

****DR. Sample /UNITED FOOD BANKS****

Hello, this is Joe calling with Dr. Sample's office; She's a chiropractor here in the area, at (**Mill Ave. & Baseline Rd.**). She would like to invite you to receive a Consultation, Full spinal exam, and any necessary X-RAYS at No Out Of Pocket cost to you. All YOU need to do is bring in a canned food item to help out your Local Food Bank.

- **LET ME ASK YOU, HAVE YOU EVER BEEN TO A CHIROPRACTOR? *IF YES - WHEN WAS LAST VISIT? (*IF RECENT (within the last 3 months) - ARE YOU UNDER CARE?) *WAS IT A LOCAL CHIROPRACTOR? *WHAT DOCTOR? *WAS IT A GOOD EXPERIENCE?**
- **DO YOU EVER EXPERIENCE ANY KIND OF BACK PAIN, NECK PAIN, OR HEADACHES, MAYBE FROM WORK, STRESS OR EVEN EXERCISE? *IF YES—**
 - ✓ **WHERE IS THE PAIN LOCATED?**
 - ✓ **WHEN DOES IT OCCUR, DO YOU WAKE UP WITH THE PAIN ..., DOES IT BOTHER YOU AT WORK OR DO YOU NOTICE IT IN THE EVENINGS?**
 - ✓ **HOW OFTEN DOES IT BOTHER YOU, IS THAT DAILY OR A FEW TIMES PER WEEK?**
 - ✓ **HOW LONG HAS IT BEEN GOING ON, IS IT SOMETHING THAT JUST RECENTLY STARTED OR HAVE YOU BEEN EXPERIENCING IT FOR A LONG TIME?**
 - ✓ **WHEN YOU GET THAT PAIN IN YOUR _____, DOES IT EVER TRAVEL TO YOUR...**
- **DO YOU EXPERIENCE ANY OTHER KIND OF PAIN LIKE ARM PAIN, LEG PAIN, OR SHOULDER PAIN? *IF YES—**
 - ✓ **WHERE IS THE PAIN LOCATED?**
 - ✓ **WHEN DOES IT OCCUR, DO YOU WAKE UP WITH THE PAIN ..., DOES IT BOTHER YOU AT WORK OR DO YOU NOTICE IT IN THE EVENINGS?**
 - ✓ **HOW OFTEN DOES IT BOTHER YOU, IS THAT DAILY OR A FEW TIMES PER WEEK?**
 - ✓ **HOW LONG HAS IT BEEN GOING ON, IS IT SOMETHING THAT JUST RECENTLY STARTED OR HAVE YOU BEEN EXPERIENCING IT FOR A LONG TIME?**
- **IN THE PAST 2 YEARS, HAVE YOU BEEN INVOLVED IN AN AUTO ACCIDENT?**

***IF YES—WHEN WERE YOU INVOLVED IN THAT ACCIDENT? WHAT HAPPENED, DID YOU GET REARENDED OR DID SOMEONE HIT YOU.....? IS THERE AN OPEN CASE? ***

****IF NO TO ALL QUESTIONS—Sounds like you're doing fine. Is there anyone you know of who may have pain or be in need of a chiropractor that we could help? ****
- **ARE YOU CURRENTLY ON MEDICAID OR MEDICARE? *IF YES - - "O.K. THEN YOUR MEDICAL NEEDS ARE TAKEN CARE OF, THANK YOU FOR YOUR TIME, HAVE A PLEASANT DAY/EVE. GOODBYE."**

In case you missed it I'm _____, what's your first name? Well (NAME), from what we've talked about, **{REVIEW REASONS TO COME IN – ALL THE INFO GATHERED IN THE QUESTIONS} you can definitely benefit from this offer.** I'd like to schedule a time convenient for you to come in and receive your complimentary services, the consultation, spinal exam, and x-rays. WE have a variety of appointment times, AND we are right in the area.

****LOOKING AT YOUR SCHEDULE FOR TODAY, I HAVE APPOINTMENTS AVAILABLE BETWEEN (time) and (time). WHAT WOULD BE BEST FOR YOU TO COME IN?**