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PR Marketing Coordinator for Specialists Procedure Guide

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# INTRODUCTION

This guide is a tool to demonstrate the specifics for your position and the procedures for operation. It breaks down each component of the PR marketing coordinator position and the expectations for performance. For detailed patient scenario scripting examples, please refer to ePractice Manager’s online document library on your company’s portal.

# PART 1: KPIs

Key performance indicators (KPIs) are statistics that measure the performance in achieving key objectives, such as general office and job-specific productivity.

All successful businesses use KPIs to monitor the areas of their organizations. Without KPIs, a business is running blind. Running without monitoring the appropriate KPIs is equally as bad. Without KPIs, you and the business must make assumptions and guesses rather than depend on factual statistics. This can result in ineffective management and a lack of expansion for the practice, as well as upsets between management and staff.

## Your KPIs

You should have a set of specific KPIs for your role within the practice. If you do not, meet with your office manager to determine which metrics would be most appropriate to track productivity for your position. Your KPIs should be minimally tracked on a monthly basis, but ideally on a weekly basis.

## Effectively Using KPIs

To use KPIs effectively,

* ensure that the KPIs you use truly and accurately measure your role’s productivity
* regularly post the metrics to trackers, including graphs if applicable
* regularly evaluate the trackers/graphs to see what trends are emerging

For example, if you see a significant increase from one week or month to the next, examine what actions were implemented prior to the increase. Find out what the successful actions were, and make sure you continue them.

Similarly, if you see a meaningful decrease in a trend, you must take effective action to halt the decline. Look into any significant changes in your job duties and/or actions that may have occurred in the weeks leading up to the drop. Did you stop doing something or neglect anything that was working? Were additional job duties given to you that led to neglect of successful activities?

The point in either case is to use your graphs to observe what is going on, and then take the appropriate action.

# PART 2: BASICS OF PR, ADVERTISING AND MARKETING

The PR Marketing Coordinator (PRMC) must know the definitions and basic concepts of the three key areas: public relations, advertising, and marketing.

## Public Relations (PR)

*Advertising is saying you’re good. PR is getting someone else to say you’re good.*

Public relations (PR) is the practice of managing the spread of information between an individual or organization and the general public. In other words, PR contains the actions you will take to create and build relationships between your practice, existing patients, and potential patients. This helps “soften up” the various market segments you deal with (such as referring GPs, existing patients, and the general public) and will increase the credibility, recognition, and perception of your practice.

PR is a long-term strategy, not just a single action. It is the building of a brand and both the awareness and recognition for your practice.

### Examples of PR Activities

* Taking your referring GPs to lunch
* Starting and/or participating in study groups
* Sending thank-you notes or gifts to referring doctors and patients
* Posting patient testimonials around the office

## Advertising

Advertising is the act of calling public attention to your product or service and attempting to persuade people to take part in it.

Some common advertising examples include paid announcements in newspapers, magazines, or on the radio, television, billboards, and social media sites. Healthcare advertising also often includes educational brochures about the services an office delivers, hand-outs on the practice and services for GPs.

Planning, designing, and writing advertisements can be done by a professional advertiser or someone internally who is trained on the subject. No matter what type of ad you are creating, it must promote the product or service and include a call to action, which is the piece of the ad that provokes the audience to act now.

### Examples of Calls to Action

* "Join today for a free 7-day trial."
* "Call us today and schedule a free consultation."
* "If you schedule your appointment for July or August, you will receive..."

### Types of Ads

Upwork is an excellent site that has a great deal of educational information on advertising. Review the [Advertising Explained](https://www.upwork.com/hiring/marketing/what-is-advertising/) article in the Marketing section of Upwork to learn more.

According to Upwork, there are three basic types of ads:

* **Informative Advertising**: Often used to launch a new product or to reach a new group of customers. It gives people basic information like what a product does, how someone might use it, where they can find it, and what the price point is. The objective of informative advertising is to capture interest, raise awareness, leave a positive impression, and motivate people to take the next step, like making a purchase or requesting more information.
* **Persuasive Advertising:** Generally aims to increase demand, influence people to change brands, or motivate people to make a purchase. Persuasive advertising might show the benefits a product offers or compare key features against a leading competitor.
* **Reminder Advertising:** Reassures people who already know and like a particular brand. The goal is to keep the product or service at the forefront of consumers’ mind for future purchases. It reinforces messages from other ads and may include customer testimonials.

Advertising is a form of outbound media, which means an ad interrupts what someone is doing in an effort to get their attention. As the PRMC, your job is to create ads that attract attention to your office’s services and products.

## Marketing

Marketing is the process of preparing your product for presentation to the public. This includes all of the research and preparation that is done to present the product in a desirable way. Even in the same profession, marketing needs vary geographically and from one community to another. This is why market research is so important.

Marketing involves the creation of an overall strategy, specific plans for promoting and advertising the product or service, and all the PR activities associated with it. When done correctly, marketing stimulates a desire for your product or service.

### Marketing Strategy Examples

* Using surveys, find the common issues referring doctors run across with patients who might require dental implants.
* Based on the results of those surveys, provide written information (such as a brochure) to the referring GP that they could then hand out to potential implant patients to educate them on the procedure.

### Implementing Marketing Strategies

Distribution of brochures will help to stimulate a desire for your service as well as make it easier for GPs to refer patients to your practice. To whom would a GP be more likely to refer a potential implant patient?

1. A specialist who has taken the time to discuss a patient’s needs and has provided the GP with brochures to simplify the referral process.

**OR**

1. A doctor who has sent a letter announcing that they do implants and requested referrals from the GP's office.

Do your homework through formal and informal surveys, study key performance indicator (KPI) trends, listen to your patients and referral sources, etc., and then formulate and adopt marketing strategies and implement them. Watch what does and doesn’t work, then revise and improve as you go.

Ensure that each and every activity and all the steps required to pull them off are on your marketing calendar.

# PART 3: REFERRAL SOURCES AND MARKET SEGMENTS

## Market Segments

There are three segments of the public that you will be addressing as the PRMC, and each requires their own strategies and actions. Two of these segments are referral-based, which will be the sources for most of your new patients.

### General Dental Community and Other Specialists

GPs (and other specialists in the dental and medical community) will be your primary source of new patients. Developing your referral base through effective PR and marketing is vital and is where you should spend most of your strategic efforts.

### Existing Patients

Existing patients can act as a referral base for your practice when a proper PR and marketing plan is in place for them.

### The General Public

Although this will not be your primary source of new patients, the general public is still a market segment you should pursue. Some avenues for promotion are advertisements, PR actions with public groups, and educational brochures.

## Referral Sources

As a specialty practice, the majority of your patients come from different referral sources. To effectively track and manage your sources, you must become familiar with the three key referral terms: active referral source, new referral source, and referral source contact list.

### Active Referral Source

An active referral source is a doctor or practice that refers a patient to your office within a 60-day period. When a referral source has gone 60 days without a referral to your practice, it becomes inactive. Active referral sources should be monitored closely so you can quickly address those that become inactive.

### New Referral Source

A new referral source is a source that has not previously referred a patient to your practice. Once they refer a patient to your practice, they become an active referral source.

### Referral Source Contact List

Referral source contacts include the total number of practices an office has made personal contact with in a given time period. The referral source contact list is your working list that contains all referral sources: active, inactive, and new.

Track KPIs and post to KPI graphs for each of these sources and segments, and continually analyze them to correct and improve your marketing efforts. Knowing which sources and segments are bringing in patients is the most basic step any PRMC can undertake.

# PART 4: CREATING AND MAINTAINING REFERRAL SOURCES

As the PRMC in a specialty practice, your success will depend primarily on your development, expansion, and maintenance of your referral sources.

## Key Actions to Grow and Maintain Referrals

The following guidelines will help you grow and maintain an excellent relationship with your referral sources. Note which are currently being done with your referral sources and which you need to begin implementing.

* Approach each referral source (or potential referral source) as a source of help rather than trying to get something from them.
* Point out the benefits that the GP will receive from working with your practice. Emphasize that your doctor and practice are a consistent source of added value for your referral sources. These benefits might include your providing helpful tips about clinical and practice management matters via email or blogs, or setting up educational events like “lunch and learns”, etc.
* Keep the referring doctor and office regularly updated on their patient. The more communication with the referring offices, the better.
* Plan your referral source office visits for the following week. Who you visit should be based on the activity of your referral sources. If you see a referral source beginning to send fewer patients, then a visit to that office would be a priority.
* Call or email referral sources that show an increase in referrals to your practice. This can be a simple “hello.” You just want to show them that you are available and easy to reach, and ensure their needs are continually met.
* Always ask for the office manager by name. You must know their name before you go on any office visits.
* Always visit the referral office personally and bring a small gift or some easy way for them to remember you (such as pens and calendars). Inspirational or quote-of-the-day calendars are very popular among office staff.
* Always send a thank-you note to the referring office AND the doctor.
* Referring offices really appreciate the gesture when you bring a "thank you" along on your office visit. As appropriate, you can bring treats and items that make their jobs easier. Over a period of time, this creates a nice, lasting impression. Give your items directly to the office manager because he or she is your key point of contact. This also gives you an opportunity to connect with the office manager on a more personal level.
* Be helpful, friendly, and accommodating on scheduling patients. Referral office staff are often involved in the scheduling with your practice. Making this process as smooth as possible is always appreciated and may generate additional referrals.

## The Importance of Maintaining Referral Sources

As the PRMC, it is your job to maintain active communication with all referral sources by whatever means possible. Referral source relationships develop over time, so remember to schedule ways to stay in communication with all of your sources on your events calendar. You will lose your referral sources if regular communication is not maintained by the doctor or PRMC.

Developing referrals is never a one-time activity. It is an ongoing process. If you stay in touch with practices and are consistent with the quality and care of their patients, your referral sources will continue to feed your practice.

## Tips for a Successful Referral Source Visit

For a successful visit between your doctor and a potential referring doctor, see that you and your doctor follow these tips:

* **Prepare for the meetings**. Prepare a packet of information about your doctor, practice, shared patients, outcomes, coordination needed, etc.
* **Remember that the visit is for the referring doctor**. It is not for you, and it is not just a social visit. These meetings have an anticipated outcome. You may feel confident that you know a particular doctor and practice well, but it is important to do the proper steps.
* **Have a topic in mind for the visit**, such as delivering more referral slips, letting the doctor know about an improvement in your office, talking about a particular shared patient, inviting the doctor to an event, etc.
* **Tell the doctor something about yourself every time**. Talk about where you went to school, your specialty training, where your office is, what kind of things set you apart from other offices, your specialty equipment, your staff, your experience, your cases, or your work with other offices—anything that contributes to increasing the doctor’s confidence in working with you and your team. Even with doctors you know well, you can always find new things to say about you and your practice.
* **Find out new details about the referring doctor**. Go beyond the surface level and find out what the doctor likes about practicing, finds challenging, what services they refer out and why, what they expect from a referral relationship, what issues you can help solve, etc.
* **Ask appropriate questions about the referral process with your office**.
  + If you’re meeting with a top referring doctor, ask about what you could do to make things easier for them and their patients. Stress that your goal is to return the patient in great shape, happy with the work you’ve all done together, and with the patient’s loyalty to the general practice intact.
  + If you’re meeting with a doctor who doesn’t refer as much, find out what issues they are facing with patients who need your services or with the referral process. Customize your response to align with what would help most. For example, the referring doctor may need assistance with patient education.
* **Keep good records on what referring doctors ask of you, and do what they ask**. The best way to progress in a referral situation is to genuinely be of help. Make something more convenient for the doctor. Provide help in a special way for a patient. When the referring practice sees the lengths you’re taking in order to take care of their patients, they will feel more comfortable referring to you in the future.
* **Always document your visit and debrief your team**. If the referring doctor has asked you for something, let the staff know and set up a means to provide it. If there are any existing issues with patients or the referral process, fix them and set up systems to ensure those issues don’t happen again. Then explain to the referring doctor and team how those issues have been addressed.

### Events to Help with Referral Sources

Practices that only do an “annual continuing education event for referring doctors” are miscalculating the amount of work needed to build and maintain their patient flow. To be a successful PRMC, you must have a number of frequent relationship-building events. The competitive environment that has developed in specialty practices requires a great deal of planning and effort from the PRMC.

Some examples of events you can set up include

* continuing education events
* doctor-to-doctor lunch meetings
* lunch or dinner learning sessions
* office manager workshops
* implant manufacturer events

The activities you schedule must be planned well in advance, but you can have as many as you wish. The only mistake you can make is to underestimate the amount of outreach needed to **consistently** build a steady stream of referrals.

As the PRMC, you must ensure that there are regularly scheduled meetings with your doctor and office manager to go over the events calendar. Having them both fully committed will help make each event a success.

# PART 5: SURVEYS AND TESTIMONIALS

Feedback is the most important to produce effective marketing, PR, advertisements, and promotions for your practice. How do your patients feel about all aspects of your practice? What do your referring offices think about your office and how you take care of their patients? Knowing how to properly collect this type of feedback through surveys and testimonials is an essential tool for a PRMC.

Marketing dollars can either be highly effective or useless depending upon your knowledge of the different marketing segments you deal with. Understanding marketing segments is accomplished through the proactive collection of feedback.

## Surveys[[1]](#footnote-1)

Through the use of surveys, you will be able to determine the "hot buttons" to include in your marketing material. A **hot button** motivates or triggers an emotional response in a prospective buyer. It can be an emotional tug or a statement that has an impact on your target audience. Here are some examples of hot buttons:

* "No over-scheduling, no wait time."
* "We offer IV Sedation in a calm and relaxing environment."
* "Three convenient locations."

When doing a survey, it is always best to ask the questions face-to-face. However, sometimes paper or online surveys will need to be used. The process consists of three easy steps:

1. Ask the questions and note down each answer.
2. Tally up the answers that recur on multiple surveys. For example:
   * Seven out of ten patients were impressed with how quickly they got in to see the doctor on their patient exit survey. (This data can also be used on promotional and advertising pieces.)
3. Incorporate the recurring answers (i.e., hot buttons) into promotions with referral sources and advertising for the practice.

## Testimonials

A book of before and after photos with accompanying testimonials should always be kept up front with the receptionist. This type of book is called a "Brag Book." Instead of simply leaving this in the waiting area, the receptionist should hand this to new patients while they are waiting to see the doctor on their first visit.

It is your job as the PRMC to ensure that the book is up-to-date and filled with positive testimonials.

### Getting Testimonials

All patients should fill out an exit survey upon completion of their treatment. The survey should have a box that can be checked if the patient gives their permission for the practice to use their survey in promotional efforts. These exit surveys will allow you to create testimonials and marketing pieces for the practice.

**IMPORTANT: Testimonials must have the patient’s approval before use for marketing purposes or it is a HIPAA violation.**

Here are some important points to keep in mind:

* Meet with as many patients as possible who are completing treatment.
* Patients should be handed a nicely prepared form titled with something like, “My Oral Surgery Experience” or “My Visit to Dr. Implant!”
* Patients should be approached at any point where they appear to be happy, satisfied, appreciative, and upbeat about their visit.
* When patients are given the form, they should be asked to fill it out while they are in the office. This is the most successful way to get patient testimonials.
* If the patient is not able to complete the form in-office, then give it to them along with a self-addressed, stamped envelope and thank them in advance for completing it and dropping it in the mail.
* Always send a copy of the patient's testimonial to the referring doctor’s office. You can drop this off in person or send it over with the doctor’s report once the treatment has been completed.
* Do not just tuck the testimonials away in the brag book. Make copies of them for display on boards around the practice so patients can easily see them.

# PART 6: MARKETING PACKAGE & PROGRAM

## Marketing Package

As the PRMC, you must have a nicely done "package" of materials to pass out to referring doctors and practices. If properly done, this package can help you boost and sustain your new referral sources!

Most practices put together a simple package that only includes the basics: practice and doctor information, and referral pads. However, there are other very important items that are often left out.

Here is a list of items that will help boost your marketing package to the next level:

* Your upcoming events calendar for the practice. Ensure this includes all continuing education events, along with any upcoming promotional events that may be planned for referring doctors (e.g., open houses, outings, etc.).
* Testimonials from your patients. These are your most valuable tool. A third-party endorsement by patients has a strong impact.
* Educational information on clinical and practice management information that the referring doctor can use to help their practice.
* Information on how to schedule a lunch & learn event with your doctor.
* Information on how you and your vendors can help the referring doctor. For example, your implant rep may be able to assist by meeting with your referral source to educate, provide materials, participate in events, etc.

This package should be brought to all continuing education events. This information educates and broadens the understanding of your practice and your specialty.

## The Getting Started Marketing Program[[2]](#footnote-2)

The following information contains a marketing program you can adapt and use for your office.

### The Basics

1. The office manager (OM) and the PRMC meet each Monday to go over upcoming actions, make any adjustments.
2. The OM should be familiar with the PRMC job description, as they oversee the PRMC’s duties.
3. Use the following KPIs assigned to the PRMC to evaluate performance:

* Total # of referring offices visited per week/month
* Total # of outreach events set up (referral meetings, lunch & learns, etc.)
* Total # of patients referred to the practice
* Total # of ACTIVE referral sources
* Total # of testimonials collected

### Staff Allocation for Marketing Activities

1. Compare the work, qualifications, and desired outcome for the PRMC and any underutilized staff. Decide on distribution of workload for each.
2. Determine the doctor’s routine availability for lunches.
3. Determine who will set up lunches.
4. Determine if the preparation for the lunches is adequate and standardize a preparation process and package for the doctor’s lunch and other meetings.
5. (If doctor has a study club): Determine how the study club will be maintained and used to enhance referral activity from members.

### General Actions

1. Coach the doctor on how to present their practice in one-on-one meetings with potential and existing referral sources. The doctor needs to be able to have a relaxed conversation about the benefits of the practice, creating "partnerships" with their referral sources, etc. The doctor should be able to discuss fees, the economics of sending referrals, and why the practice is unique. Outline a script for the doctor to use during these meetings.
2. The backbone of marketing is a top quality service. Create an inventory of aspects about the doctor and practice you can promote, such as the

* doctor’s level of training
* experience/ongoing training of staff
* equipment used in the office
* coordination with referring practices
* communication with patients
* speed of service
* unique services offered to the practice

1. Visits to referring doctors should include the PRMC as often as possible. The PRMC will be doing most of the follow-up with both the referral source and their staff. A single visit or lunch with a GP by the doctor is only the first step and will require a great deal more development of the relationship.
2. Divide your total referral list based on activity level. The PRMC must audit this list monthly to catch fluctuations in referral numbers.

* Low activity offices can then be targeted for visits, either by the doctor or the PRMC over the next 3-4 weeks.
* The PRMC must flag offices that are referring more than they previously were (based on monthly numbers). These offices should be the focus for ongoing visits to strengthen these relationships.

1. Determine the appropriate frequency for contact with each of the offices.
2. If your office has brochures, use them. If not, get some created and printed.
3. The PRMC should prepare an annual PR calendar with all upcoming events and have enough time allotted for event promotion and execution (at least 60 days in advance). Larger events should be scheduled 3-4 months in advance.

### Surveys

Conduct a survey with very close referral sources and ask the following questions:

1. Why do they refer?
2. What is their satisfaction level with the clinical work?
3. What is their satisfaction level with the referral process?
4. What kind of feedback do they get from patients?
5. Do they have any specific patient scenarios in mind?
6. Has the level of referring changed over time, and if so, what contributed to this?
7. Is there anything they need from the practice that they aren’t getting?
8. What’s the best part about their work with you?

Complete the survey with the key offices first, then use the information gathered to develop a survey for more offices. Determine which subjects to survey and what the survey format should be. Personal Q&A is best, but sometimes paper or online surveys are used for other reasons. Then tabulate the survey and incorporate hot buttons from the survey into ongoing promotions.

### PR & Marketing Coordinator Office Visits

1. Create a sequence for all PRMC initial visits, including

* An introduction
* A presentation of information about your practice and doctor
* Inquiries about current interaction with the practice
* Any additional needs
* Any trouble
* Expansion of the help available (as needed)
* An appointment scheduled for your next visit to the referral office

1. Determine those who contribute to the referral process and plan to include them in future visits. Inform the OM of each office’s stated needs so you can meet them.
2. Create a system for contact management with the office.
3. Develop protocols on attire, talking points and language used, visit content, follow-up, frequency of outreach, and administrative work (e.g., stats, documentation, etc.).

### Study Clubs for Hygienists

1. The doctor and PRMC should work with their vendors to gather any material or resources and plan out a study club for hygienists in the area.
2. Mailers and visits to offices should heavily promote the study club start date.
3. The study club should be quarterly and can be the primary continuing education event for hygienists in the area.

### Website Upgrade

1. See if your practice website is in need of an upgrade, with a focus on promoting the practice to patients and referral offices.
2. If the content from the brochures is written and adequate, it can be incorporated into the website.
3. Consider including resources on your site for referring practices to enhance communication and promotion.

### Blogging

1. As the top specialty practice in the area, there's an opportunity to get as much control of the market as possible. The key is the volume of communication that goes from your practice to the referral base and the public. Any good web marketing company, particularly those that specialize in dental areas, can provide blogs that go out monthly from the practice to both your referral and patient base.
2. The doctor can pick 6-10 subjects they wish to blog about. Draft these and have them sent out to the referral base. These can include

* clinical topics
* technical topics
* patient successes

This is an opportunity to brand the practice and the doctor. Remember that this will become more difficult as competition moves into the area. The PRMC should research who can assist the doctor on drafting the blogs and see that this is set up.

### Monthly Meeting with Referral Doctors

1. The PRMC should contact a maximum of three to four doctors, either current referral sources or prospective ones, and invite them to the office for a meeting with the doctor for 1-2 hours.
2. The doctor should select a subject and deliver a presentation in a small group setting. This allows for interaction and discussion with attendees.
3. These meetings should be set up monthly at the practice. The PRMC brings food for the attending doctors and makes a comfortable setting. Perhaps attendees can get continuing education credits for this.
4. The PRMC should be present for these meetings and get to know those attending. Gather contact information for key staff within the attending doctor’s offices.
5. Engage in follow-up activities to capitalize on the value of these events.

### Presentations for Referral Doctors

The doctor and PRMC should present cases that referring GPs feel less confident presenting themselves. Larger implant cases such as All-On-4 would fall under this category. The referring GPs can invite their candidate referral patients to the office and the doctor will present to them in a group. This is very effective and will close cases that the GP will not.

### Implant Provider Support

The PRMC should work closely with the office's key implant provider representative and join them for visits to referral offices. The implant representatives want to do as much as possible to stimulate sales. Reasons for these visits include

* to address specific needs of a GP already working with the doctor
* a lunch & learn put on by the representative
* a visit to discuss new technology
* a visit to educate the GP
* a visit to deliver components to the referral office

Any opportunity to visit a referring office (or prospective referring office) should be taken advantage of.

Implant provider presentations should be scheduled throughout the year on a quarterly basis and should focus on clinical topics the doctor would like to present. The implant provider should participate in the cost of producing these.

### Testimonial Duties

1. Create a survey for patients.
2. All employees should watch for opportunities to collect patient testimonials.
3. Patient testimonial forms should be printed and available so that any staff can hand one to a patient who has expressed a positive experience about their treatment, the doctor, the staff, or any positive thing about the practice.
4. The PRMC ensures these are available to staff and handed out to patients.
5. Patients should also be given the appropriate URL to visit so that they can post reviews on Yelp, Healthgrades, and other review sites.
6. With patient permission, the PRMC posts testimonials on the website and bulletin board and sends them to referring practices.

1. *Example surveys can be found in the “PR & Marketing” section of the ePM Document Library.* [↑](#footnote-ref-1)
2. *A copy of this marketing program can be found in the ePM Document Library.* [↑](#footnote-ref-2)