

## Getting Will-Call-Back Patients Started

### EXAM Will Call Back Patients

If the patient/family is reluctant to schedule the records and/or starting appointments, they are placed on Will Call Back (WCB) status. In order to let the patient/family feel they are making the decisions about the follow-up communications, the TC asks them,

**"Would it be all right if I called you to find out what your decision is?"**

If they answer "Yes" the TC asks,

**"When would be the best day and time of the day in the next week or so to call you?"**

The TC notes the date and time to call them on the Dictated Exam Form in the Exam Notes section. The patient's name, phone number and that date and time are also noted on the Phone Follow-up Call Log. The folder is filed in the Will Call Back File section of the *Communications File*.

The **Phone Follow-up Call Log** (see at end) is actually a tickler calendar. The top page contains all the patients to be called *this* week. The next page contains all of the patients to be called *next* week; the third page is the week after that, etc. If you want to call somebody in two weeks, flip down two pages and list their name, phone number and the reason for the call; call them in two weeks.

If voice mail (calls) do not work, the TC should send them emails or better yet, send a text, which most people will respond to.

<b>Phone Call Follow-up Log</b>		Week to Call From _____ to _____		
NAME	Phone	Reason for Call	Dates Called	OK

If the patient/family would rather not be called, the TC notes on the call log to get in touch with them in six months if no contact before then. This keeps the patient from getting lost.

If the patient/family Will Call Back about *records*, but the TC cannot get in touch with them after one or two weeks, she sends a "Records Will-Call-Back, Follow-up" letter.

*Records Will-Call-Back, Follow-up letter*

Dear X: Re: Patient's Full Name

Thank you for your participation in (Pt's. 1st name)'s orthodontic examination, at which we indicated that (he/she) would benefit from orthodontic treatment.

In order to make a complete diagnosis and plan the best treatment for (Pt's. 1st name), we require a complete set of diagnostic records.

Please call me as soon as possible to set up your appointment for (his/her) diagnostic work-up, the results of which will be explained at your Tx Consult visit.

Thank you again, and if you have any questions please give me a call.

Sincerely:

TC

If the patient/family will call back about starting treatment the TC notes the day and date on the Phone Follow-up Call Log in the week the patient/family said was the best time to call them back. If the TC cannot reach the patient after a few calls, she requests a *Treatment* WCB Follow-up letter.

## ***Treatment Will-Call-Back Follow-up letter***

Dear X:

Re: Patient's Full Name

Thank you for your participation in (Pt's. 1st name)'s orthodontic examination and diagnostic records, all of which helped us to diagnose and plan your orthodontic treatment needs.

As we mentioned at your last visit, this is the best time for you to start treatment, to allow us to solve the orthodontic problems in the best manner possible. Please call me within a week or two to tell us of your decision. Thank you again, and if you have any questions about treatment, please call me.

Sincerely:

(TC's Name) for Dr. Braceman

If the patient doesn't decide after sufficient effort, he/she is placed on the Follow-up Log to be called in six months.

All patient folders in the Will-Call-Back file that are on the Recall list are *called* six months later. If the TC cannot reach the patient after a few calls, she requests a 6-Month WCB Follow-up letter.

## ***6-Month, Will-Call-Back letter***

Dear X:

Re: Patient's Full Name

It has been about six months since we discussed the need for (Pt's. 1st name)'s orthodontic treatment. It is important to start (his/her) treatment at this time to obtain the full benefits of growth and development. If we delay any longer, we may have to take current records to re-evaluate the case, causing unnecessary expense.

We will be happy to assist you in any way we can, to help you realize that (his/her) present and future oral health may be impaired if the orthodontic problems are not resolved.

Please call me at your convenience; thank you.

Sincerely:

(TC's Name) for Dr. Braceman

The essence of will-call-back control is to get the patient *started*, and you will not know if they started unless you **TRACK** them. Some computer systems can track an exam patient showing whether they started or not; check on yours to see if it does. If your computer can't do this, have your TC use a paper **TC Tracking Log** as shown below.

# Phone Call Follow-up Log

Calendar Week of:

\_\_\_\_\_ to \_\_\_\_\_

Patient	Phone Numbers	Reason for Call & Call Notes	Dates Called	Disposition of Patient
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	
Pt.	Home:	Reason:	____-____-____	<input type="checkbox"/> Started <input type="checkbox"/> No Tx _____ _____
Parent:	Cell:	Notes:	____-____-____	

