

Amplify Your Influence™ With a Well-Organized Campaign

The foundation of your Physician Referral Program is valuable contact information. You'll learn to easily identify, prioritize and track hearing health partnership progress with your medical colleagues. The cornerstone of that process is our simple Referral Partner Summary. By design, our computer based interactive form can also be printed out for placement in the customized organizational binder we provide.

To benefit from this important form, you need Adobe Acrobat 7.0 or higher. Upon receipt of your Referral Partner Summary form, duplicate it and save a secure copy to your computer/network. Then, the original copy should be saved in the Amplify Your Influence™ folder you set up for your Physician Referral Program.

NOTE: Each time you fill out a form for an Active or Targeted Physician or practice, you can easily "Save As" with a specified file name for that physician or practice. We know you're busy, so this database input process is quick and easy.

✓ **Organize**

Referral Partner Summary

Practice Name
Referral Status: Active Targeted
Specialty
Referring Since
Name
Originally Introduced By
Approximate # Total Referrals
Average # Monthly Referrals
Primary Contact/Title
Physician Name(s) list individually below:
Email(s) list individually below:
Address
Date Contacted
Meeting Set: Yes No
Meeting Date: Time
Meeting Preparation Steps enter information below:
Thank-You Sent: Yes No
Follow-Up Date
Follow-Up Notes enter information below:
New Patients
Amplify Your Influence

Don't Agonize



**The next page takes
a closer look @ the
form...**