Chapter 9
Telephone Techniques
Lesson 9.1

Telephone Use in the Medical Office

- Define, spell, and pronounce the terms listed in the vocabulary.
- Determine and discuss the source of incoming and outgoing calls to a physician’s office.
- Describe how to develop a pleasing telephone voice.
- Explain why courtesy is so important when speaking on the telephone.
Lesson 9.1

Telephone Use in the Medical Office

- Demonstrate the correct way to answer the telephone in the office.
- Discuss different ways to handle callers who want to speak to the physician.
- Demonstrate the correct way to record a message accurately and take a request for action.
Introduction

- Sources of most calls
  - Established patients
  - New patients
  - Reports of treatment results or emergencies
  - Physician referrals
  - Laboratory results
  - Pharmacies and patients for prescription refills
Active Listening

BOX 9-1 HOW TO LISTEN

- Quiet the mind to absorb what the speaker is saying.
- Focus on the conversation.
- Look at the speaker’s eyes.
- Don’t interrupt.
- Allow the speaker to express the complete thought.
- Repeat your interpretation of what has been said, using the speaker’s words when possible.
- Ask whether the interpretation is correct.
- Respond to the speaker.
- Don’t look at a watch or clock or answer a cell phone when listening.
- Remain on the speaker’s subject.
- Respect differing opinions.
- Be empathetic.
Pleasing Telephone Voice

- Use proper enunciation, diction, pitch, and clarity
- Use pleasant inflection with friendly, warm tone
- Use courtesy and tact
- Avoid medical jargon and use correct grammar
Telephone Handset

- Handset mouthpiece should be 1 inch from lips and directly in front of teeth
- Speak directly into mouthpiece of headset, same distance as handset
Maintaining Confidentiality

- All communications are confidential
- Use discretion when mentioning names, symptoms, or other information
- Never use speaker phone
Thinking Ahead

- Before a call, have all necessary information ready
- Have pen and pad ready to take notes
- Write down list of questions or goals for conversation
- List of frequently called numbers saves time
Answering Promptly

- Answer quickly and always by third ring
- With multiple lines, place first call on hold long enough to ask second caller to hold
- If emergency, let others on hold know they may have to wait or be called back
- Do not multitask while on a phone call
Identifying the Facility

- Identify facility first
- Say your name
- Choose a greeting and practice saying it
Identifying the Caller

- If caller does not identify self, ask who is calling
- Write name down immediately
- Try to use caller’s name at least three times during conversation
- Handle callers who will not identify selves according to office policy
Screening Incoming Calls

- Learn physician's preferences for receiving calls or returning later
- Explain that physician will return calls as soon as possible
- Provide approximate time frame for when caller can expect to hear back
- Ask for phone number of caller
- Record messages accurately and document calls
Minimizing Wait Time

- Keep callers on hold as short a time as possible
- Once per minute, check back in with patient holding for physician
- Offer to have call returned, rather than wait on hold
- Always thank caller for waiting
Transferring a Call

- Ask permission when placing caller on hold and to transfer calls
- Identify caller to person receiving transferred call
- If unavailable, ask caller if he or she would prefer to leave a voice mail or take a message
- Know how to direct calls to appropriate staff member
Taking a Telephone Message

- Use message pad or computer system to record the following:
  - Name of call recipient
  - Name of caller
  - All contact numbers for caller
  - Reason for call
  - Action to be taken
  - Date and time of call
  - Initials of person taking call
Taking Action on Messages

- Message procedure incomplete until necessary action is taken
- Add notation to carry over to next day, if necessary
- Note patients’ attitudes if significant, to help physician when returning call
Ending a Call

- End calls promptly
- Thank caller, close conversation with a form of goodbye
- Allow caller to hang up first
Patients Refusing to Discuss Symptoms

- Some patients may insist on only discussing symptoms with physician over phone
- If patient refuses, suggest he or she make appointment to discuss in person with physician
Unsatisfactory Progress Reports

- Do not give medical advice to patients
- Make detailed notes about patient’s unsatisfactory progress
- Present notes to physician
- Follow up with patient with physician’s instructions
Requests for Test Results

- Patients call for test results
- Physician must see results and give permission to share results with patient
- Only provide abnormal test results if authorized, and give further instructions
- Refer any questions to physician
Requests for Test Results, cont’d

- Schedule appointment with physician for serious abnormal results
  - These types of results best relayed in person
- Identify patient properly before giving results
- Patient must give written permission before any information may be given to third-party callers
Personal Calls

● Personal calls to physician
  ➢ Handle according to physician’s instructions and be tactful

● Personal calls to staff
  ➢ Only take personal calls in case of emergency
Angry Callers

- Take required action
- Acknowledge importance of call and reassure caller of your assistance
- Lower tone of voice and volume to encourage calm manner
- Avoid getting angry and try to get to root of real problem
- Express interest, take careful notes, and follow through
Aggressive Callers

- Insist they receive whatever action they feel necessary immediately
- Treat them with calm, poised attitude
- Do not let aggression force you to take inappropriate action
- Explain when caller can expect a response from office
- Follow up that appropriate action was taken
Complaints

- Find source of problem and present options to caller for resolution
- Treat callers in the same way you would wish to be treated
- Complaint may seem small to you, but is paramount to patient
- Good customer service remedies many complaints
Callers with Difficulty Communicating

- If callers are not primarily English speakers, they may be difficult to understand
  - Use listening skills to understand
  - Ask questions to be sure you understand
Emergency Calls

- Require good judgment from person answering calls
- Know what constitutes a real emergency and how to handle it
- Never hang up on emergency until help arrives
- Urgent calls require prompt attention but are not life-threatening
- Policies and procedures manual should dictate what to do
Emergency Calls, cont’d

- Emergency calls may need to be transferred to physician if possible
- Written plan of action in case physician is not available to handle call
- Develop typical questions to ask caller to determine nature of emergency
Screening Guidelines

- One person may be designated to screen calls
- Written telephone protocol should dictate how to handle urgent and emergency situations
- Emergencies should be transferred to physician