



THE MD MEETING
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The Evidence Based
CHIROPRACTOR

THE MD MEETING BY JEFFREY LANGMAID, DC

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THE MD MEETING

Relationships are at the heart of referrals. Personally meeting the physicians within your circle of practice is the best way to build rapport and is the foundation of your relationship building.

For some of us this may seem like a daunting task. However, with this guide I have laid out the steps in a systematic manner which even the most introverted of chiropractors will be able to use for their success.

While this guide generally refers to meeting with primary care physicians, it is applicable to all specialities with only slight modifications.

Let's get started!



Meeting with your local physicians is the easiest way to maximize the effectiveness of your outreach.

THE MEETING

Lunch meetings are the easiest way to build rapport with other health care practitioners in your community. The “competition” you have for meeting the doctor at lunch is usually a pharmaceutical representative. Many offices are booked weeks or months in advance for lunches. Sometimes, you may be fast tracked to meet the doctor because you are not a ‘rep’ but another physician. Either way, it’s important to get started!

Meeting your locals MD’s is a great way to accelerate your relationship for many reasons. Just like your relationships outside of chiropractic; trust, rapport, and communication are most easily managed in person. Providing lunch for the doctor or staff is not mandatory, however, you

will want to make that decision before calling the offices so there is no confusion. If you have the budget to provide lunch, it is a nice gesture and creates a fantastic first impression. If providing lunch is outside of your budget, the meeting is still extremely valuable. I have found that when I provide lunch, I usually meet most of the staff in addition to the physician. When I have not provided lunch, I have generally just met with the physician. There are advantages and disadvantages to both. It is best to make the decision based on your budget and then move forward from there.



If you decide to provide lunch-

When providing lunch I have found that local, healthy wrap's, sandwiches, and salads are winners. You should be able to find a local restaurant which will be able to provide a wrap (individual or platter), salad bowl, and individual beverages for roughly \$5.00 per person. You may also be able to work out a volume discount if you arrange to do quite a few lunches over the course of a few weeks or months. I was able to negotiate a 10% discount with my local shop.

I tend to avoid using restaurants that require the food to be kept hot or necessitate an elaborate set up. On occasion, I have had lunches start later than expected due to a last minute add-on to the doctor's schedule. In these cases, it's nice to provide wraps because they won't get cold or messy. Using a healthy product is also nice because it subtly emphasizes the "holistic" component of your practice.

As a note- you should check with the office to inquire about any food allergies or preferences.

Providing lunch at smaller offices is affordable and also can give you more one-on-one time with the physician and staff.

A highly targeted list of physicians is the most crucial aspect to your outreach and marketing.

Setting Up The Meeting

Setting up who you are going to meet with should be relatively straight forward. If you are a member of [The Evidence Based Chiropractor](#) then you should be working with a list of roughly 50 physicians in your area who are receiving your monthly MD Research Briefs. This list is a great starting point. If you have already received referrals from an MD in your area then I would move those MD's to the top of your list. Then, I recommend that you sort the remaining offices by size, location, and practice type. Often, smaller offices are easier to get into and have less restriction regarding referrals. Also, offices which are physically closer to your practice will be more appealing than those at the edge of your circle of practice.

Below, you will find my script for calling your local MD offices. Feel free to alter the script to fit your practice. It should feel natural and comfortable. This is a great activity to delegate to a member of your staff. In the members vault at [The Evidence Based Chiropractor](#) you will find a tracking sheet for your lunch activities.

Sample Script- "Hello, my name is Jeff Smith and I am calling on behalf of Dr. Jones at ABC Spine Clinic. He has co-managed quite a few patients with your doctor but has not had the opportunity to formally introduce himself. He would like to book a lunch at your office. May I speak to your office manager to book a lunch?"

Also, provide the person making these calls with a "cheat sheet". This should include all of your pertinent practice information. Some of these items include- address/location, phone number, fax number, email, website.

Get Prepared

I like to call each office personally about 3 days before the meeting. I have two scripts; one if I am bringing lunch and the other if I am just meeting the physician.

During this call you are simply confirming the date and time, finalizing the number of attendees, and confirming any dietary restrictions.

Also this is a good time to call your local catering/wrap shop and place your order. They are going to ask for the time, location, and number of people. If you are not bringing lunch it may be a good idea to bring a few branded items or even a box of coffee or bowl of fruit for the office staff. Extending goodwill and leaving something with

your name further deepens the impact of your visit. And you never know; while the MD may be slow to refer, the office assistant may be looking for a chiropractor!

What to Bring

Preparing your content for the meeting is extremely important. A few careful selected items will go a long way. Also, when prepping your con-

tent, you can make a dozen or two completed “packages” and they will be ready to go when you need them in the coming months.

Start with a branded folder with your practice name, address, etc. Inside I recommend having an introduction letter, a current research brief, your practice information sheet, business cards, a referral pad, and any other promotional items.

All [members](#) have access to a MD Introduction Letter. This letter establish's a framework for some of the key points which you will convey dur-

Being prepared for your meeting and using a Socratic approach with the physician will give you a wealth of information and help you pinpoint the specific direction of your presentation.



ing your meeting. These key points are discussed in detail in the next section of this guide.

Your latest monthly MD Research Brief should also be included. This gives a nice “preview” of the content they will receive each month and sets the precedent that you are looking to build a long term relationships based on the highest quality peer reviewed research.

Business cards, referral pads, and any other promotional items are also placed in the folder. One goal is to make the referral process as easy as possible. Some offices will be very interested in using your referral pads (it also keeps present time consciousness when left in their office), while others will either use their own or none at all. The doctor should be aware that you have provided referral pads, but you will accept referrals through any means which makes their process easiest.

I also prepare a separate folder containing a long form research article pertaining to each spinal region. One on headache, neck pain, back pain, sciatica, ESI vs. Manipulation, NSAID and manipulation, etc. These will be essential as you use the Socratic method to determine the needs of the physician, and how your office can address those needs.

During the Meeting

Alright, you have set up the meeting, prepared your bag and are now ready to go.

Upon arriving you should introduce yourself at the front desk and try to meet as many of the front office staff as possible. Often, they are scheduling, taking phone calls, and quite possibly making the referrals. You don't need to go overboard, however, making some small talk, offering a smile and handshake can go a long way. Front desk staff tend

to be overlooked, so taking a few minutes to introduce yourself can really set a great impression.

Top priority with your meeting is to establish some rapport, and generally get the physician to have a favorable impression of you (i.e. - they should “like” you). We tend to refer to our “friends” and people whom we have had favorable results with in the past.

More than likely this doctor does not know if patients receive good results in your office, so the starting point is to make a favorable impression.

The easiest way to do this is to ask them about their practice. Find out how long they have been in practice, if they reside in the area, etc. This is a great way to build rapport and it also transitions nicely into getting the information you need for your presentation. Next, casually inquire about whether or not they see many patients with spine complaints in their practice. Briefly, inquire about their current treatment protocols for spine conditions. These questions are extremely important! Once the doctor says they see a good amount of patients with spine conditions and he/she explains their treatment protocol, it is the perfect transition point into your presentation. With the answers to these questions it is easy to identify the areas where you can be of service and improve their workflow and patient satisfaction.

This should be a short and sweet conversation depending upon the amount of time you have with the doctor. You do NOT want to overwhelm them with chiropractic treatment protocols. Many of these physicians are not very familiar with chiropractic; so start slowly! However, if they inquire about treatment protocols and technique then by all means dive right in.



The next item I like to address are the “Big 3” hurdles to referrals, which are also addressed in your MD Letters. It is essential that you let the physician know the following items-

- Patients do not receive long term treatment plans, but rather a short trial course of care to determine their response to treatment.
- Case notes are faxed over upon evaluation of the patient ([The Evidence Based Chiropractor](#) provides templates for our members)
- You are not a primary care office and believe that co-management and interdisciplinary communication is essential to optimal patient outcomes.

These are the 3 big hurdles that many MD’s have regarding patient referrals. It is best to address them up front. Additionally, you want to make sure the physician is aware that you do everything possible to make referrals easy and quick. Depending upon your volume and office structure you can promote that referred patients are seen the same day, within 24 hours, or within 48 hours. Also, that your office accepts most insurance plans (if applicable).

At this point you have covered most of the imperative topics. If the physician has additional interest in safety and efficacy with certain conditions you can discuss these topics and pull the research from your previously prepared folder.

The focus of meeting with physicians is not to “solicit” patients, but to provide the information necessary for the physician to make the most appropriate referrals for conservative care.

The bottom line is that our biggest “competition” for these referrals is physical therapy and NSAID’s. In reality, we have no competition because our service is unique, effective, and safe. Building the referral relationship is based on exposing these MD’s to the unique aspects of chiropractic care and helping them understand the service we offer. Statistically, the traditional protocols of spine care are woefully inadequate, yet, as we know, it’s very difficult to change a habit! This is no different for referrals; and why consistent, positive, educational, and motivational outreach is the key to building this relationship.

Finishing up, it’s always important to let that doctor know that as a trusted referral partner, he can expect to receive a monthly MD Research Brief from you highlighting an important study in musculoskeletal care.

Following Up

Immediately upon leaving the office you should open your tracking sheet and input the names of the staff, document your general feelings regarding the meeting, and transcribe any other notes you may have regarding your visit. It’s important to do this RIGHT after you leave the office because most of the information will be forgotten in the next 30-45 minutes unless you write it down. Our [FREE](#) tracking sheets can provide you a blueprint for further communication.

I recommend following up with our MD Follow Up Letter within the next week. This letter reinforces your visit and continues to set the stage for further communication.

Remember, habits (referral or personal) are hard to break. It will take consistent communication for you to establish yourself as their first

choice for musculoskeletal care. However, once you begin to receive referrals from a variety of MD’s in your area it will greatly impact your practice and provide you with exposure that many chiropractors do not yet have. This guide was developed from research articles and my personal experience building a referral based practice. Feel free to customize the content for your personal practice as no two chiropractors practice exactly the same. You should use the opportunity to meet with MD’s as a vehicle to promote, establish, and enhance relationships through an authentic and elegant program that begins with you!



Addressing the Big 3 hurdles to referrals is an essential part of your meeting.

[The Evidence Based Chiropractor](#) is the leading chiropractic outreach group in the profession. The service is dedicated to increasing chiropractic utilization by showcasing research. Marketing to medical doctors through research is efficient, cost effective, and can dramatically improve your incoming referrals. Dr. Jeff Langmaid founded [The Evidence Based Chiropractor](#) with a objective of increasing chiropractic utilization through interdisciplinary cooperation. Considered the

leading authority on DC/MD relationships he is a coveted speaker and author. He currently practices with the largest orthopedic group in Florida.

[Join us.](#) Lets grow chiropractic together.