

Telephonic Terrorism

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Have you called your doctor's office lately? If so, you undoubtedly hoped to speak directly with someone who might meet your need or connect you with someone who could. But to your surprise and disappointment, instead of a live person answering the telephone, a recording came on:

"Thank you for calling Medical Associates, Incorporated, your friendly health-care providers. We are located at 1414 Main Street, just east of Holy Moly Hospital. Our office hours are 8 AM to 5 PM, Mondays through Thursdays, with an hour for lunch from 12 to 1 PM. On Fridays, we work from 8 AM until noon. We are closed on weekends.

"If this is a life-threatening emergency, hang up and dial 911. If you know your party's extension, you may dial it at any time. Otherwise, stay on the line and your call will be answered in the order in which it was received."

After a brief pause, the recording continues.

"Please listen carefully, as our menu options have changed. If you are a doctor, a doctor's representative, or a hospital, press 1. If you are calling to schedule or cancel an appointment, press 2. If you are calling Dr. Smith, press 3. If you are calling Dr. Jones, press 4. If you are calling Dr. Brown, press 5. If you are calling Dr. White, press 6. If you are calling Dr. Johnson, press 7. If you wish to speak with someone in our office, press 8 and leave your name, date of birth, and reason for calling and we'll get back with you during normal business hours. To have these options repeated, press 9.

"Thank you for calling Medical Associates, Incorporated. Have a great day. Good-bye."

Admittedly, not every doctor's office uses an automated voice-response system. And not every such system is as annoying as the mock example offered here. Nevertheless, this setup—a telephonic terror—is common throughout the land, not only in doctors' offices, but also (and particularly) in large corporations, city utility departments, various government agencies, businesses of all types, and even some hospitals.

In a masterful and hilarious editorial published 2 decades ago, Goldwyn drew attention to this terror.¹ As part of his lament, he said, "This demoniacal, dehumanized device allegedly saves time and money because it has eliminated the flesh-and-blood go-between—the telephone operator; you remember, the human being that in a by-gone age used to answer the phone."

Let us assume for the moment that you are a patient who wants to know the results of tests that you underwent 3 weeks earlier; or perhaps you have a new problem and you wish to talk about it with your doctor and no one else, because you consider it to be highly personal and potentially serious. So you press the button that purportedly connects you with your doctor. But your doctor doesn't answer. Somebody else answers and asks for your name, date of birth, and reason for your call. That person—still unidentified—informs you that the good doctor is busy seeing patients and will get back with you as soon as his or her schedule permits (which might be several days or more).

Even if you are a doctor making the call, your only advantage is having the right to press button number 1, which shortens the wait before a real person responds. Otherwise, the system treats you as it does everybody else.

When I talk with friends and relatives about this matter, all agree that it frustrates and irritates them, and, as a patient myself, I concur. But they are reluctant to complain, fearing that it might upset their doctor or the office staff, which, in turn,

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might lead to a payback of some sort. Furthermore, they consider the setup to be a necessary evil over which they have no control.

Doctors who use this system tell me that they are fully aware of its drawbacks, including its negative effect on public relations. They believe, however, that it discourages or prevents inappropriate telephone calls and saves time, as well as the salary for an additional employee. Therefore, putting this mechanism in place is a business decision, pure and simple.

Using an automated voice-response system for business purposes rather than for the patient's benefit is bad enough. Unfortunately, however, it is a small manifestation of a much bigger and more troublesome problem—medicine's almost total transformation into a fiercely competitive business in which doctors are lumped with other professionals as "healthcare providers" and patients are referred to variously as customers, consumers, clients, or recipients.²⁻⁴ Re-establishing our historical image as doctors will be difficult and might no longer be possible. Nevertheless, we should strive diligently, relentlessly, and collectively to recapture the days when medicine was a highly respected calling and a proud and noble profession.

References

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