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16 Spine Surgeons Discuss Patient Satisfaction Featured

Written by Laura Miller | February 29, 2012

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Here are 16 spine surgeons discussing how their practice maintains patient satisfaction.

Ask Spine Surgeons is a weekly series of questions posed to spine surgeons around the country about clinical, business and policy issues affecting spine care. We invite all spine surgeon and specialist responses. **Next week's question is: What marketing tool has been most useful for bringing new patients into your practice?**

Please send responses to Laura Miller at laura@beckershealthcare.com by Tuesday, March 6 at 5pm CST.

Q: What is the most important thing to do for patient satisfaction?

Neel Anand, MD, director of Orthopedic Spine Surgery, Cedars-Sinai Spine Center, Los Angeles: There are five things:

1. Take the time to listen to the patient, understand their symptoms and make sense of what is being described.
2. Have a clear and concise treatment plan that is effectively conveyed to the patient in a way they can best understand it.
3. Meet the patients' needs before, during and after surgery.
4. If there ever is a problem with a patient's care, meet the issue head-on and proactively
5. Be available for the patients at all times and when you are, make it count because they are entrusting us with their health.

Zoltan Bereczki, DO, Orthopedic Spine Surgeon, Laser Spine Institute, Tampa, Fla.: Laser Spine Institute ensures patient satisfaction by having our surgeons undergo a fellowship program that teaches them how to perform endoscopic minimally invasive spine surgery in our state-of-the-art facilities. The training and technology provided by Laser Spine Institutes gives our surgeons the necessary resources to take care of our patients and ensure their satisfaction with the overall experience.

Scott Blumenthal, MD, Spine Surgeon, Texas Back Institute, Plano: Our focus on patient satisfaction starts before the patient comes into the office and continues through the surgical experience. It's a constantly evolving process, so we're using questionnaires and metrics to find out how we can improve ourselves. At Texas Back Institute, we have different silos of care, such as the artificial disc replacement center or scoliosis center, so if patients fall into one of those categories we can direct them to the right place from the beginning. We also work to schedule patients appropriately according to their needs, and many of our patients come to us for second opinions.

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A lot of patients are unsatisfied because surgeons don't spend enough time with them and they are asked the same questions over and over at the practice. Here, we have someone writing the information down so when I walk into the office I can say, "Correct me if I'm wrong, but you are here because the primary care doctor diagnosed you with a herniated disc and thought you may need surgery," or something of that nature.

If patients are surgical candidates, we don't schedule them right away for surgery. First, they meet with a nurse who does one-on-one teaching, videos and informative sessions to show the patient what the surgery will look like. The patients can play with our model spine and often meet with us again after that. Before they go into surgery, they have a preoperative visit with me to discuss questions the nurse couldn't answer.

Finally, we often have patients see a clinical psychologist who can tell what factors in their history might affect their expectations and response to treatments. Working with a clinical psychologist is one unique thing our practice does to make sure patients are ready for their operations.

Jeffrey Cantor, MD, South Florida Spine Clinic, Fort Lauderdale: We offer alternative approaches to traditional spine surgery, which often results in patients who are more satisfied with their treatments. Our whole basic philosophy is to try to understand the root of the patient's problem rather than trying to justify one particular treatment. We are constantly learning from past experiences in order to identify the protocols that work and where there is room for improvement.

I have had spontaneous back fusion and, as someone who is living with multiple levels of fusion, I understand the risks involved with the procedure. I'm not against spinal fusions, but I think they should be avoided whenever possible. In my practice, we try to identify sources of pain and non-pain to address the painful regions and preserve adjacent regions as much as possible. We have a cadaver lab where we design operations, focusing on motion preservation. Sometimes we do hybrid procedures to give the patient a better outcome.

Our first priority is to understand the goals of the patients — young athletes with a herniated disc have different goals than older patients with the same condition. I define what is deliverable to patients and if their goals aren't achievable, I'm honest with them upfront. If possible, I work hard with them to achieve the best results. Many of the surgical procedures we perform may be more technically difficult or require more work, but it's an important factor to ensure patient satisfaction.

Ara Deukmedjian, MD, Founder, Deuk Spine Institute, Melbourne, Fla.: Foster a culture of care within our organization that continuously strives to exceed our patient's expectations. Deuk Spine Institute's philosophy is to provide patient-centered care that begins with our commitment to make the right diagnosis which ultimately leads to the right treatment for a particular patient's condition. We believe that an "educated patient" will make the best decision about their own care; so our staff will spend a significant amount of time teaching each patient and their family members about their diagnoses and treatment options available. Patients are our family members and we are proud to serve them.

J. Brian Gill, MD, Spine Surgeon, Nebraska Spine Center, Omaha: In my practice, we have instituted a patient satisfaction survey as they leave the clinic. This is for both new and established patients. I then take this information and share it with all of our employees. This has become quite a motivating factor to improve the care that we provide. If a patient is not satisfied, then we follow up with them to see why they were not happy and try to improve that area. In addition, paying attention to details such as returning phone calls in a timely manner and completion of employer paperwork pays dividends in satisfying patients.

Keith Eugene Girton, MD, Orthopedic Spine Surgeon, Laser Spine Institute, Philadelphia: The most important way to ensure patient satisfaction is good communication including clarification of the issue at hand, clear expectations and detailed explanation of the overall process and aftercare.

Michael Gleiber, MD, Founder, Michael A. Gleiber, MD, PA, Jupiter, Fla.: This is not a simple question and I don't believe there is one specific thing my office can do to ensure satisfaction; rather it is an array of things we institute in my practice to make patients satisfied with their care.

Patient satisfaction begins before the patient even enters the door of the practice. Having an excellent, friendly and ample well-trained front office staff that does not keep patients waiting on hold, making yourself directly available to speak to the patient about questions they may have regarding treatment, and providing them with both an array of

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non-operative and surgical options by the end of their visit are critical. I personally will spend as long as the patient needs to review their images with them which they find particularly helpful. My office also provides my patients with information about their condition before they leave the office.

The office environment is also critical. Having a clean, modern office with current journals and magazines makes a big difference when patients are waiting. We also have Direct TV and offer patients snacks or beverages when the wait time is over 10 minutes.

If additional studies or referrals are made, my office makes all of these arrangements directly for the patient and follow up appointments are made at this visit to make sure they "do not get lost" to follow up. Assisting with the arrangement of studies and referrals makes life a lot easier for patients, particularly patients that are elderly or have special needs. I've found that by arranging their care through my office staff, it also increases patient compliance.

In terms of surgical post-operative satisfaction, I make sure to keep not only the patient but the family members fully up to date on a daily basis as to the patient's progress. My practice has really streamlined the peri-operative care so that follow up appointments are already made and the appropriate post op x-rays are ordered prior to an operation. The day of surgery, I will meet each patient in the holding area and review their questions, as well as discuss their condition and operative procedure once again. I have found this to be very comforting, not only to the patient but to the family members as well.

Vernon Morris, MD, Orthopedic Spine Surgeon, Laser Spine Institute, Tampa, Fla.: I ensure patient satisfaction by treating the patients if he or she were one of my own family members.

Tom Muzzonigro, MD, Spine Surgeon, Tri Rivers Surgical Associates, Pittsburgh: Ensure that my patients understand their diagnosis, their treatment options, risks/benefits and then follow through with their wishes regarding their treatment. I find I get the best "buy-in" and patient satisfaction when my patient and their family are actively involved in and invested in the decision making and treatment plan. Putting in place surgical pathways, rapid rehabilitation, and teaming up with your hospital staff leads to lower patient and family stressors on the day of surgery and directly increases patient satisfaction!

David Myers, MD, Medical Director, Sall Myers Medical Associates, Paterson, N.J.: The most important thing we do is call patients the day after surgery to see how they are doing. We also call patients after office visits where we recommend a new treatment or therapy to see how they are doing. We also book reasonably so the patient doesn't have to wait too long. It can be destructive if we call and expect them to be here on time but then we aren't ready to see them.

We never put any glass between the patient and receptionist — that's unusual. Usually there is a glass window or a door separating the receptionist from patients. We've done away with windows like that so patients can come up and ask questions without feeling like they are intruding. You also have to have someone upfront all the time to answer questions, not someone who might be in the back when a patient needs something.

Stefan Prada, MD, Orthopedic Spine Surgeon, Laser Spine Institute, Tampa, Fla.: To ensure patient satisfaction the most important thing is proper communication and selection with our prospective patients. By appropriate patient communication and selection, I mean, researching patients' history, pre-examinations and MRI findings to ensure we determine the best surgical procedure for our patients. Laser Spine Institute has a rigorous screening process to make sure any treatment we provide has a high likelihood of success. In addition, I always maintain clear expectations for surgery to assure the best outcomes for my patients.

Khawar Siddique, MD, Spine Surgeon, Beverly Hills Spine Surgery, Calif.: Constant communication. We give every pt 24/7 access via email. Some get our cell phone numbers. All communication to the office has less than one day turnaround.

Sanjeev Suratwala, MD, Spine Surgeon, North Shore-LIJ Health System-Glen Cove Hospital, New York: Patient satisfaction is very important in medicine and surgery. One of the initiatives we use is minimizing wait times — that's often the number one complaint and concern at physician offices. We also keep track of patient schedules to ensure there isn't significant overlap and each patient spends a reasonable amount of time with me.

We give post-visit patient satisfaction surveys to every patient. We value the feedback we get from them and if there are any concerns that come up in the surveys, we are sure to address them. We have an open dialogue with patients so we know their concerns and follow up with them to make sure they are satisfied with their treatment.

I think the biggest thing practices need is a way for patients to communicate with them anonymously. Sometimes patients are more open about their problems if they feel like their treatment won't be compromised by their complaints. We employ a third party system that handles all the patient surveys, so when we get the responses they are anonymous. We feel this is the best way to maintain patient privacy and make sure we are getting objective feedback.

Paul Slosar, MD, President, SpineCare Medical Group, San Francisco Spine Institute: The first

contact point for patients is our New Patient Coordinator. She has that job because she is friendly, organized, and can get patients in the door quickly. Our office assistants get to know the patients and their personalities so they feel well looked after. I personally spend a significant amount of time with the pre-op and post-op patients making sure they never feel rushed.

Fred Sweet, MD, Co-Founder, Rockford (Ill.) Spine Center: Two things:

1. Hire and retain excellent quality office staff and nurses who are great listeners, have skillful personal interactions with patients and who are committed to the concepts we use to help patients with chronic back and neck pain. Pay and bonuses as well as a sense of family hold all this together.
2. For many years we have been committed to total minimally invasive surgery and constantly strive to allow patients to go home the day of surgery. In our patient population this is highly valued.

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