

## **The Initial Consult, Part 2**

So next up is to explain which labs you'd like to order, and why they're relevant to the patient's concerns, and this is important because, as you know, the labs can be pretty expensive, especially when you're ordering several of them at once, and how much time you want to spend here will depend on the patient. If they're new to functional medicine, you may need to explain that a core difference between functional and conventional medicine is that we in functional medicine do more testing up front because it's necessary to identify the underlying cause, and the key principle of functional medicine that makes it different from conventional medicine is that we need to identify the underlying cause in order to have a successful outcome, instead of just suppressing symptoms.

And you can mention that it may be more expensive initially, but it actually ends up saving a lot of money down the line. And you can use an example of a patient with pre-diabetes, which is completely reversible, versus full-fledged type 2 diabetes, which often requires lifelong medication and is associated with numerous complications that might end up in hospitalization and can be extremely expensive for the patient and insurance company, and also just an incredible hit on quality of life. But if you do some initial testing up front, you figure out what's going on, what's causing the glucose dysregulation and you address, then you can save the patient tens of thousands of dollars and years of suffering, and using examples like that can be really helpful.

You may need to explain the specific value of some or all of the tests that you want to order, but try to avoid going into excruciating detail because you can then very quickly spend the entire appointment talking about those tests, and there's other things that you have to do. So ideally, you would just give them enough to help them understand the value of the test and why it's necessary, to get their agreement and permission to move forward, and in some cases of course you may need to tailor or limit the number of tests you order based on the patient's financial resources. So you'll have patients coming to you from all different backgrounds, and if someone is constrained with their financial resources, you may need to triage and choose only the tests that you feel are most important based on their main complaints and their history, or perhaps based on what their insurance will cover.

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The next step is to explain the case review process and the timing for completing labs and the case review paperwork. So you shouldn't need to spend a ton of time on this, because this can be done a lot more efficiently with your website, and in any initial materials that you provide patients or send to prospective patients. We talked about this a little bit in the context of new patient onboarding and all the materials that you can send and the autoresponder that you can use when patients first express interest in your services. If the patient is proceeding with you, you will want to invite them to review the detailed instructions for the labs, which we make available through MD HQ, the patient portal, and we're going to make those FAQs for the labs available to you as handouts that you can use in your practice. And you want to emphasize that they look at these instructions for the labs as soon as possible and begin planning accordingly.

Doing four to six different labs, all with different instructions and different requirements for how to prepare can be really kind of a full-time job for patients; they can be intimidating and overwhelming, especially if they're not familiar with doing those kinds of labs, and they can be confusing, so this is actually why we ended up creating FAQs. We didn't have them initially, and I would say a huge portion of our staff time was consumed by answering questions about the labs, and creating these FAQs has been enormously helpful. It's cut down considerably on staff time spent answering those questions. It's also cut down on mistakes made by patients not filling out the requisitions correctly or not doing the samples correctly or not preparing correctly for the lab tests, and this just of course streamlines everything and makes it more efficient, so I really encourage you to use the FAQs that we're going to offer you. It's not going to eliminate staff time that you'll spend doing this stuff, but it will dramatically reduce it, and we know this from experience.

The next step is to inform a patient that an invoice for the initial consult labs and recommended supplements will be delivered via their portal in MD HQ, which they'll have already signed up for at this point, of course, and they must approve or modify that invoice before moving forward. We recommend not charging the patient for anything before they approve. It's not good practice and it can cause a lot of problems and bad feelings, so our staff will create the invoice based on the

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labs that we order, and in our case that tends to be a group of standard labs, which we'll talk about towards the end of the training when we talk about doing a full case review together, but sometimes we'll make additions or subtractions depending on the patient and what we learn during the initial consult, which is the whole purpose of having an initial consult in the first place, is to determine what labs should be ordered based on their particular presentation. I mean, that's one of the purposes from your perspective as a clinician.

The last step before concluding the appointment is to tell the patient that you're looking forward to meeting them in person, which is a gentle reminder that the case review appointment has to take place in person, and you're looking forward to working with them. And let them know that a staff member will be following up by phone within 48 hours to answer any questions that they have or address any concerns. So this is another change that we made recently. Initially, for the first couple or few years, really, that I was doing this, we didn't do a follow-up call by default, and we found that the follow-up call makes a huge difference. Patients really appreciate it. They almost inevitably have questions that they may not even know that they have at the end of the initial consult appointment. They often feel excited or maybe somewhat overwhelmed and they're not thinking of the questions that they have, and then a day later or two days later they do have questions, after they've looked over the lab FAQs or whatever. And they could, of course, send those through the portal and sometimes will, but I think in this day and age when we have come to rely so much on electronic communication, which of course is great and is really practical and helpful in a lot of ways, there are still situations where a simple phone call can answer questions or deal with an issue so, so much faster than going back and forth through the patient portal. And so, we instituted this policy of a staff member just doing a routine follow-up call within 24 to 48 hours after the initial consult has occurred, and we found that, like I said, patients really appreciate it, they feel supported, and it also actually cuts down on the time that staff has to spend going back and forth on questions in the portal.

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