

New Patient Sequence

Memorable Welcome

1. Reception CA uses Memorable Welcome - Script (Part 1) (Week 1) for New Patient (NP), copies insurance card, and provides Patient Information form (*Week 1*).
2. New Patient CA uses Memorable Welcome - Script (Part 2) (Week 1) with caring handshake, referral recognition, and escorts to consultation room. New Patient CA continues with NP until after CA exam is completed.

Subluxation Education

3. Explain Unique Factors and complete signing ceremony (sign Arbitration Agreement (Week 2) last).
4. Show Subluxation Information (Week 2) and ask NP to pronounce "Sub-lux-a-shun". Inform that the Subluxation is the most common condition we care for.
5. Exit consultation room to complete file, leaving NP with Subluxation Information (Week 2) to read, advise that DC will ask questions about it, and offer beverage.

Consultation Details

6. Upon returning, provide beverage and ask NP to define subluxation (use Socratic education if needed).
7. Ask for impressions of Chiropractic care (ask for additional impressions until NP is finished).
Had previous care: Ask for date of last visit, frequency, results, and reason for stopping.
None: Ask what NP has heard about chiropractic (+/- with + first; address all concerns).
8. Use Consultation Details - Script (Week 3) to obtain: frequency, severity, original cause (> 1 year, if applicable).
9. Touch exact area(s) of Chief Complaint pain on patient's body to confirm location and document.
- 10. Pause to write 1st series of written notes.**

Related Symptoms

11. Explain that subluxations *may* exist and provide a visual description, using vertebral models.
12. Use Neuropathologist or Spinal Nerve posters to connect spinal regions to organ systems and reveal other health problems. Correlate each with possible subluxations.
- 13. Pause to write 2nd series of written notes.**

Primary Concerns

14. Use Primary Concerns - Script (Week 4) to prioritize entire list of health problems into top 3.
15. Establish how Primary Concerns affect *all* normal activities (Include Home, Work/School, Hobbies).
16. Obtain information about *any surgeries, all medications, and any information* that was overlooked.
- 17. Pause to write 3rd series of written notes and repeat Primary Concerns and ALL Effects for confirmation.**
18. Advise patient, "It sounds like you have a Subluxation, but the Doctor will determine for sure."
19. CA exits or escorts NP to examination room.

Examination and New Patient Completion

20. DC uses DC Examination - Script (Week 5) with verbal dictation and firm, deliberate palpation, then *confirms* subluxations and concern about *possible* degenerative disc disease.
21. DC orders additional testing (x-rays and/or scan) from NP CA or DC (associate DC only; not PDC) and uses Conclude DC Exam - Script (Week 5), then exits.
22. CA enters and performs quick-paced examination, following CA Examination - Outline & Script (Week 6).
23. Reception CA uses New Patient Completion - Script (Week 7) to schedule ROF with spouse, collect payment, and give Subluxation Degeneration (Week 7).