

Follow-Up Appointments

Hey, everyone, in this presentation we're going to talk a little bit about how to structure your follow-up appointments. Later in this unit, we'll give you more specific information about how to process follow-up appointments, how to order supplements and labs, and bill the patient, and things like that, all those nitty-gritty details; for now, we're just going to talk briefly about structuring the visits for maximum effectiveness.

The main purpose of follow-up appointments, of course, is to track the progress of the treatment plan that you created during the case review, to answer any questions the patient has, to review follow-up testing, and to make sure that you're moving in the right direction. Follow-ups can be 30 minutes, 45 minutes, or 60 minutes, depending on your preference. I only offer 30-minute follow-ups because I have a lot of patients and not many hours in the clinic, so I need more available appointments. I know Dr. Nett and Dr. Schweig offer 30-minute visits as well as 45-minute follow-ups. I used to offer 15-minute follow-ups, but I found that to just be too hectic and not enough time to get much accomplished.

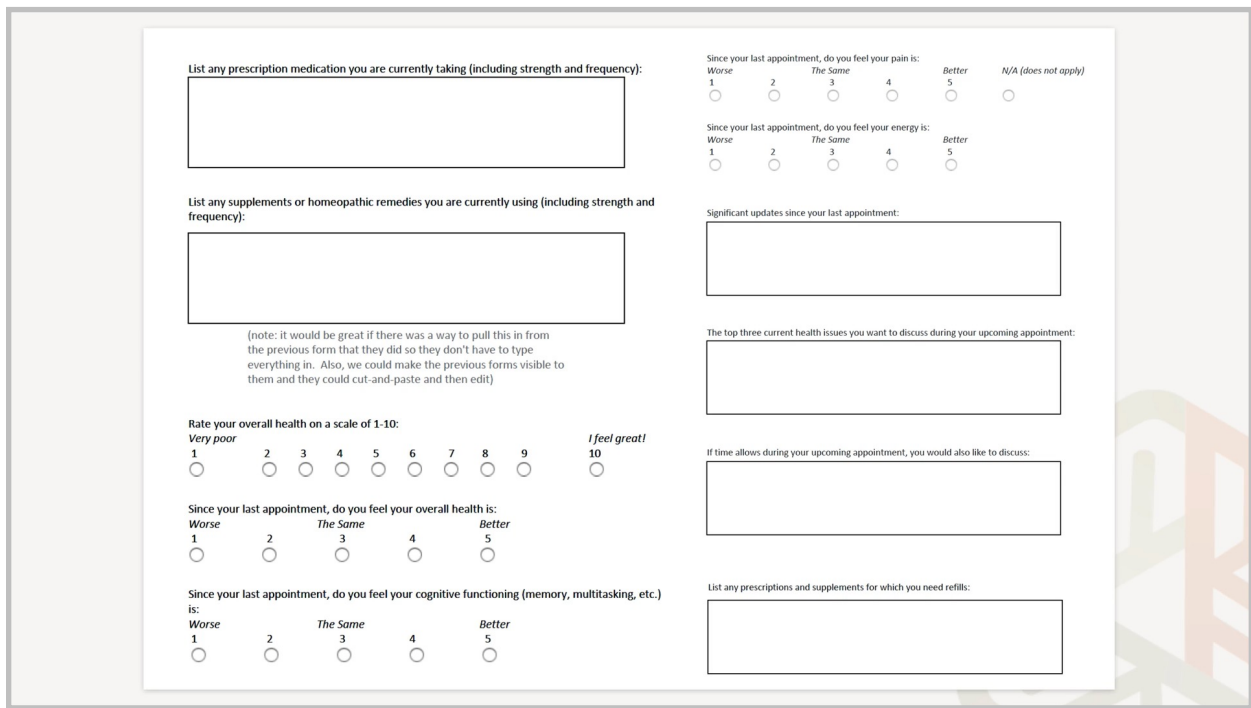
And in terms of format, we offer in-person follow-ups of course, but also follow-ups via phone and Chiron video conference. And across the board for both Dr. Nett and I and Dr. Schweig, my co-director, it's about 70 percent of our patients that choose phone or video conference for follow-ups, and that's true even for local patients. Here in the Bay Area, we have a lot of traffic, and even a patient that lives in San Francisco or South San Francisco might choose to do a follow-up by phone or video conference because they just don't want to spend an hour in traffic trying to cross the bridge to come see me in Berkeley. This is largely your preference how you do this. I do know some clinicians that only see patients in person, they don't even offer phone appointments, so that's obviously your prerogative if you want to do it that way, but I think you'll see better compliance from patients in terms of maintaining their proper schedule of follow-ups if you offer multiple different options.

In terms of phone versus Chiron, it's about 50-50 for us right now, 50 percent of patients choose the video, 50 percent choose phone, but that percentage has been growing, and I think as more patients become aware that we're offering video and get comfortable with it, they'll choose that because it's more satisfying for both the clinician and the patient. You get more information from a video conference visit than you do from a phone visit. We do encourage patients to see us in person at least once a year; we don't enforce it strictly or track it strictly, and we do make allowances for patients who live long distances from the clinic and who have limited means to fly out and see us, but I do believe that it's important to maintain some in-person relationship if possible, and also, the laws on this are changing quickly, but Medicare in California I believe or nationally requires an in-person visit once a year in order for the doctor to continue prescribing medication, and we've spoken to our attorney about this and it's a gray area, and it's not clear if that extends outside of Medicare, but in a lot of cases, physicians use that as a kind of safe,

conservative approach to ensure that they're in compliance and they won't get in trouble if they happen to get audited by the medical board.

In terms of scheduling, I do my appointments back-to-back with no time in between. I do not review the patient's chart or labs prior to the appointment, except perhaps for a few moments if I happen to finish early on the last appointment. I do, however, review labs as they come in, and write a short interpretation note and deliver that to the patient's portal. We charge patients a \$50 interpretation and administrative for all lab kits, so this includes urine tests, stool tests and saliva tests, to cover this time. And I encourage you to do this; it takes a lot of time and energy and money to accumulate the knowledge required to interpret these tests, and you should be charging patients for that.

The same is true for reviewing a patient chart, and we'll talk more about this when we discuss patient communication policies. That said, when you're just starting out, you may want to have a bit of time between your appointments so you can review the patient chart, and then as you become more familiar with the practice of functional medicine and reading these labs and making treatment recommendations based on them, you can then start scheduling back to back so you have a more efficient time flow.



List any prescription medication you are currently taking (including strength and frequency):

List any supplements or homeopathic remedies you are currently using (including strength and frequency):

(note: it would be great if there was a way to pull this in from the previous form that they did so they don't have to type everything in. Also, we could make the previous forms visible to them and they could cut-and-paste and then edit)

Rate your overall health on a scale of 1-10:
 Very poor 1 2 3 4 5 6 7 8 9 10 I feel great!

Since your last appointment, do you feel your pain is:
 Worse 1 2 3 4 5 Better

Since your last appointment, do you feel your energy is:
 Worse 1 2 3 4 5 Better

Since your last appointment, do you feel your cognitive functioning (memory, multitasking, etc.) is:
 Worse 1 2 3 4 5 Better

Since your last appointment, do you feel your pain is:
 Worse 1 2 3 4 5 Better N/A (does not apply)

Since your last appointment, do you feel your energy is:
 Worse 1 2 3 4 5 Better

Significant updates since your last appointment:

The top three current health issues you want to discuss during your upcoming appointment:

If time allows during your upcoming appointment, you would also like to discuss:

List any prescriptions and supplements for which you need refills:

Regardless of what length or format appointment you choose, I strongly recommend requiring patients to fill out a pre-appointment questionnaire before their follow-up, and I've put our questionnaire here on the slide, and if you're using MD HQ, I believe we will be able to make this available in your installation of MD HQ as well, and so we ask patients a number of questions here that help us get up to speed quickly when we open their chart. So we ask them to list any

prescription medication they're currently taking, including strength and frequency, list any supplements or nutraceuticals they're currently using, including strength and frequency. Looks like there's still a little note there that we have for Ben, something that we're asking for, and as a side note, Ben, the developer of MD HQ, has been so responsive to our requests for improving MD HQ and making it the best possible EHR for functional medicine, so we're continually on him with new requests, and if you're in this course and you're using our build, whenever we make changes, I think those will be able to be pushed out to you as well.

So then we ask them to rate their health on an overall scale of one to 10, one being very poor and 10 being great. We ask them, since your last appointment, do you feel your overall is worse, the same, or better on a scale of one to five. We ask, since your last appointment, do you feel your cognitive function, memory, multitasking, etc., is worse, the same, or better, one through five; since your last appointment, do you feel your pain is worse, the same, or better, one to five; and since your last appointment do you feel your energy is worse, the same, or better, one to five scale. Then we have some free answer boxes where we ask them to provide significant updates since their last appointment, another box for the top three current health issues they want to discuss during their upcoming appointment, another box for issues they would like to discuss above and beyond those previous ones we just mentioned, if there's time; and then any prescriptions or supplements for which they need refills.

So down the line, we're working with Ben on creating a charting system that would use these numerical response questions to visually show their progress over time, and that is really important for both clinicians and patients. Human beings are really adaptable, and we tend to have short-term memories and we tend to focus on what's not right versus what has improved, so helping patients to see the progress they've made over time is really important to a successful treatment. This is kind of similar to the research on gratitude, focusing attention on what's going well, and what has improved, can lead to a very meaningful benefit, and this form here also helps to focus your attention on what's important to the patient during the follow-up, and it helps them to prepare their thoughts and to figure out what's important, so you don't spend the follow-up talking about things that don't matter to the patient or aren't relevant or important to the treatment.

Established patient appointment algorithm

The purpose of the established patient appointment is as follows:

- Make sure that patient is progressing through the protocol established during the case review
- Answer patient questions about the protocol (working with side effects/reactions to supplements, diet, etc.)
- Review additional lab testing that was ordered during the case review, and prescribe new protocols or order new testing as a result
- Help patient to stay on track and make changes if necessary
- Identify any new symptoms or concerns that may have arisen since the previous visit

Procedure for appointment:

- I. Greet patient and establish rapport and expectations for appointment
 - A. Greet the patient warmly, and introduce yourself if you haven't yet had contact with the patient
 - B. Ask the patient about their primary concerns and goals for the appointment
 - C. Establish expectations for the call; let them know that you will be reviewing their progress with the protocol so far, reviewing lab results (if applicable), and answering any questions that they may have
- II. Review of progress with protocol
 - A. If patient has recently had a Case Review, open the "ROF" document in the "Consults" tab for the patient to determine their underlying patterns and protocol
 - B. Open the "CR" document in the "Forms" tab to determine their top 5 complaints
 - C. Open encounter notes for any 2-week check-ins or emergency appointments that the patient may have had prior to this visit
 - D. Ask them how they are doing with the protocol
 1. Have they been able to build up to the full doses?
 2. Have they had any reactions to any of the supplements in the protocol?
 3. Are they having any trouble with the diet?
 - E. Review their primary complaints and symptoms to determine if there has been any change
 - F. Empathize with any difficulties they are having and inspire confidence in moving forward
- III. Address any issues they're having with the protocol
 - A. If reacting to supplements, advise to stop the supplement until reaction subsides, then add back in at a lower dose and/or lower frequency as necessary
 - B. If having trouble with diet, advise on appropriate response
 - C. If possible, ensure that they continue to increase the doses of supplements they are tolerating and continue moving forward with the protocol
 - D. If patient needs additional support, consider referring to health coach
- IV. Review of additional testing ordered
 - A. Look at previous soap note to determine additional testing ordered
 - B. Review any available test results, and make treatment recommendations accordingly
 - C. If patient has not completed additional testing, ask if you can answer any questions and support them to do that
- V. Determine if new testing or treatment is required
 - A. If patient has completed or is nearing completion of a protocol, make sure that they have the necessary kits for re-testing
 - B. If follow-up test results are back, and the original issue has been addressed, move on to any other issues that were identified, but not addressed, during the CR
 - C. If all issues from the CR have been addressed, but patient is still symptomatic, determine what additional testing or treatment may be required
 1. Consider the following pathologies/mechanisms:
 - a) Gut
 - b) HPA axis
 - c) Nutrient balance
 - d) Metabolic health
 - e) Methylation
 - f) Toxic burden / detox (metals, CIRS, etc.)
 - g) Infection
 - h) Immune dysregulation
 - i) Hormone imbalance (thyroid, sex hormones, etc.)
 - j) Mitochondrial dysfunction
- VI. Review plan for moving forward with patient
 - A. Begin by making sure that all of the patient's questions, concerns, and goals for the appointment have been addressed
 - B. Restate plan for moving forward
 1. Summarize plan for continuing with protocol (i.e. stopping/re-starting any supplements they reacted to, changes to diet, etc.)
 2. Summarize plan for completing the additional testing
 3. Summarize any other action items discussed during appointment
 - C. Invite them to schedule their next 2-week check-in
 1. Remind them that while these appointments aren't mandatory, they're strongly recommended and we've noticed that patients that do them are much more successful with the protocols
 - D. Ask them if they have any final questions and close the call

I've created an algorithm for established patient visits. I originally did this to help train new practitioners that I hired. It outlines the key steps to go through in these visits. Even if you're an experienced practitioner, I think you'll find it helpful. Established patient visits are in many ways more challenging than initial consults or case reviews. There are so many things you are tracking; progress with the treatment, issues that haven't yet been addressed, new symptoms that may have arisen, follow-up test results, new tests or diagnostic procedures that you might want to do, and of course, diet, lifestyle, and behavior change. Even though I've been doing this work for a decade and I created the algorithm, I still find it helpful to review it myself from time to time. We've included this algorithm as a clinician handout, and you can download it and start using it in your practice.

Follow-up structure



1
Greet patient,
establish
connection



2
Check to see if
there are **lab**
results to review



3
Review pre-
appointment
questionnaire



4
Go over **lab**
results



5
Answer any
questions they
have

In terms of how to structure them, I'd begin by greeting the patient, establishing a warm connection, I'd check to see if there are any lab results in their chart that need to be reviewed, and then I'd say something like "I'd like to start by reviewing your pre-appointment questionnaire, assuming they fill it out, along with anything else you'd like to share, and then go over your lab results," and that helps to guide and structure the appointment, it tells the patient what they can expect, and it helps to keep you on schedule as a clinician, so that the follow-up appointments will be more focused and efficient, and you're less likely to go off on tangents.

As I'm speaking to the patient, I'm also taking a SOAP note, I begin with subjective symptoms, then objective test results, and then I combine assessment and plan into one section. If the appointment is via phone or Chiron, it's a little easier to manage this. If the appointment is in person, I always make sure that I can maintain eye contact and a warm personal connection as much as possible while I'm taking notes. At this point, I will sometimes have an intern observer and they will take notes, which I prefer, so that's something you can all work toward, but I did this myself for many years, and it's definitely possible to do. It's a bit of an art form, to be able to take these notes and maintain eye contact. If you don't yet know how to type, meaning the proper way where you can type without looking at the keyboard, that's absolutely essential, it's well worth the investment of time to learn how to do that, so that you can maintain eye contact sometimes while you're typing, and of course, this will be a challenge that you face no matter what kind of medicine you practice, whether you're doing functional medicine or conventional medicine. One advantage to functional medicine is our appointments are typically longer, so in a seven-minute appointment or a 10-minute appointment, the clinician typically barely has time to type all the notes in, so there's less of a time to develop a connection, whereas we have a bit more time in functional medicine.

As you review each lab, you can uncheck the flag as key document box, which you would have checked when you originally reviewed the lab when it first comes in, so that it's highlighted for you to go over during the next appointment, and you can check the box to show it in the patient's portal if you haven't already.

During the appointment, you'll also add any follow-up tests, supplements, medications, handouts, or documents they may need in their portal. This is really easy to do in MD HQ, and it's one of the many benefits of that system. You can take all the handouts you generate with PDF Generator, upload them to MD HQ and then use the system to deliver to patients, and they really love this.

Follow-up frequency



On current treatment plan: every **6-8 weeks**



Needs intensive management: **every 2-4 weeks** or as needed



Maintenance: every **6-12 months**

In terms of how often follow-ups should be, it depends on the treatment protocol and the patient. In general, we suggest every six to eight weeks for a patient that's currently on a treatment protocol. If a patient has an intensive issue, it may need to be more frequent; in other cases, we may only see a patient twice a year. Six to eight weeks is a good frequency for someone on an active protocol that doesn't require intensive management, but for patients with something like chronic inflammatory response syndrome or Lyme, they may need more frequent support. We are getting ready to hire a nurse practitioner physician assistant that can provide check-in appointments between the appointments with myself or Dr. Schweig or Dr. Nett, the senior clinicians. Obviously, if you're just starting out, you won't be able to begin there, but it's something good to work toward. Make sure to provide patients with instructions for when to set up the next appointment at the end of each follow-up, that's really important. Okay, that's it for now, see you next time.