

PREMIUM PRACTICE TODAY

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TODAY

LIGHTS, CAMERA, ACTION

**When physicians are in the spotlight,
the show must go on, but patients come first.**

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Premium Practice Today is a monthly feature section in **CRST** providing articles and resources to assist surgeons and their staff in the pursuit of premium practice development to facilitate exceptional experiences for patients and business success.

Lights, Camera, Action

When physicians are in the spotlight, the show must go on, but patients come first.

They make it look so easy. I am not referring to great surgeons but great television personalities. Watch the news, a sitcom, sporting event, or anything else that comes across your television set and you will see professionals at work. This month's column showcases doctors from multiple specialties and describes their experiences being in front of the camera. Without question, media exposure can build awareness and credibility for your practice while educating the public about a new technique or procedure. As you will read from your colleagues, however, the opposite can also happen both personally and professionally, as celebrity status comes with a price (just watch TMZ and you will understand what I mean here).

I have had the privilege of helping many physicians become more "media savvy," and the comments that follow offer a number of solid tips that will help you both in front of the camera and in front of your patient.

—Section Editor Shareef Mahdavi

Every weekday afternoon, when television viewers tune in to the nationally syndicated program *The Doctors*, they get a virtual house call from specialists in a variety of fields. When ocular health is on the docket, Southern California cataract and refractive surgeons Jonathan Ramin Pirnazar, Brian Boxer Wachler, and Robert Maloney are among the ophthalmologists called on by the show's producers.


Dr. Maloney was once a regular on the now-defunct weekly television show *Extreme Makeover*. His role was to perform laser eye surgery on appropriate candidates who also underwent cosmetic surgery and other interventions to help them attain

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self-improvement goals. Dr. Boxer Wachler has been on *The Doctors* several times and is a staple on news programs in California when a vision expert is needed. He also gained some public recognition by successfully performing kerataconous surgery on Olympic bobsled gold medal winner Steven Holcomb. In contrast, Dr. Pirnazar is a media fledgling. He has appeared on *The Doctors* just once so far after coming to the producers' attention by publicizing that his practice was the first in California to have the LenSx Laser (Alcon Laboratories, Inc.). In addition, he was once interviewed on a local news program about surgery that he performed to restore sight to a woman who had sustained an ocular injury in her youth.



Although the three surgeons mentioned live and work relatively close to Tinsel Town, proximity to Hollywood is not a prerequisite for being a doctor in real life and on television.  Ophthalmologist Alice T.


Epitropoulos of Columbus, Ohio is no stranger to the camera. A surgeon with The Eye Center of Columbus and an assistant clinical professor at

Ohio State University, Dr. Epitropoulos is also a medical correspondent for the local NBC affiliate, WCMH NBC 4. She explains that, after viewers became familiar with her because she had often given interviews or otherwise participated in local news programs, NBC 4 producers invited her to serve as a medical correspondent on their health team. She says the opportunity has significantly benefited her, her practice, and the viewing audience. "Many times, public awareness offers a way to control a disease before it occurs," explains Dr. Epitropoulos. "I had the chance to discuss and educate listeners on a wide variety of topics that had to do with the eye, including glaucoma, macular degeneration, eye safety, and the latest technology in cataract and refractive surgery. Being a medical correspondent has allowed me the opportunity to help educate the public in a simple and effective way that in the long term helps to prevent health problems in the future."



The visibility probably helps The Eye Center of Columbus as well, she says. "Many of my patients saw the segments and told me they enjoyed watching them, so I think the visibility indirectly benefits my practice," Dr. Epitropoulos remarks. "I also believe that a medical correspondent is viewed as a credible expert, which is a bonus, but I see this more as a public service to the community than as a marketing tool."

Some physicians put themselves in the public eye as news correspondents or guests on radio or news shows as a public service to promote awareness about a specialty

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or a disease state. For instance, long before appearing on *The Doctors*,  Dr. Boxer Wachler was featured on ABC, NBC, and CNN news programs. “I’ve always been an advocate for patient education, and these interviews are an extension of that,” he tells *Premium Practice Today*.



Others in health care make media appearances to strengthen their practice’s brand.  Manhattan dentist Catrise Austin engages the services of a publicist who helped brand her as “The Dentist to the Stars.” A few years after starting in private practice, Dr. Austin authored the book,  *5 Steps to the Hollywood A-List Smile: How the Stars Get That Perfect Smile and How You Can Too!* “I estimate that my practice [volume] increased by approximately 25% as a result of releasing my book,” says Dr. Austin. “The book further branded me as an expert in my field, and it led to major media exposure, including a teeth-whitening segment on *The Today Show*.” Another bonus, she says, is that people have a tendency to trust those whom they see in the media and those who have been published. “As a result, I get to reach audiences that I would have never had access to without the opportunities that this book and media exposure have given me,” Dr. Austin comments. “In turn, I get to keep them healthier and change their lives by improving their smiles.”

A ROSE BY ANY OTHER NAME

None of the physicians interviewed for this article considers him- or herself a celebrity. It is clear, however, that the media likes some physicians more than others, whether it is because they have a face that the camera favors, because they have a way with a sound bite, or simply because they are ready, willing, and able to appear when asked. It is also clear that physicians’ humility does not prevent the public from viewing them as celebrities.




“Celebrity” physicians are nothing new. Iconic pediatrician Dr. Spock was a household name long before reality television shows thrust physicians into the spotlight along with their work-in-progress patients. Today, the public’s familiarity with a physician because of what he or she says on television or radio versus his or her performance in the OR or research laboratory is much more pervasive than it once was.

Angela O’Mara is the president and founder of  The Professional Image, Inc., a

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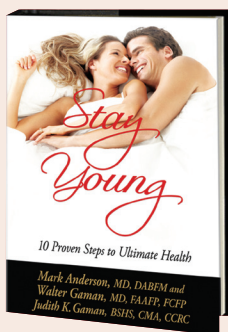
BALANCING ACT

Texas physicians  [Mark Anderson](#) and  [Walter Gaman](#) are cohosts of the nationally syndicated radio program The Staying Young Show. They have also published two books and are working on a third. Often called on as experts in preventive medicine, they provide frequent radio, television, and print interviews. They remain active in practice as partners at  [Executive Medicine of Texas](#), and patients fly from all over the world for consultations with them.



Premium Practice Today: What are the positive and negative effects of media attention?


Mark Anderson: Being in the spotlight has helped grow the practice and attract patients from all corners of the world. The radio show has also made us better communicators with our patients, because it forces us to speak in a precise way and get to the point quickly. On the negative side, media takes a great deal of time. It adds to the “to-do” list, often with fast-approaching deadlines.



PPT: How has being in the spotlight affected the practice?

Walter Gaman: The growth of the practice has been very positive. Media interviews often are requested with very little notice. As much as we try not to make patients wait or reschedule, it happens. It is hard to tell a patient they need to move their appointment because the media needs our comments today. Sometimes, we also have to turn the media down because a patient’s needs come first. It is a fine line.

PPT: What are some pearls you can share with physicians who aspire to broadening their reach through media participation?

MA: Radio and television are not for everyone. I think any physician who is seriously considering media should first get an honest opinion from a professional. We both went through training at the Texas Actors Studio with producer Richard Perrin to learn how to speak and look on camera as well as how to talk in sound bites, and we continue with coaching from  [TrendSide PR](#). Be sure you understand the intent of the interview. Media, especially television, can change the context of the interview through the editing process. Make sure your message remains intact or at least in context. As far as writing a book, beware of self-publishing companies that want you to spend thousands of dollars. Understand how you want to use a new book for marketing, and then weigh the return on investment, including your investment of time.

WG: There is one scam I would like to warn others about. Luckily, we did not fall for this. A producer

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will call you and say they are producing a show with medical experts and a celebrity. All you have to cover is the cost of production, which is about \$12,000. Remember, you should never pay someone to interview you.

PPT: Does the time you spend on your radio show and writing books and being interviewed get in the way of practicing medicine?

MA: No, at Executive Medicine of Texas, we pride ourselves on the highest level of service. Each of our patients carries our cell phone numbers with them for emergencies. It is our job to keep up with the latest research and offer them the best medical knowledge available. Although the insurance companies control traditional primary care offices which are striving to make ends meet with declining reimbursements, Executive Medicine of Texas keeps the relationship between the patient and the doctor. [The practice does not accept insurance, but it does provide receipts for patients to submit to insurers for reimbursement.] This enables us to spend as much time as we need. Patients appreciate that, so they return year after year. They also know that, if they get ill at 3:00 am, they can always reach us.

Mark Anderson and Walter Gaman may be reached through Sandy Peddicord at (515) 554-6934; sandy@trendsidepr.com.


public relations firm based in Irvine, California, that specializes in promoting physicians to the media. She says that the doctor who is best suited to television and media is “one who has been in practice for several years; has a well-rounded practice; is ready with a practice that looks good on television; is comfortable with discussing his or her specialty, techniques, and procedures when a camera is pointed his or her way; and is generally progressive as a physician.”

According to Ms. O'Mara, most of her physician clients say that, as a result of their media exposure, their practices have grown and benefited financially. She concedes that there is a downside as well. “Sometimes, doctors become vulnerable [with regard to] liability issues,” she notes. “They can become the target of someone trying to take advantage of their newfound celebrity status, or in some cases, public attention results in an over-the-top confidence boost. We had a client several years ago who was on so many different television shows that the fame actually went to his head, and his ego overwhelmed his sensibilities. His wife actually asked our agency to go on a hiatus from him for a few months until she was able to help him get grounded again. We did, of course, and he came back to us as a far happier man and one with a better perspective.”

Given the heightened competition in the medical world, physicians are increasingly


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finding that the power of the press can help them build a practice faster, according to Ms. O'Mara.  Dr. Pirnazar says that, although marketing did not motivate him to appear on *The Doctors*, after his appearance, his phone rang off the hook with inquiries from people across the country interested in scheduling a consultation with him for cataract surgery. "When the program was rebroadcast, we got a whole second wave of interest," he says. There is no denying that being on television—especially on a program that is widely viewed—lends credibility, according to Dr. Pirnazar. "When we include the phrase, 'as seen on *The Doctors*,' in our practice['s] marketing materials, it really resonates with the public," he adds.

Dr. Austin says finding a way to distinguish oneself is crucial to a health care provider in a competitive field in a cutthroat market. "In my building alone, there are at least 12 dentists," she says. "What makes me different is that I am [labeled] as an expert by the media. People believe and trust experts, and if the media thinks you are credible enough to be on television, then consumers automatically believe that you are credible enough to be their health care provider. No type of paid advertising can give you this same credibility."


BE CAREFUL OUT THERE


Elizabeth Chabner Thompson, MD, MPH, is a Johns Hopkins and Harvard System-trained New York-based, radiation oncologist. She also worked with plastic surgeons and soon became an entrepreneur, developing products in an uncharted space with the BFFL Bag recovery kit for women after mastectomy. Years before, she worked as a guest correspondent for medical segments on the local *CBS Morning News*. Dr. Chabner Thompson cared for hundreds of women undergoing reconstructive breast surgery as well as cosmetic procedures. Patients needed recovery advice, and physicians appreciated having a physician who was also a patient giving the "tip sheet" for recovery. She founded the  Best Friends for Life Company, which develops products relevant to aftercare for cancer survivors—surgery, chemotherapy, and radiation. Dr. Chabner Thompson says that clarity, patience, and camera sense are essential for media involvement. "I have learned that pitching to the media is a long, arduous task full of rejection, but when the producers want you, things move fast," she notes. "Always be prepared with your hair cut, nails groomed, and a smiling face." It is also not a bad idea to get some media training before stepping into the spotlight. "You

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need to know that nothing is truly off the record and [that you should] never comment on politics, religion, or money issues,” Dr. Chabner Thompson stresses. “Reporters have an agenda; they will make content fit, even if it’s not what you intended to convey, and once you say it, they have the right to use it.”



 Sonu S. Ahluwalia, MD, is the clinical chief of the Division of Orthopedic Surgery at Cedars Sinai Medical Center in Los Angeles. He is a weekly contributor to the daily morning show *Good Day LA*, a medical correspondent for *Entertainment Tonight* and *Fox News*, and the host of a show in India

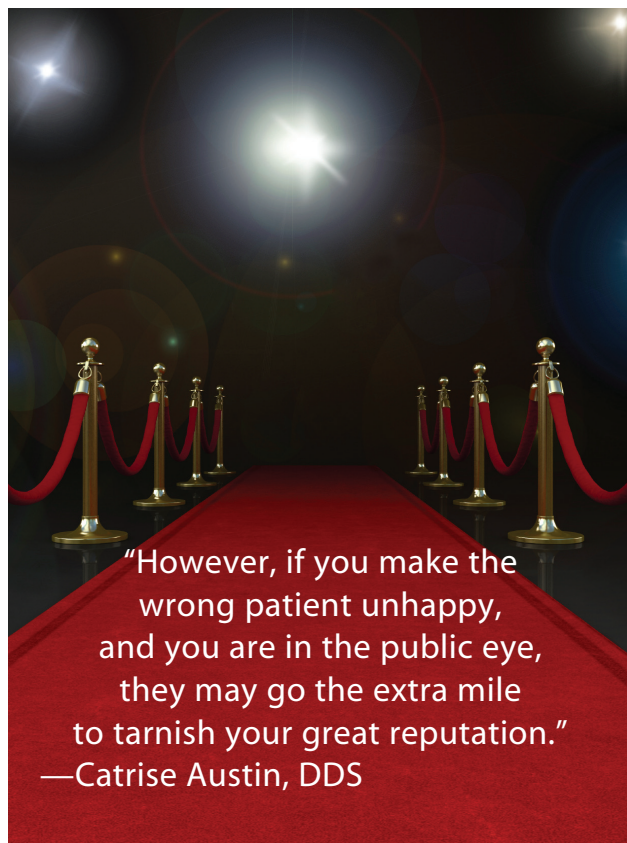
called  *All Is Well With Dr. Ahluwalia* that airs in multiple countries worldwide. Dr. Ahluwalia says he became involved in media initiatives because he wanted to have relevance to a larger group of people. “My talent lies in the ability to break down something complex into simple-to-understand material that a layperson can easily relate to, and I thoroughly enjoy this,” he explains. “I believe educating people gives them the tool to be responsible for their own and their family’s health.”

Dr. Ahluwalia says attaining this larger forum comes with perks and drawbacks. “The positive [effect] is that my patients are psyched to see me on television,” he comments. “Suddenly, I seem very smart to them! Shooting schedules are very unpredictable, however, and are often last minute, especially if you are reporting on current events in medicine, so you need to have flexibility in your schedule, and it does take time away from your practice. Fortunately, liability has not been an issue so far.” Dr. Ahluwalia recommends staying away from anyone who offers to put you on television for a fee and doing your homework so you know what you are getting into. “It’s not unusual to not get paid, but if it is a legitimate opportunity, you should never have to pay for an appearance,” he says. “Also, do some research. Find out what this person has done before. Call the station that they purport to represent. If something seems too good to be true, it probably is.”

Dr. Austin cautions that public recognition comes with public scrutiny. “People who are perceived as local or national ‘celebrities’ and are in the public eye put themselves at risk,” she points out. “If you make your patients happy, you will be highly praised, and your practice will grow with new clients and patient referrals in leaps and bounds. However, if you make the wrong patient unhappy, and you are in the public eye, they


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"However, if you make the wrong patient unhappy, and you are in the public eye, they may go the extra mile to tarnish your great reputation."
—Catrise Austin, DDS

may go the extra mile to tarnish your great reputation."

With respect to legal concerns related to participation in media initiatives, Washington, DC, attorney  Alan Reider, Esq., whose legal career revolves around advising physicians in general and ophthalmologists in particular, says, "In the pharmaceutical and device industries, companies are always looking for key opinion leaders with whom to consult. Often, those [key opinion leaders] are also in a position to recommend the product or device to their colleagues and to use the product in their practice. Because of this, there is the potential application of the fraud and abuse laws to these arrangements, with respect to the amount of payment

for services rendered. As a result, there is the need to be sure that payments to these physicians reflect fair market value for their services. But, how do you value the fair market value of the services of a 'celebrity' physician? I had one case where a 'celebrity' physician decided to leave his practice to help a hospital establish a new service. The hospital applied its standard fair market value survey analysis to this physician, which resulted in a proposed compensation that was fine for a typical practicing physician but extremely low compared to the amount that the celebrity physician generated doing other work. The deal almost collapsed because of the hospital's strict standard. I had to work to convince them that the normal fair market value standards that apply to most physicians cannot reasonably be applied to a 'celebrity' physician." ■

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