



# How Individual Physicians Market Themselves at Hospitals or Large Private Practice

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[00:00:00] And. Hello again, and thank you for joining me for another episode of the Patient Convert podcast.

[00:00:11] Today, we're going to be talking about a topic that I think is really huge and important. And a lot of our physicians, clients and those doctors in our network reach out about this. I wouldn't call it a problem, but maybe a pain point. What do you think, Justin?

[00:00:26] Yeah, absolutely. I mean, it's it's commonplace, especially in the last two years, more than ever is really how individual physicians, especially when they're coming out of fellowship and residency, can market themselves or it's just kind of two fold. You got the ones in the hospital system side that are concerned about their individual individuality and building their kind of their own legacy and their own patient base, as well as in private practices. The same thing occurs especially as the private practices get larger and feel kind of like any health care systems. Those individual providers or call a lot asking like what should they be doing and how can they market themselves as a physician to not have to rely so much on the hospital system or the private practice to carve out their own space?

[00:01:17] Oh, definitely. And even in the liaison and outreach world, but in the marketing world as well, I just I get a lot of physicians that we connect with or work with that one, that independence or want to drive new patients to either their subspecialty, a new service, or stand out individually in these large private practices and in these hospital systems. And it's something even when I'm doing my referral validation is something I do with my students and my courses where I, I reach out to physicians on a daily basis just to get feedback on certain things that I think provide really valuable insight and resources. And of course, during that conversation, it's a two way street. And I always tell them and Justin knows this, is there anything I can do to help you as far as on a marketing level, if you'd like to pick my brain and get some insight and I think this is like one out of three physicians ask me. What can I do to stand out in my practice or what can I do to stand out in the hospital? We have a hospital website.

[00:02:17] I feel like I'm not being featured. I feel like my patients can't find me. I want them to know that I'm this, you know, X, Y and Z subspecialists with this type of training and fellowship. And this is where I really focus my career. And I just feel like on our practice website, there's no way they can find this information. I'm not able to pull patients digitally. It's all relying on the practice. And sometimes they even feel that on a referral basis, referrals are coming to the practice, but they're not coming to them because there isn't any independence. As a physician, though, they appreciate the support of the hospital and the practice they're not seeing. The direct relationship, so Justin and I started our agency Intrepy Healthcare Marketing., on the basis of physician liaison in physician outreach, marketing and digital marketing, and I think it's really important we talk about how we as a team approach this pain point for some of our clients and our physicians and ways. You guys and you listeners out there can create that. What would you say? Physician independence?

[00:03:18] Yeah, I think to kind of paint the picture that I hear, I'd say probably 10 to 20 percent of the people who reach out to us looking for learning more about what we do and trying to engage a partner with us. Is that kind of same old story, like I mentioned, especially, I think as the physician population has gotten younger, like the thirty five to forty year olds coming out of fellowship, or they're the ones that are becoming partners now. They're the ones that call and is like, I've got five location practice. I just got out of fellowship. I got brought on as the new partner and they put me in a new location that they opened. And I need to figure out because they are all booked for three months out.

But I'm not saying they're not interested in investing in marketing, but I'm dying over here like I need to figure out how to get my second point.

[00:04:05] And so they're like, what do I need to do? And so that's, I think, really, really common. And then obviously to preface the conversation that we're about to have to, I think it's important. Not everything that we talk about either will apply to you or you'll be able to do because of restrictions, whether it's your private practice or your hospital. So you just kind of need to think outside of the box on some of these things on what you can or can't do.

[00:04:29] And obviously always go and ask your health care system those things because this is a common place. So most of them have protocols and procedures and allowances that you need to be aware of before you go out and start spending money on things. But I think that the still universally applies for a lot of our listeners would definitely universally applies.

[00:04:50] But I think another thing to add to that, just you're talking about it's a huge issue. It also may take some personal investment. The other thing to note is just because you have these great ideas and you can bring it to your practice. And like Justin said, they may not be as interested in marketing. Maybe sometimes it's good to kind of as we go through some of these steps and processes and advice that we have for these physicians is to consider what is a five to ten thousand dollar investment. How what is that ROIC look like? Or maybe it's less than that.

[00:05:18] And a lot of a lot less than a lot of these are our our time costs. Right. We're talking about they're free, but they require you, as a physician, be willing to invest time in the process, in the content development, in the relationship development. But they're free to do that. But there's an opportunity cost, which is time. And there's obviously the other side that, as you mentioned, that is actual physical investment.

[00:05:43] And that's just important as our listeners, as we go through these steps to consider, I know some of our clients, they just do these personal investments and it works perfectly fine, falling in line with their private practice or their hospital system. And these are really simple ways they can get that individuality. And Justin's going to talk about, because as we bring up this topic, I can't help but think of a current client that we

have. That's amazing. And some of the fear factors is you also don't want to cannibalize any efforts of your health care system or your private practice digitally by becoming too separated to individual where neither digital online campaign is working because you're now competing with each other. So we want to make sure we address that, too, just in a I think that would be a perfect example.

[00:06:32] Yeah, I think so, too. And I mean, kind of jumping right in. We're going to really focus on six different steps that we recommend or have used to build out personal brands for physicians. And I think it all starts with a very simple but very important step in step one. And that's Google yourself. I think physicians, especially surgeons, tend to be journeymen through their career and they start go residency somewhere, fellowship somewhere, get into a practice or hospital system somewhere. And so even if you're coming straight out of fellowship, more than likely you'd be surprised when you land your first job or you become a partner out of practice when you Google yourself about how much disjointed information is out there and what's unique about the physician ecosystem is that unlike pretty much everybody else, except for maybe attorneys, is there's so many individual listings, platforms out there like Care, Dash and MD, Dotcom and Google, my business and health grades and vitals. And the list goes on and on and on. So that creates a great opportunity for visibility, but also a very large opportunity for fragmentation and mistakes.

[00:07:43] And so I think getting started really step one is simply go and look and get a feel for what your ecosystem looks like as well as your. Mutation. Have you developed a bad reputation potentially over the years, completely unbeknownst to you and completely void of your actual kind of patient care? It could have to do with a bad office staff that you used to have or whatever it may be. But I think baseline go Google yourself because that will tell you a lot. You're Google. My business may be wrong and it could really you could be self-defeating before you even started. And if there are issues. Go about getting them corrected and making sure all of your major listings are speaking the same language, easiest way to do that is leveraging a listings management program with an agency like ourselves is the easiest. You can do it manually, but it's a very laborious task in some of the platforms like HealthGrades and vitals that have been purchased. You simply cannot go log in anymore and claim your profiles and update them.

[00:08:48] And that's an important thing, too, is sometimes the simplest things we just miss. And Googling yourself is definitely something you want to do to start this process. Just like Justin said, there can be mistakes, inconsistencies. And the best part is there's a lot of different platforms and verticals that feature your information to get you out there. But they need to be uniform and they need to be correct even on a physician relationship level. If it says you're at one hospital in one state and you're really in a different or you've made a transfer, you want to make sure all this information is uniform, is up to date so that you're not hurting any kind of potential new patients coming through the door.

[00:09:25] And those are the two simplest things.

[00:09:27] I think the listing side of things, making sure all of that when you Google yourself and then your reputation, if you either don't if you're void of a reputation like you don't have a ton of reviews that needs to be addressed. And, you know, we talk a lot about a less than stellar one, even if it's no fault of your own, you need to put a process in place internally in a workflow and place to start asking patients for reviews again. Probably the easiest is to leverage hyper compliant software to automate those workflows because you've got too much on your plate but still goes down to the same principles. You need to be developing more reviews because listings and reviews off of your website are in your control and probably make up 30 or 40 percent of your local ranking factors. If you want to rank for the who you are, what you do from a surgical standpoint.

[00:10:15] Yeah, and for some of you listening, you may be part of this large health care system or private practice and you're like, well, great information. I'm going to Google myself and now you need to have some services like reviews and listings. This can be an easy conversation. They're not huge investments. It's a really easy and simple fix to help increase your digital footprint. And I think that's important to talk about. It's not a huge project that can be overwhelming or a huge investment at all to just fix these little things and increase these reviews and a great way to communicate with your practice. Yeah, absolutely. And there are individual physician listings, too, which is different. Just to mention health care is a little bit different than some other businesses where doctors can be listed individually.

[00:11:00] Yeah, for sure. And so that's, I think, the number one place to start. And I think kind of rolling in to step two, which I'll lob over to you, because that's kind of right inside of your wheelhouse. And I want you tell me what kind of what step two is.

[00:11:12] Step two is physician outreach and marketing yourself. This is huge. Any time I have a physician come to us and we do this dual marketing approach, they say to me, what do I need to do to get the physicians in my area to refer? Well, you're going to have to invest time here. This is a time this building this is building relationships with your local health care community. Again, you can be part of a large hospital system. And we all know that these large health care systems really encourage referring within. But there's a lot of referral opportunity there. Not only within that can be increased or grown or even just making those relationships, but outside your health care system as well. And my biggest point is you need to market yourself as a physician. I'm not saying create billboards and brochures and commercials is you want to build these authentic relationships with the referring physicians in your community and your health care system and go out there face to face and meet with these physicians. It doesn't have to be complicated. You don't have to schedule all these lunches to do this. It really should be something as simple as walking through the door, introducing yourself and getting straight to the point and why you are there and what you want them to know. It has never failed me in the past. When I market these physicians, I've marketed physicians that are part of huge health care systems that are new to practices, and they just want to get out there so that the community knows we have a new physician on board. This physician can get patients in quickly because we're brand new or this is our subspecialty and these are the capabilities and services we've had and we just haven't had the opportunity to meet face to face.

[00:12:51] I want to talk about your needs and wants with your patients how I as a specialist can meet those needs and wants and the difference it makes when the two physicians are together in a room to talk candidly, openly and medically about what they both need. It just it is so huge for you as a specialist to build these relationships. And I know you run into them in the hospital sometimes, but it really is important to create a marketing plan in which maybe you're doing a half day, once a month, if you can give that up. Full day is obviously wonderful because you're going to be able to see more practices, but it doesn't have to be an overwhelming thing, I tell a lot of my physicians most of the time that we do it, we cold call and by cold call, I mean, I just have them

wear their white coat. I create a marketing plan in advance as far as where we're headed to and give them some detailed history about the relationship currently and target these practices and what we want to talk about. But we're not just scheduling lunches and trying to do these formal meetings. It really should be more candid and laidback and comfortable. And it's really been successful as far as getting through the door and getting in front of physicians. But you learn a whole lot more about your community as well. Not only are you building relationships, but you're learning so much more that you had no idea that this physician did X, Y and Z and that this is actually an issue that you may have a competitive advantage over.

[00:14:15] We actually have a great kind of case study example of you putting kind of this into play is we have a physician. She is an musculoskeletal oncology physician, and she had joined a practice with a very tenured physician that was obviously, as a result, got most of the referral ecosystem because she was much more unknown in the area when it came to people sending referrals. And you put this process straight into practice as a result, even within the first week or two, they started generating new referrals and still to this day are receiving referrals from people simply by getting the physician in the car, going out there and starting to focus on building relationships.

[00:15:02] Oh, absolutely. And she was part of a big hospital system, but there were competitors that were part of a university hospital system. And we found out in that process that one of her biggest competitive advantages was the fact that her department focused so much on the patient engagement themselves. So instead of the competitor, you would be as a patient. Of course, we're talking about oncology. So this is tomorrow. Today we need we need care. And they would be transferred as a patient when you're trying to make these appointments to different departments and these departments are not within the actual practice. So you're not talking to somebody that would be seeing you or the front desk or the health care admin or the OEM or the patient care coordinator. You're talking to individual departments within the hospital. And there was a huge gap in the patient experience. And so when we marketed her, we found that out even going out in the field because we kept getting this question, well, when my patients call, who are they going to communicate with? And we were confidently able to say, you'll be communicating with our patient care coordinator in our practice directly with this physician. So this is somebody who needs the patient, sees

the patient, knows their journey, all their information, and they're not going to be bounced back and forth between different departments in a hospital.

[00:16:16] And that was a huge competitive advantage. But as soon as we got out in that market, even though it was a competitive market, we learned a lot about the competitive advantages that we had. But she learned about how she can build mutual referrals. She learned how she communicated with some of these physicians and she was able to supply her cell phone number, look at different imaging centers. And she really enjoyed the fact that she had a lot to talk about because she was nervous going into it. As far as I just feel so uncomfortable marketing myself. And then you find that she just really blossomed and was able to lighten up and and see all these amazing opportunities that different health care systems had and how they were interested in working with her. And we were up almost immediately and patient referrals and Zakouma referrals. And she talked a lot about metastatic patients as well. And that was something they didn't really understand. So it's definitely a huge part. And you can always utilize tools like LinkedIn as well to connect with physicians.

[00:17:14] Yeah, I think that that's a great point. And I think another important one is a lot of physicians, especially in the hospital ecosystem, kind of sit on their hands. They're like, oh, well, we have a liaison in our health care system. They'll get to me eventually. And whether they like it or not, Liaison's can be really, really stretched thin. They've got so much ground to cover for so many physicians. And so sometimes you either need to personally reach out to That, liaisons., as you know, to set aside individual time, or you need to just go kind of get your walking shoes on, so to speak, and go out there and start building relationships on your own, because without them knowing that, you just you may be getting passed up and it may take a long time for you to get the rounds that you need. So sometimes just being about kind of being aggressive, you get in front of it.

[00:17:59] Absolutely. And number three, that we say to these clients, as we've talked about physician outreach, Googling yourself a big thing is what is your brand? Brand yourself as a specialist, as a physician, and so let's talk a little bit about how these doctors can stand out in these health care systems and practices by branding themselves.

[00:18:19] Yeah, so, I mean, this can go all the way through the whole personal brand eco system like what Kevin and Kevin Pho done. It's a great example of what we've done, like with Dr. Intrepy, who's in fact who's triple board certified, his infectious disease sleep and internal medicine, so they can go all the way to like your own individual brand, like Dr. Releasees called the ID doc, and he is part of a large but he's part of a large infectious disease practice. But he wanted his own platform to be able to talk about what he was really passionate about his patients and what his and his patients wanted to be able to connect with him. So we built him out a blog where he blogs. He's got very, very large reach on social media. And it's been a twofold thing. He gets to kind of create a legacy for himself in this space and become a true thought leader in some of these special things that he treats.

[00:19:12] On the other side, patients kind of get directly to connect with him. And now as a result, he's got patients coming in from all over the world. So kind of backing up again. This is really the one I was alluding to that you need to check with what your health care system or your private practice allows. And there's a fine line between it. But if you can and you feel like you're not getting what you need out of the practice, an individual website may be ideal for you because it allows you a lot more flexibility. But even if it's not going after your treatments, it could allow you to develop a blog and talk about the things that you're really patient resources.

[00:19:45] You can become part of a search factor in which patients are searching some of the common user symptoms, conditions. And instead of having a doctor at Google, they can actually find a specialist in your area that's really diving deep into this, whether it's video, blog, resources, downloads, checklists, whatever it may be, it features you as the physician, your specialty, your subspecialty, and you're talking exactly about what your patients are talking about. So it's giving you a brand, but at the same time, it's also providing trust in those patients. That could be your potential new patients for sure.

[00:20:20] Yeah, and it's it's a big ocean, the side of branding yourself. So you really definitely want to sit down and see a what can I do?

[00:20:27] Like, what am I legally allowed to do in my situation? But what do I want out of it? Obviously, the bigger the thing like the doctor, for example, that I gave, it's a lot that he was willing to take on. I mean, you because you're writing blogs, you're I mean,

you're connecting with patients. I mean, it's a lot. So you kind of have to see what's on my plate, what do I want out of it? What's my goal out of the personal branding and what can I do?

[00:20:48] Well, and like Justin said, it's an investment of time because it needs to come from the specialist. You can have a team help you as far as getting things done. But not only is an investment of time, I'm going to say this is a marketer. It's going to be an investment as well. It doesn't have to be a huge investment. But you do want your website if you decide to take this route to be optimized correctly. I have a dear friend who had an amazing, amazing blog that I personally used because I'm pregnant and I feel like he answered all my questions all the time that I had. That was just incredible. And I loved reading. Every week he had this great new topic and it was just so amazing. But he needed help, too. He talked to us about I just can't get it visible online. And that was because he needed some structures in a marketing place set up. And it's really important that he was investing the time. It was time to also invest in some of the marketing experts so that we can make sure if you're going to spend all this time writing these blogs, doing these videos, addressing these patients, featuring your specialty, that it is getting seen. And that's another part of it.

[00:21:51] Yeah, I completely agree. And that kind of is a good Segway into if you've gone the personal brand route or maybe you haven't and you're going to stay inside of your practice or health care ecosystem. One of the biggest things that you can do, and it's becoming so much easier to do it thanks to technology is thought leadership and the development of thought leadership as a physician. And I think what's great is twofold is technology has made it a lot easier to produce video and connect with social media. It's all sitting in your pocket on your phone. But the other side is now more than ever. Patients are seeking out that information. If it was ten years ago, it may have fallen on deaf ears because patients weren't that in tune with their health care journey and now they are. So now it doesn't matter what subspecialty you're and there are people out there listening again. Going back to Dr. Pugliesi, if an infectious disease doctor talking about lupus and immunoglobulin deficiencies can grow a massive platform, so can you. And because, like, it was the first time ever that there was a physician out there talking about covid and Steve, it is a lifetime journey for these patients.

[00:23:01] And so when they found out there is a physician out here that only cares what is an ambassador for us and telling our stories and telling. Talking about treatment protocols and things that he's trying to help these patients and talk about people that are on fire from an ambassador standpoint, so I think that that can cause people to be hesitant.

[00:23:20] Either markets too crowded, I'm an orthopedic surgeon or I'm too specialized. Nobody's listening. It's not the case.

[00:23:26] Definitely not. And just in front of a really good point, Dr. Google is a real thing and patients are looking for this information. But when you find these resources that are provided by the specialists themselves, I tend to find myself more intrigued, more engaged and interested, because we're not just running into the C word. Every time we look something up, we're able to dive in and get more of a physician's viewpoint. And if you right now listening, I bet as soon as we talked about this, you had physicians on your mind that you're like, oh, somebody who's really featured themselves by just creating content and becoming a thought leader about some of the simplest things and doing it consistently. And that's really the key with content like we're talking about being a thought leader. The investment here isn't as much of a financial one as it is consistency and time to be a thought leader need to be consistent. Don't worry about cramming so much information into a video that you now have a five, six, 10 minute video nobody's going to watch. This is about creating consistent content, answering the right questions. And we want to hear from you guys as the physicians.

[00:24:38] And I think another thing that's important when you go down this journey is twofold is obviously consider what you want out of it. Is it about connecting with colleagues or is it about becoming like from a peer to peer standpoint, like a published in journals and striking more? Or is it about connecting with patients? Like, what we've talked about typically is a good point because that will decide what platforms you need to be on. Is it Facebook or is it LinkedIn, what medium you need to use as a video or is it blogs or is it podcasts? But I think it's keeping that in mind because that'll drive the platforms. But I think on the other side, it's important to consider you physicians are some of the busiest and most burned out and overworked people in society. So you need to find a medium that works for you. And if it's video, if it's blogs, if it's podcasts is I think people try to fit a square peg into a round hole and you've got to go the way that

you actually participate and scale it. So if podcasts fit your lifestyle and you feel like you can sit at home and decompress and record podcasts and make podcasts work for you, if it's video, make video work for you. And I think that's a big thing to keep in mind, is figure out what you want out of it. That'll lead you to where your audience is and what platforms need to be on. And then think about what medium works best for you.

[00:25:56] And if video works in your even day to day, it doesn't have to be afterwork investment. I mean, Dr. Pimpled Popper, Dr. Sandra Lee created her whole career by just picking up the cell phone and filming these tiny procedures.

[00:26:14] And now she has a TV show out of it and she makes more money off of her.

[00:26:17] You did not hire this huge video crew to come in to talk about what she did. She just knew that what she was best at were these procedures and how she engaged with these patients. And she was educating at the same time, but intriguing others and just filming these little surgeries and procedures and services. And then on top of that, she was adding her thought points as a physician, describing what was going on. And it worked.

[00:26:43] And now she gets two to five million views on these. Are you saying you don't have to be a dermatologist?

[00:26:48] Of course it's any any specialty. I mean, obviously, we're not going to record an eight hour surgery and post that up, but there's lots of ways you can feature yourself in your day to day, given that you have the appropriate permission from your patients and you have everything in line as far as protecting identity that you can film and show. And that's a great way to create consistency as well. And you can work with a team that can help you edit it and add those little things. But a cell phone goes a really long way.

[00:27:17] Yeah. And I think that that's important to remember with the thought leadership side is follow the kiss rule is keep it simple. Stupid is try to again going back to the choosing. The medium is choosing to not overcomplicate it is video or make it so expensive you can't be consistent. Exactly. So I think when you're thinking about getting like in the video in particular that we're talking about or even podcast with audio is like with video. The big thing that matters the most is your audio and your lighting. Just

invest in a good lapel mic or something. Just make sure you do a Boomie depending on your situation. Do something, invest in a decent mix, you have good audio and then at least have a light or something. So you have decent lighting and if you accomplish those two things, you can meet in the middle road of quantity and quality. And that's what's really going to be important and so kind of going into the next thing that I think is really important, kind of a step five is. Hosting webinars and Facebook lives, and this is kind of piggybacking off of what we were just talking about as far as creating thought leadership, but I wanted to bring it up kind of individually because we've seen it work with great success for providers in larger practices. For instance, if we have an orthopedic practice that they have over 50 surgeons and one of the shoulder surgeons, we held a Facebook live. We got in less than a week's time, 50 potential patients to register for it. And you're talking about frozen shoulder and how you treat it. Yeah. And as a result on the Facebook Live, somebody booked and they got two more as a result after that. Now, that are why we spent like 50 bucks on advertising the Facebook Live and the Helinet, thousands of dollars worth of the surgery time. And he built a lot more credibility in the community as a shoulder specialist.

[00:29:11] When you also have a great way of when I love these Facebook lives and webinars is because you're going to reach your patients, you're going to become a thought leader, but you're going to reach other physicians to talk about physician outreach is part of the strategy. You're going to have other specialists join. You're going to have other health care organizations and admins and ways to collaborate. So I also think it's great. I mean, I work with LESNES to how many LESNES are joining these webinars and learning so much about either the doctors they represent or doctors. They work it, too. And and you just when do you ever get a physician's time for 30 minutes to talk about these things? You just don't know. These webinars and lives are just such a great way to be personal, connect professional.

[00:29:54] Yeah. And I think that leads us right into what you're just alluding to, to kind of our final step, and that is leaning on collaboration. Is all of these other things we've talked about open the door to the ability to collaborate with other physicians with a like mind that are wanting to do the same, trying to do the same, and they're more than happy to come on your podcast and vice versa so you can get into their network and their reach that they've developed.

[00:30:17] There's so many, like there's a physician that does more vasectomies than any one in Arizona, and he's built a massive community of other urologists on Facebook because that's what he's really passionate about, is peer to peer connection and helping urologists be extremely successful using the same processes that have made him so incredibly successful.

[00:30:36] And it's a private community. So he knows he's just religious. They love that. That's just urologists in there. And collaborating with other professionals in your space or other physicians is such a great way to not only get your name out there, get featured, but throw a dog a bone. I like to say it's a great way to say, hey, I love what you're doing. I'm talking about this. Let's talk about that. And you can work together. And it's a great way to build that referral relationship as well. So collaboration is huge and it can be with health care systems, organizations, even medical device companies, or it can be with other physicians, other practices, other specialists or specialists and colleagues in your area where you guys are just going at it with this information and using both your networks. And that's a big thing, too. We're talking about visibility here. Collaboration is wonderful and increasing your network because you're going to be using their network and you're going to be using your network. And now we've just increased by tenfold.

[00:31:34] Yeah, I completely agree. And and while we're kind of wrapping up, I just want to because we've covered so much in this time that's so critical. So the steps that we've talked about is step one, Google yourself, figure out what you're seeing ecosystem looks like.

[00:31:54] Physician outreach, make sure you're getting out in your local community and meeting with referring providers, providers within your own health care system and investing that time in face to face.

[00:32:02] Number three, brand yourself. And that can come in many shapes and forms. If you can do an individual website, if you can potentially create your own blog. But think about what you want your brand to look like.

[00:32:14] A long term step four is thought leadership. Invest in content, utilize platforms like social media, start with video, write those blogs and get to it by investing time featuring yourself as the physician, the specialist and reaching new patients.

[00:32:30] Step five is host webinars, Facebook lives, things that are interactive in nature and can allow patients to kind of be in a waiting room with you and hear your expertise.

[00:32:40] And step six is collaborate and network yourself, work with other physicians, specialists and health care organizations in creating content and reaching new audiences.

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