

UNITED OSTOMY ASSOCIATIONS OF AMERICA, INC.

Contacting the Local Medical Community



**GUIDELINES FOR
CONTACTING THE ASG's LOCAL
MEDICAL COMMUNITY**

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TO THE ASG LEADERSHIP

SUGGESTIONS FOR SELECTING THE PERSON OR PERSONS WHO WILL CONTACT YOUR LOCAL MEDICAL COMMUNITY

THE VOLUNTEER SHOULD:

Believe in the mission of the UOAA and the ASG

Be congenial, dignified, well mannered, tactful

Have a professional and outgoing personality

Be able to relate comfortably to people

Know when to talk and when to listen

Know how to accept rejection and still be persistent

Know the subject matter-UOAA/ ASG visiting program and other ASG services

Have some free time or a flexible schedule

OTHER FACTORS TO BE CONSIDERED AND DISCUSSED

The volunteer(s) should keep records and make periodic reports to the ASG leadership.

It is suggested the ASG help fund the volunteer(s) by paying expenses such as parking.

NOTE: After the ASG has selected its Representative, give them copies of these guidelines for them to study and review before they go out to “sell” the ASG services to the medical community.

TO THE VOLUNTEER(S) MAKING MEDICAL COMMUNITY CONTACTS

These guidelines have been designed to increase your medical community's knowledge of your ASG's patient support services and increase their use of your Visiting Program.

You, the person making these medical community contacts, are about to embark on a most important effort for both your ASG and the cause of individuals with ostomies and continent procedures. Your role will be to contact members of your medical community and inform them of your ASG's services. Most will agree—there is no better way to promote your ASG visiting program and its other services than a one-on-one discussion with members of the medical community.

These guidelines are specific in that they address three types of medical community contacts: physicians, nurses and hospital discharge planners. Physicians should be identified by their specialties- colon and rectal surgeons, general surgeons, medical and surgical oncologists, pediatric surgeons, urologists and gastroenterologists. Nurses should be identified by their specialties-office nurses and WOC nurses along with hospital unit head nurses.

NOTE: Some helpful “What to say” suggestions on what to say to the various members of the medical community will be found on pages 9 & 10. Tailor these suggestions by using your own words and personality. Suggestions on how to find people in the medical community will be found on pages 10 & 11.

PHYSICIAN'S OFFICES

**COLON AND RECTAL SURGEONS
SURGICAL AND MEDICAL ONCOLOGISTS
GENERAL SURGEONS
PEDIATRIC SURGEONS
UROLOGISTS
GASTROENTEROLOGISTS**

THE PHYSICIAN'S OFFICE NURSE

In many offices the physician's office nurse is frequently the key contact. They are responsible for acquainting the ostomy or continent procedure patient with the local ASG and the patient visiting program. Because of this importance, the office nurse should be your first office contact.

Ask to speak to this individual or make an appointment through the office receptionist.

After a brief introduction of who you are and who you represent let the nurse know that what you have to say would probably interest the physician as well. Then ask if you could talk to both of them while you are there. (The nurse can say any number of things such as, "Yes, the doctor should have time to see us now." Or; "The doctor is too busy, can you come back?" or, "Can I take the information and show it to the doctor?") Let's suppose the nurse says "The doctor is quite busy but I have some time and can give you a few minutes". Now the stage is set. What do you say? Where do you start?

Be guided by the "contact objectives" listed below. To accomplish these objectives build your presentation using the "What To Say" suggestions found on pages 9 & 10.

CONTACT OBJECTIVES

Because of your contacts the physicians and nurses will:

1. Understand the services your ASG provides, particularly the visiting program.
2. Understand the screening and training of each ASG visitor and the process by which patients and visitors are matched.
3. Know how to reach your ASG for support and information for their patients.

SUGGESTED PROCEDURE

NOTE: After presenting the following information to the nurse ask if they would please share the information with the doctor.

Ask the nurse about any experience they might have had working with an ostomy support group or a member who visits patients. If the nurse is not familiar with your group explain its various functions by using your own chapter literature.

After this, explain the benefits of your group's visiting program and how it will help their patients. (Remember to incorporate the "What to Say" suggestions in your presentation.)

A Visitor Request form is a most important document. Give the nurse several copies of the form and ask if they will discuss the use of this form with the doctor. With the doctor's approval, ask that a copy of the form be given to their ostomy and continence procedure patients. Signing this form will evidence the patient's agreement to have the doctor or nurse contact your ASG's visiting coordinator.

Ask the nurse if you can leave copies of your group's brochure which will provide their patient's with the names of your group's contact people, their telephone numbers and e-mail addresses, along with information about your group's periodic support meetings.

Finally, let the nurse know that you or someone from your ASG will make another call to replenish permission forms, brochures and any other literature your group uses.

NOTE: If the doctor can join you and the nurse, your presentation should not be much different from what you would be discussing if it was only with the nurse. Just follow the basic steps, whether you are talking with the nurse or doctor or both.

HOSPITALS

WOUND, OSTOMY, CONTINENCE NURSES (WOC NURSES) HOSPITAL DISCHARGE PLANNERS

NOTE: The WOC nurse may or may not be familiar with your group or your visiting program and other patient support services. Finding this out early in the contact is important when adapting your approach to them.

Follow the “contact objectives” listed below. To accomplish these objectives prepare your presentation using the “What to Say” suggestions on pages 9 & 10.

CONTACT OBJECTIVES

Because of your contact, the WOC nurse will:

1. Understand the services your group provides, particularly its visiting program.
2. Know about any literature your group has for patients.
3. Know how to reach your group for support to patients

SUGGESTED PROCEDURES

NOTE: Call ahead to the WOC nurse and make an appointment to visit in person. Tell the nurse that you would like to explain more fully the group’s services, emphasizing the visiting program and introduce literature available to the patient from your group and the UOAA. During the phone call, determine how familiar the nurse is with your group and its services.

At the appointment and after a brief introduction, begin your presentation. Depending on how familiar the nurse is with your group and its services describe just how the group’s visiting program will benefit their patients. Remember to incorporate the “What to Say” suggestions in your presentation.

The visitor request form for physicians and nurses is a most important one. Most healthcare agencies have their own permission forms. Ask if their form can be used to request a visitor for their patients. Make sure to leave them contact information for your visiting coordinator.

Ask if you can leave your group's literature. Make sure you offer to give each patient a introductory subscription to your local newsletter. Finally, let the nurse know that you or someone from your group will make contact with them to offer additional ASG and UOAA literature.

HOSPITAL DISCHARGE PLANNERS

NOTE: The hospital discharge planner can play an important part in directing the discharged patient to your local support group, particularly if the hospital does not have a WOC nurse. The discharge planner may be the bridge between the individual continuing as a patient and the individual leading a normal life. They are focused on helping the patient make that transition.

Follow the "contact objectives" listed below. To accomplish these objectives prepare your presentation using the "What to Say" suggestions on pages 9 & 10.

CONTACT OBJECTIVES

Because of your contact, the Discharge Planner will:

1. Understand the services your group provides, particularly the visiting program.
2. Know about the literature available to patients.
3. Know how to reach your group for support and information.

SUGGESTED PROCEDURE

NOTE: Call the hospital discharge planner and make an appointment to visit in person. Tell the discharge planner that you would like to explain more fully your group's services, emphasizing the visiting program and introduce literature available to the patient from your group and the UOAA.

After a brief introduction, and, since the discharge planner probably is not familiar with your group, you should give them your own ASG literature and any you have from the UOAA. Explain the services your support group and the UOAA have to offer to ostomy and continent diversion patients.

Depending on how familiar the discharge planner is with your group and its services use your basic brochure and describe how the visiting program will help their patients. (Remember to incorporate the “What to Say” suggestions in your presentation).

The visitor claim form can be used. Most hospitals have their own patient permission forms that comply with HIPAA laws that allow a visitor from your group to speak to the patient.

Also explain how each patient should receive one of your group’s brochures that meeting and support information and how the patient can contact your group directly.

Be sure to leave contact information for your visiting coordinator.

Finally, let the discharge planner know that you or someone from your group will make another call in about six months to offer additional supplies of your ASG and UOAA literature.

MISCELLANEOUS

“WHAT TO SAY” SUGGESTIONS

HOW TO FIND PEOPLE IN THE MEDICAL COMMUNITY UOAA RESOURCES

“WHAT TO SAY” SUGGESTIONS

NOTE: There are many points you can make when “selling” the services of your ASG. Here are several suggestions for you to use in creating a personal presentation to a particular individual. Add these suggested procedures to your own proven experiences and tailor the suggestions with what feels comfortable to you.

A WORD OF CAUTION: Do not offer the “customer” too much information. Make two to four specific points this time. The next time you contact this person review the points you made before then add another point or two.

TALK ABOUT: THE UNITED OSTOMY ASSOCIATIONS OF AMERICA

ITS MISSION: The UOAA is an association of affiliated, non-profit support groups who are committed to the improvement of the quality of life for people who have or will have an intestinal or urinary diversion. It is dedicated to the provision of information, advocacy and service to and for its affiliated support groups, their members and the intestinal/urinary diversion community at large.

The United Ostomy Associations of America is one of the largest self-help, mutual-aid organizations in North America. It is made up of affiliated support groups (ASGs) throughout the United States, Bermuda, Puerto Rico and Trinidad/Tobago. It also has several “virtual” affiliated Network ASGs.

ITS AFFILIATED SUPPORT GROUPS (ASGs): UOAA’s local ASGs offer ostomy and continent procedure literature, a newsletter and regularly scheduled meetings. Meetings include speakers, who provide relevant information, and time is usually reserved for people to share their experiences of life with an ostomy or continent procedure. UOAA’s Network ASGs offer newsletters and a connection to those people who do not have a local support group via the Internet.

TALK ABOUT: YOUR GROUP'S VISITING PROGRAM

Describe how your members of your ASG can work with any of the other members of the rehabilitation team, including doctors, nurses (both WOCN and staff), hospital discharge planners, family and friends.

Describe your group can provide certified visitors that were trained utilizing the UOAA Visitor Training manual. Point out any positive feedback from those in the medical community that support the significance of having a patient visitor.

Acquaint all members of your medical community with the fact that your ASG visitor program is free and that all volunteer visitors are rehabilitated ostomy/continent procedure patients themselves.

THE VISITOR: Your ASG's visitors have completed the UOAA Visitor Training Program and are qualified to offer a person who has had, or will have ostomy surgery, educational personal support. The visitor serves as a quality of life role model. Nothing will be said to undermine the patient/physician relationship. If true, point out your ASG has trained spouses and significant others as visitors also. Sometimes a trained couple will visit another couple. Family members are also undergoing stress at this time. Also, UOAA's Parents Network, Teen Network, Young Ostomate & Diversion Alliance of America, 30 + Network and GLO Network (Gay and Lesbian Ostomates) offer visitors as well. Many successful visits are accomplished by telephone when circumstances are such that a person-to-person contact is not possible.

THE VISIT: Your ASG can provide support to patients before and after surgery using our trained volunteers. The visitor can describe what life is like with an ostomy or continent procedure and can offer tips about living with a stoma. A preoperative visit offers visible proof of a full life that can be attained after surgery.

A trained member of the ASG's visiting program is matched, as closely as possible, to the patient by type of ostomy or continent diversion, gender, age, marital status, sexual orientation occupation, avocation or other details of compatibility. Your ASG can provide all of its services to anyone in need and the patient does not have to be a member of the ASG to receive these services.

INVOLVING THE MEDICAL COMMUNITY

Invite all members of the medical community to attend your group's meetings. Ask if they would like to be a speaker at a meeting. Provide them with a meeting schedule, copies of your newsletter and invite them to attend your next visitor training session.

CLOSING THE MEDICAL CONTACT VISIT

When talking to a physician, their office nurse, WOC nurse or discharge planner consider an approach similar to the following when you are getting ready to close your presentation:

“I hope you will use our visiting program. We know some patients prefer not to have a visitor for various reasons. Nevertheless, if you feel a patient would benefit by talking to a trained visitor, consider this as any other regimen you might order for your patient. A recommendation from you, a ‘verbal prescription’ for a trained visitor, may convince the patient this kind of help can be most meaningful”.

HOW TO FIND PEOPLE IN THE MEDICAL COMMUNITY

PHYSICIAN REFERRAL SERVICES: Most hospitals have a “physician referral service” and a directory that list the physicians on their staff by specialty. A copy of the directory is usually available from the hospital’s medical staff secretary. They are usually found in the hospital administrative offices.

ASG MEDICAL ADVISORS: Your group’s medical advisors and WOC nurses can give you leads on physicians doing intestinal and urinary tract diversion surgeries and physicians treating patients with ulcerative colitis, Crohn’s Disease, familial polyposis, colon cancer, bladder diseases, etc.

WOUND, OSTOMY CONTINENCE NURSES (WOCN): Any WOC nurse in your local hospital(s) is a potential source to give you specific names of appropriate physicians as well as the names of discharge planners.

SUPPORT GROUP MEMBERS: Gather input from your ASG members about physicians in the community including their own.

UOAA RESOURCES

The United Ostomy Associations of America has an Office Administrator that you can contact via a toll free phone number, e-mail or by postal service. The OA can offer further resources and information that can be of assistance to your ASG in the preparation of your Medical Community presentations.

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P.O.Box 66
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Toll Free #: 1-800-826-0826
e-mail: oa@uoaa.org

The UOAA also offers a website that has a wealth of information including discussion forums and contact links.

Website: www.uoaa.org

Information about subscriptions to UOAA's quarterly publication, *The Phoenix*, is available on the website, or write to *The Phoenix* at P.O. Box 3605, Mission Viejo, CA 92690. Inquire about special rates for nursing professionals