td>Closed</td>
<td>Preferred Hours</td>
<td>Closed</td>
<td>Preferred Hours</td>
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<tr>
<td>10:00-12:00</td>
<td>Extended</td>
<td>Closed</td>
<td>Extended</td>
<td>Closed</td>
<td>Extended</td>
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<tr>
<td></td>
<td>Consultations</td>
<td></td>
<td>Consultations</td>
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<td>Consultations</td>
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<tr>
<td>12:00-1:00</td>
<td>Preferred Hours</td>
<td>Closed</td>
<td>Preferred Hours</td>
<td>Closed</td>
<td>Preferred Hours</td>
</tr>
<tr>
<td>1:00-2:30</td>
<td>Lunch</td>
<td>Closed</td>
<td>Lunch</td>
<td>Closed</td>
<td>Lunch</td>
</tr>
<tr>
<td>2:30-4:30</td>
<td>Extended</td>
<td>Extended</td>
<td>Extended</td>
<td>Closed</td>
<td>Extended</td>
</tr>
<tr>
<td></td>
<td>Consultations</td>
<td>Consultations</td>
<td>Consultations</td>
<td></td>
<td>Consultations</td>
</tr>
<tr>
<td>4:30-6:30</td>
<td>Preferred Hours</td>
<td>Preferred Hours</td>
<td>Preferred Hours</td>
<td>Closed</td>
<td>Preferred Hours</td>
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<tr>
<td>6:00</td>
<td>Closed</td>
<td>In-Office</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
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<tr>
<td></td>
<td>Workshop</td>
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</tbody>
</table>
The idea of the Preferred and Extended Hours is to make the office run smoother, faster and easier with little or no waiting. If the doctor is just treating without having to do anything else the clinic will roll like clockwork. This is equally true with the extended hours. You will find that most of your trouble with staying on the schedule comes when you mix these two.

For example: Most clinics will do most of their adjusting during the late afternoon preferred hours between 4:30-6:00pm. If that is all that is being done then the clinic will roll along doing adjustments every three minutes or less. It’s the most fun and exciting time of the day. However, a potential new patient calls and he says he can only come in at 5:15. If you didn’t want to lose him and put him in at that time, you would have just put an hour visit into a time slot of five to fifteen minutes. There is no way that the doctor will be able to do a good job in that amount of time. It can’t be done. While this is being attempted all the regular patients are now getting way behind schedule waiting, typically you will run twenty to thirty minutes behind with all the upsets you would expect.

The most common reaction is “But, I’ll lose patients if I can’t see them at any time.” You are losing them already. In the example above the new patient who you don’t have the time to really see doesn’t stay anyway. The regular patients who have to keep waiting for so long will drop out of care once they are out of pain.

Realistically, you don’t have the time to do a good job on extended visits when most patients are coming in for adjusting and you can’t stay on schedule if you are mixing adjustments with anything else. By establishing this sort of schedule you are simply making sure that you can do what’s best for all your patients. The regular patients will get in and out without having to wait. The patient in the extended visit will have the Doctor’s undivided attention.

The key thing that makes this work is the front desk. A Front Desk CA must be firm with this schedule and not allow exceptions.
Sample Scripts:

Front Desk (FD): I can schedule you for 3:00.

New Patient (NP): I can only come in after work at 5:15.

FD: I understand entirely, but that is the time when the doctor is seeing most of his patients and won’t have the time you need. Once you are through your initial visits by all means we can schedule you more at your convenience.

NP: But I can’t leave work early.

FD: I find that most employers will allow you time to see a doctor. Have you talked to him or her about it yet?

NP: Well, no.

FD: I’m sure if you explain what’s going on with you and how it’s affecting your ability to do your job it won’t be a problem. Let’s go ahead and schedule you for 3:00 and if that turns out not to work give me a call and we’ll reschedule it.

NP: Ok, let’s do it.

Note: We are closed when we are closed. Do not ever schedule a visit, New Patient or otherwise, after our normal hours except when the Doctor has opened up an additional extended hours time slot in advance. This will only happen after a promotional event such as a lecture and you will be notified in writing in advance that these times are to be available for any new patients from that event.

For the regular patient who wants to come in during extended hours:

Pt: But it would really be convenient for me to drop by at 11:00.

FD: I understand, but the Doctor has set aside times of the day that are only for adjusting so you can get in and out without having to wait while he’s in with a new patient.

Pt: In and out?

FD: Yep.
Pt: That would be nice. Okay let’s make it for noon.

For the regular patient who walks in unscheduled.

FD: I’m glad you are here. If you had come in at your scheduled time I would be able to get you right in but as it is I’m sure I can squeeze you in soon. Please, have a seat.

Pt: Will it be long?

FD: I’m sure it won’t be. Someone is bound to be late so I can fit you into his or her slot.

Or:

I have an opening in 10 minutes.

Always make them wait a bit, at least 15 minutes or more. If you reward them with immediate care whenever they walk in you will never get them on a schedule. If a patient comes in after them but is on time for their appointment then have the scheduled patient go ahead of the patient who is not on schedule. If the waiting patient asks about it be honest.

FD: Yes I know you were here first, but she was scheduled to be seen now and it wouldn’t be fair to have her wait when she is on time. Wouldn’t you think?

When the unscheduled is done with their visit be realistic when you reschedule them.

FD: Now Mrs. Cruthers, you normally schedule for the afternoon adjusting period. Do you want to stay with that or switch to an early morning or mid day appointment?