Build Your Referral Base
Efficiency, Accessibility Keys to Happy Referral Relations
By Bob Keaveney

When he left his medical group late in 2002, anesthesiologist Michael Schneider knew he was simplifying his life in one respect and complicating it in another.

Schneider's wife is an emergency room physician who works a lot of nights and weekends, so he wanted to be home more. Quitting his hospital-based group in Southern California accomplished that.

But it also forced Schneider to find his own referrals; he decided to market himself as a "doctor's doctor," pinch-hitting for colleagues at hospitals and outpatient surgical centers in his area, picking up work per diem where he could while maintaining control of his lifestyle and schedule.

"I definitely had to get my name out there in the community," Schneider says.

He leveraged his contacts with his colleagues at his former group by picking up some work for them, talked to surgeons he knew, applied for privileges at several area hospitals, and in some cases cold-called surgical centers to offer his services.

"Basically it was a matter of using people I knew, and then expanding my network," he recalls. "It was networking and marketing, and trying to identify a need and how I can best meet that need. Like anything, the best way to do things is to know someone who knows someone who can vouch for you — who can say, 'Yeah, he's a good guy, he gets along with nurses and patients, and he gets the job done.'"

But it was more than just marketing that helped Schneider succeed. Realizing that per diem physicians sometimes have a reputation as somewhat less than committed, he was determined to become known as different. He wanted to be treated as "part of the team" during his time on a job, and in turn he would work as diligently as if he were there full time.

"That's what people are looking for," he says. "When you act like you want to come in and be part of the team, it really goes over well — that you're willing to do whatever it takes."

Schneider's willingness to extend himself and his commitment to quality are the two fundamental elements to building and maintaining a solid referral base, according to physicians who make and get large numbers of referrals, as well as practice management experts.
Clever marketing tricks are fine, but physicians who get the most referrals are known more than anything for efficient business practices, a friendly and courteous staff, and good patient relations.

**Say hello**

When family physician Christopher Crow was starting out, he spent two months walking the halls of the large medical office building he works in, visiting colleagues, introducing himself, and talking about himself and his practice style.

"Just fostering relationships," he recalls. "'Here's who I am, here's where I come from, who my family is, what would you like to know about me? I'm going to offer these services and if I can help y'all out in any way, let me know.'"

Now that his practice in Plano, Texas, is established and refers a lot of its own patients, Crow says he expects new specialists to extend him the same courtesy of a personal greeting. He won't refer patients to a physician he's never met, or one who hasn't made an effort to establish a relationship with him.

"I want them to come to my office and say, 'I'm the new doctor in town,'" Crow says. "I don't want their representative; I don't want their office manager. I want them personally to just stop by and say hello. A new gastroenterologist might want to say, 'Hey, y'all want to go to lunch?' It's worth it to that GI, because we refer a lot of colon screens, and we want to know whom we're referring to."

Urologist Neil Baum makes it a point to introduce himself to any new doctor who arrives in his medical office building in New Orleans. He offers any help he can and drops off some materials: information about his practice, a couple of articles he's written on practice management (including one titled, "10 Things to Do on Your First Day in Practice"), and an oversized Rolodex card with his group name and number — "We're a urology practice, so the card is yellow," Baum says.

"I tell them, 'Hey, I know printers, I know software people who might be helpful,'" Baum says. "I invite them to come over to my office to meet my staff."

At Crow's medical office building, there are specialists who say hello in the halls or sit down to lunch with him in the cafeteria, and those who don't. The ones who barely acknowledge him when they pass by, or who always load up a tray of food to go, don't get his patients, and they're the ones "you hear rumors about how they're struggling to make it," he says.

"Hey, if you don't care enough to say hello to me in the hall or talk to me, if you don't want our business, that's no big deal," Crow reasons. "We'll refer to someone else."
Efficiency and courtesy

Of course, all the friendly welcomes and lunchtime chit-chats in the world won't keep your referring physicians happy if you fail to communicate with them promptly about their patients or don't treat patients with respect. That's why office efficiency is probably the most important aspect of maintaining good relationships with referring doctors.

"Nothing irritates referring doctors more than to have a patient come back to their office without having heard anything from the specialist to whom the patient was sent," says Baum, whose policy is to fax a letter to referring physicians the same day he sees their patient, thanking them for the referral and indicating the diagnosis, medication, and treatment plan he's following. He also sends referring physicians whatever educational materials he sends home with patients, so their regular doctors will know what their patients are reading.

All that's fine, says Crow, but if the specialist is proposing surgery or another major procedure, a big medication change, or a treatment that might significantly, even if temporarily, change a patient's lifestyle, he'd like to get a telephone call, too.

Good office efficiency is essential to keeping patients happy — and keeping patients happy is essential to keeping referring physicians satisfied. The most successful specialists maintain same-day scheduling policies that allow them to see a patient whose doctor says needs immediate attention, according to consultant Vicky Bradford, PhD.

Successful specialists don't keep patients waiting long when they have an appointment, she adds, and they and their staffs are courteous and welcoming.

"Patients who go to a specialist are there because they have something their primary-care physician needed assistance with; usually, they're in fairly acute conditions," says Bradford. "And anybody who is in that situation health-wise is very vulnerable, and most of the time very frightened. It's important for the specialist to remember that. Even brief encounters a surgeon has with a patient before surgery — just the memory the patient has of that interaction really goes a long way to their understanding of how they were treated, because they have no idea, clinically, how they were treated. But they know whether that physician was comforting, friendly, and made them feel as though they were in good hands."

And patients will, naturally, tell their primary-care physicians about their experiences with specialists. (Indeed, most better primary-care doctors will ask.) One complaint won't likely lose a specialist his referral source, but several will.

"Step one is having a personal relationship with other doctors," says Crow. "Step two is having a staff, a business plan, and a way of running your office that is accommodating to
patients I send over. You have to have both. I won't refer to anyone I don't have a relationship with, or anyone whose office isn't accommodating to my patients."

**Do the extras**

There are some other ways to keep yourself on the minds of referring doctors.

Baum tries to do little things to indicate he remembers the nonwork-related conversations he's had with his referring physicians. He saw a book on fly-fishing at an airport bookstore, and picked it up for a physician who'd mentioned it was his hobby. He cut out an interesting article on the University of Notre Dame for a doctor who happened to be an alumnus. Instead of sending a generic wine-and-cheese basket during the holidays, Baum sends more useful items; one year he purchased personalized luggage tags for all his big referrers.

"Everyone said, 'That's the coolest thing; we think of you every time we travel,'" Baum recalls. "So I try to find unique ways to keep my name in front of referrers in a positive way — including things that let them know I'm thinking about them, even when I'm not eyeball-to-eyeball with one of their patients."

Be careful with little gifts, though. While some specialists swear by them, many primary-care physicians say they'd rather not have them. If you do send them out, try to make them relevant to the physicians and practices they're going to, so that they know you had them in mind. Generic trinkets can be turn-offs.

Position yourself as an expert in your field by holding seminars or grand rounds at local hospitals, especially on topics patients are probably asking their primary care physicians about. When Baum does grand rounds, he always creates a Power Point presentation and sends the slides to any of his referring physicians who didn't show up. He includes a note: "Sorry you couldn't attend, but I thought you might be interested ...."

Open your office occasionally for luncheons with your biggest referrers, during which you can spend a few minutes talking about a new service you're offering. Or go to their office to talk about a condition that more patients seem to be asking about.

Finally, always include staff — theirs and yours. Your office managers can talk about ways they can work together while you talk to the doctors.

"You'd be amazed how much leeway some practices give their staff when it comes to making referrals," Baum says.

**Bob Keaveney is an editor of Physicians Practice. This article originally appeared in the April 2004 issue of Physicians Practice.**