

# **Say it Like You Mean it!**

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## **Say It Like You Mean It!**

There are countless books written and seminars given on the art of presentation to patients and customers. The common message amongst the different venues is the conviction of the presentation and the application of “strategic words.” Physicians often have a disconnect as to understanding how the patients perceive our message and evaluate each and every word we say. With this in mind, it is critical to develop presentation skills with “strategic words” that drives our point home in the patient’s eyes and leads them down the road we wish.

Often, practitioners are vague when communicating with their patients. These situations lead patients to provide vague responses, which subsequently lead to the patient’s failure to accept the treatment plan. The practitioner needs to have clarity in relating the beneficial nature of a particular treatment to their patient. For example, if a patient asks if a nail avulsion is necessary, the practitioner’s response should make the patient understand that the treatment will help resolve the infection, reduce pain, and decrease the chance of complications. Using concepts to which the patient can relate to increases their acceptance of proposed treatments and strategies.

I have found that practitioners who have the most successful practices reflect a high degree of confidence with their patients. Patients, by nature, are scared and apprehensive when coming to our offices. Most have tried, without resolve, multiple over the counter solutions now widely available in local store and direct mail magazines. They perceive our offices as the next step up the treatment ladder and look for us to take control with confidence and “get them better!” Accordingly, patients expect us to provide treatment in the quickest, least painful, and most cost-effective manner possible.

The underlying message is that by using certain words, we can direct the patient’s thinking down the road of the treatment plan we advise. The impact of these single words are powerful and paint a clear picture in the patient’s mind of what is most important in achieving their goal of relief. Use of these words relate confidence, which puts the patient at ease and gives hope of resolution of their chief complaint.

We begin our presentation to patients with this type of statement to ensure that they feel comprehensive care will be provided: “At today’s visit, I want to be sure you know what you have, why you have it, and what the options are for treatment, as well as understanding your decided treatment plan.”

Following is a list of words that should and shouldn’t be used during your presentation to patients. The “should” list will result in improved acceptance of your treatment plan and services. The “should not” list will make patients feel, in a sense, that you are unsure of what you want for them. When used, these “should not” words portray a lack of confidence and control of a patient’s treatment which they are hoping for. Patients come to our office because we are professionals, and they expect professional treatment.

### **Things You Should Say to Patients:**

- “important”
- “critical”
- “very important”
- “necessary”
- “significant”
- “vital”
- “essential”
- “you need”

## Things You Should Avoid Saying to Patients:

- “we can’t”
- “maybe”
- “probably”
- “possibly”
- “perhaps”,
- “most likely”
- “likely”

Here is a clear example one from the "should list"...critical. With a presentation such as this, my colleagues and I have found a considerable increase in production of orthotic devices in our office. This same presentation is extrapolated to all other conditions requiring orthotic devices. The key is that patients clearly and distinctly understand that an orthotic device is the critical factor to not only immediate relief, but will also help in preventing future problems of pain or disability.

“Miss Jones, the pain in your heel is not for the spur. The pain comes from a pulling of the band of tissue called the plantar fascia from too much motion in your foot. It is like tying a string to your nose and pulling it. Your nose is not the problem, it is instead the pulling of that string that is causing the pain (I keep a rubber band in my pocket and pull it out OR use the finger of a rubber glove to indicate the stretching of the plantar fascia).

Our goal for your treatment is to address both the symptom and cause. The symptom is the pain that you are experiencing and the cause of the problem, which must also be addressed, is too much motion in your foot and the resultant pulling of that band connecting to your heel. So, today we will work on reducing the symptoms, such as the painful inflammation. The critical part of the treatment will then be the use of a custom-made arch support called an orthotic device to address the cause of the problem for long term treatment. This can simply be worn in almost all types of closed shoes. It will help to stop the pulling of that band on your heel, and help to stop the pain.

I am not here getting rid of your pain, but a hero in keeping the pain from returning, which can easily happen without the use of a custom molded orthotic device for your shoes. Our goal is to relieve your pain, keep it from returning, and especially preventing any surgery. Again, the most important part of this treatment for you is having the custom-fitted orthotic devices made."

An important point is to reinforce at the end of your discussion is defining what the “most important” or “vital” parts of the treatment the patient will need to have done at the next visit to obtain the most effective long term outcome. They need to understand that without this recommended “next treatment”, the end result can be significantly less than hoped for.

To understand from a patient's point of view, think of how you feel when a problem arises, for example, a car not working right and being brought to a repair shop. The last thing you want to hear is, “Well, your car may run again if I put a new Gizmo in.”, but instead love to hear, “You need a new Gizmo so we can get you back on the road. This is very important to have installed, not just to get the car running, but keep from having to come back to the repair shop."

Starting tomorrow, challenge yourself to start using more “should” words and stop with “shouldn’t” ones. You’ll find a more satisfied patient, better treatment outcomes, and an improved bottom line!

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