

THOROUGH PATIENT EVALUATIONS

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Do Our Doctors Have ESP?

- Just in case the answer is NO, we must find ways to prepare them for each patient in the most proficient way possible.

Reason For Visit

- For many patients, similar conditions present with similar (or identical) symptoms and can be evaluated accordingly.
- Other times, a more creative approach must be taken to obtain the information we need without wasting the doctor's time.

The Intake Form

On every practice's intake form, there is a section marked:

Reason for today's visit

OR

What brings you in today?



It Takes all Kinds

- The answer to this question can be a small novel or my favorite.
- “Reason for today’s visit: MY FEET”



It is Our Responsibility

- To find out the true reason for the visit
- The most pressing issue(s) if there are multiple
- The history of the problem
- The previous methods of treatment
- The severity of the problem
- To weed out all of the completely unrelated “stuff” that patients tell us

Thorough, Efficient Evaluations

- The best way to find out the facts, quickly and thoroughly, is to know what to ask, how to phrase it, and ways to redirect patients who may be easily distracted or begin talking about unrelated matters.

The Better Information we Take...

- The faster the doctor can diagnose the problem, form a treatment plan, and help the patient feel better.
- If the doctor has to spend time extracting the needed information from each patient, the entire flow of the office is disrupted.
- If assistants do not ask the proper questions, doctors become frustrated and patients feel as if they are repeating themselves.

Most of the Time

- It is NOT the fault of the assistant for this lack of communication.
- It is usually the fault of the doctor, manager, or trainer, who did not spend the time explaining why certain details are so important and how much easier it is to treat patients effectively if all the facts are clearly documented.

Example:

- Follow up heel pain (2 weeks after cortisone injection)
 - Assistant documents, “Patient presents two weeks after having a cortisone injection in his left heel. He states that he followed the stretching and icing instructions but does not feel any better.”

Doctor Enters the Treatment Room

Doctor questions the patient about his lack of improvement. He asks and the patient replies:

Did you feel any relief after the injection?

Sure, for the first 5 days, but then the pain came back.

Are you continuing to ice and stretch daily?

No, I stopped after the first two days, was I supposed to continue?

A BIG Difference

- After asking these two questions, the doctor was able to change the subjective portion of the chart note to read:
 - “Patient presents two weeks after receiving a cortisone injection in his left heel. He states that he did feel relief for 5 days and then the pain returned. He also states that he followed the stretching and icing instructions for 2 days and then stopped.”

The Doctor was Upset

- However, this was not the fault of the assistant.
 - She was new to the practice and only instructed to read the plan of the last chart note and ask “Are you feeling better since the injection?” and, “Did you follow the stretching and icing instructions?”
 - The doctor never explained how a more thorough evaluation would help him to further develop his treatment plan.

Let's try Some and See. . .



Reason For Visit:

- “My heels are killing me and I can’t stand it any more!”

Possible Questions:

- Where is the pain? (point)
- How long have you had it, and is it getting worse?
- What have you tried to get relief?
- Have you had this before?
- Was there an injury that you can recall?
- Do you have bad pain in the morning?
- Do you wear any type of shoe insert?

Reason for Visit:

- “The back of my foot is painful when I wear shoes.”

Possible Questions:

- Where is the pain? (point)
- How long have you had the pain?
- Is it getting worse?
- Does it hurt when you are barefoot?
- Can you recall an injury?
- What type of exercise/activities do you do?
- Do you wear any type of shoe insert?

Reason for Visit

- “I feel like my sock is bunched under my toes, but it’s not. I also feel a clicking between my 2nd and 3rd toes – it’s becoming annoying.”

Possible Questions:

- How long ago did this condition begin?
- Have you ever felt anything like this before?
- Do you wear high heels often?
- Do you have any tingling or numbness in your toes?
- What types of physical activities do you do?
- Do you wear any type of insert?
- What have you tried to relieve the problem?

Reason for Visit

- “I hurt my ankle last week playing basketball, and it is still swollen and painful.”

Possible Questions:

- How did you injure the ankle – did it twist, buckle, etc.?
- Did you ice after the injury?
- Did you try any type of ankle brace or support?
- Do you have a history of ankle sprains?
- Did you have any bruising after the injury?
- Do you wear any type of shoe insert?

Reason for Visit

- “I have a bump on the side of my big toe, and I’m having a hard time finding cute shoes that fit me.”

Possible Questions

- How long has it been a problem?
- Does anyone else in your family have this issue?
- Do you have pain on a regular basis?
- Do you wear any type of shoe insert?

Reason for Visit

- “I am here to discuss bunion surgery with the doctor. I have suffered with pain for years and was referred by a friend who was very pleased with the doctor and the outcome of her surgery.”

Possible Questions

- Have you tried conservative methods of treatment in the past (custom orthotics, gels, pads, wider shoes)?
- Do you have a time frame for surgery?
- Do you have recent x-rays of the foot/feet?
- Will you be needing disability paperwork completed?

Reason for follow up visit

- Heel pain - 2 weeks after first cortisone injection (this should be an easy one)

Possible Questions

- How are you feeling since the injection?
- Did you have relief for a few days, a week, longer?
- Do you continue to ice and stretch on a daily basis as it recommends in your instruction sheet?
- Have you discussed custom orthotics with the doctor?
- Are you going to be casted today for custom orthotics?

Reason for follow up

- Neuroma – 2 weeks after injection

Possible Questions

- Has your condition improved, worsened, or remained unchanged since your last visit?
- Have you been wearing the type of shoe recommended by the doctor?
- Are you considering having custom orthotics made?
- Have you been resting and icing the area?

Reason for Follow up

- Ingrown toenail – 2 weeks after procedure

Possible Questions

- How is the toe feeling since your procedure?
- Are you still having any redness, drainage or tenderness around the nail?
- Have you followed the post op care instructions (soaking, using the recommended wound care product, etc.)?

Reason for Follow up

- Orthotics were dispensed 2 weeks ago

Possible Questions

- How are you adjusting to your new orthotics?
- Did you follow the instructions and break them in slowly to avoid discomfort and fatigue?
- Are you able to wear your orthotics in all of your shoes?
- Have you considered a second pair (maybe down the line) to keep in your dress shoes/athletic shoes so that you always have a pair available?

MY FAVORITE

- Reason for visit – “Feet”

Possible Questions

- Could you be more specific about the problem you are having with your feet?
- How long have you had this problem?
- Have you experienced symptoms like this before?
- Does anyone in your family have a similar issue?

No Matter what the Reason

- Work closely with your doctor or doctors and keep lines of communication open when it comes to meeting their expectations.
- Just like we don't expect our doctors to have ESP, they can't expect us to read their minds!

Impress Your Doctors with...

- Your knowledge
- Your attention to detail
- Your eagerness to learn more
- Your interest in improving patient care
- Your desire to increase office efficiency
- Your willingness to work as a true member of the team



And as Time Goes By . . .

- You will become an even more valuable asset to your doctors and your practice



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