

Open Access

We opened our solo practice October 2000. I had recently read an article in Family Practice Management about open access and the concept was very much in line with our service philosophy. One of the reasons I left the group practice setting was because it was challenging to maintain a service oriented practice.

From day one we implemented open access scheduling. The benefits have been realized by both my office and our patients, and it has been one of our wisest decisions. Our day is still hectic, but less so than it was when I was in a group setting that did not utilize open access scheduling.

Our day typically begins with about 5-10 patients scheduled. As patients call in they are offered a same day appointment. This is irrespective of why they are calling, be it for a physical exam or a cold. We offer to do this through about 4:00 each day.

For patients, they are able to be seen on the day they need to. This means less suffering, immediate addressing of their concerns, and a feeling that they are being prioritized. Even after 5 years, patients are still very thankful that we are able to do this.

For our office, the day flows relatively smoothly. We have emergencies, but they are easily accommodated. It has also been a significant marketing tool which has attracted many people to our practice and our no-show rate is essentially zero.

I hardly get any phone calls during the evenings as everyone who needs to be seen was seen. My weekends are basically the same (2-3 calls/day) as everyone knows they can be seen Monday. This has allowed me to take my own call and I only sign out when I am on vacation.

Lowell Kleinman, MD
Family Practice of San Ramon