**POLICY/PROTOCOL ADDRESSING HEARING CENTER – WALK IN PATIENTS**

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**From:** Jerry Orloff

**Sent:** Tuesday, May 14, 2013 11:14 AM
**To:** Hearing Center Reception, Hearing Specialist, HR

To the success of the Hearing Center, following are some basic guidelines:

1.  Always have to take into account what patients are already on the schedule, and what types of appointments they are (length).

2.  Take into account where the Hearing Specialist is relative to the schedule - is he on time, is he 5 minutes ahead of schedule, 5 minutes behind or an hour behind.

3.  What type of need does the patient have (does he or she want their hearing aid adjusted or wax cleaned out or is this a new hearing evaluation?  The first two are not revenue generating; the third scenario potentially is.).  In my opinion unless the Hearing Specialists schedule is wide open (no patients on the book), the first two example scenarios should be given an appointment for a time that does not interfere with previously scheduled patients.

In the case of a new consultation, if the Hearing Specialist has an opening of 45 minutes or more, the patient should be added on.  If there is not sufficient time to add the patient in for a new hearing evaluation at the present time, at least have the Hearing Specialist stop out, greet the person and provide the person with the confidence that he is excellent and expert at what he does. The Hearing Specialist can close by saying something like:  "I have a patient back in my consultation room now, but our receptionist will be happy to arrange an appointment with me at a time that works for you.  I'm looking forward to having the opportunity to be of service to you and determining if I can help you to hear better.  It was a pleasure to meet you."

4.  Don't put the Hearing Specialist on the spot...  What I mean by this is that I would never ask the specialist within line of sight or ability for the person to hear if he can see the patient now.  The Hearing Specialist will, in that scenario, feel pressured to say "yes."  What you want to do is provide information and options.  Here's what I mean:

     a.  Check the schedule for the rest of the morning (or afternoon), check the current time, determine what the patient likely needs, and how reasonably able the patient will be able to participate and cooperate with the Hearing Specialist for an examination (is the patient alert and oriented?  Does he appear to be in good general health?  Is he or she ambulatory?  Does the patient appear to have dementia?).

     b.  With the information above, ask to speak to the Hearing Specialist in a private area, i.e Sound Test booth or storage area behind the desk so that you can provide the specialist with the particulars in order that he be able to make an informed decision, most likely to provide excellent quality experiences for all.