

50 Reel Hooks for Doctors

Opening lines grouped by purpose, with notes that keep every script accurate and compliant

Fill the [placeholders] with your specialty and a real patient question, and say each hook in your own words. Every script built on these hooks needs clinical review, written consent for any patient reference, and a check against NMC, ASCI and Drugs and Magic Remedies Act rules; this guide is not legal advice. Hooks are examples to adapt, not guaranteed performers.

Patient questions

The safest and strongest hooks start with a question patients already ask you. Record the real question from OPD or WhatsApp, then answer it in the next 20 seconds.

- 1 "The question I get asked most in OPD about [condition] is this."
- 2 "Seeing a [specialist] for the first time? Ask these three questions."
- 3 "'Doctor, will I need surgery?' Here is how I actually answer that."
- 4 "Patients are often too shy to ask me this about [topic]. So I will answer it here."
- 5 "What I wish every patient knew before their first [test or procedure] appointment."
- 6 "Is [common test] painful? Here is what it actually feels like, step by step."
- 7 "Your report says [common term]. Here is what that word means, in plain language."
- 8 "Three things to bring to your [specialty] appointment so the visit is not wasted."

Myth vs fact

Myth-busting works because it creates tension. It also carries the most risk. State the myth the way patients say it, correct it in plain words, and have every script clinically reviewed.

- 9 "'[Myth, in the patient's words].' I hear this every week. Here is what I tell patients."
- 10 "Your relatives mean well, but this advice about [condition] needs a second look."
- 11 "Myth or fact: [statement]? Let us check."
- 12 "A WhatsApp forward about [topic] is doing the rounds. Here is what a [specialist] thinks."
- 13 "Three things about [condition] that sound true but are not quite right."
- 14 "Before you try that home remedy for [symptom], watch this."
- 15 "'It is just age, nothing can be done.' Is that really true for [condition]?"
- 16 "The most common thing people get wrong about [medicine or test], explained in 30 seconds."

When to see a doctor

These hooks signpost; they never diagnose. Always end with who to see and, for emergency symptoms, to call your local emergency number or go to the nearest emergency department.

- 17 "When is [symptom] worth a doctor's visit? A simple way to think about it."
- 18 "[Symptom] with [symptom]? Do not wait for an appointment. Here is what to do."
- 19 "Most [symptom] is harmless. These are the times it is not."
- 20 "Parents: these are the times a child's fever needs a doctor today."
- 21 "If you have been ignoring [symptom] for weeks, this one is for you."
- 22 "Learn these warning signs of [emergency condition] and share them with your parents."

Procedure and process explainers

Fear of the unknown stops people booking. Walk them through the process honestly, including recovery, without promising outcomes.

- 23 "What actually happens on the day of your [procedure], from the gate to discharge."
- 24 "This is what a [procedure] room looks like, and what each machine does."
- 25 "How long does recovery from [procedure] really take? It depends on these things."
- 26 "Here is what happens during a [test], in under a minute."
- 27 "Why your doctor asks you not to eat before [procedure]."
- 28 "Nervous about [procedure]? Let me walk you through it."
- 29 "What 'day care' surgery means, and who it may suit."

Cost, insurance and logistics

Cost and paperwork questions are high-intent and under-served. Explain what drives cost and how to plan; do not quote prices you cannot honour.

- 30 "What decides the cost of [procedure]? It is not just the surgeon's fee."
- 31 "Planning a cashless claim for [procedure]? Do these things before admission."
- 32 "Why two hospitals can quote different amounts for the same [procedure]."
- 33 "How to get a proper written estimate for [procedure] before you commit."
- 34 "Coming from another city for treatment? Plan these four things first."
- 35 "The paperwork most patients forget on the day of admission."

Prevention and everyday habits

Practical, low-risk and shareable. Keep advice general and safe for most people, and point to a doctor for anything personal.

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| 36 | "One habit I ask every [patient group] to start this week." |
| 37 | "Working at a desk all day? Your [body part] needs this." |
| 38 | "Monsoon is here. Three precautions I share with every family." |
| 39 | "Festive season is coming. How to enjoy it if you live with [condition]." |
| 40 | "Which check-ups to discuss with your doctor once you turn [age]." |
| 41 | "What I do every day, as a [specialist], to look after my own [organ]." |

Behind the scenes and the human side

People choose doctors they feel they know. Show the work and the team, never a patient without written consent.

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| 42 | "A day in my OPD, in 30 seconds." |
| 43 | "What happens to your blood sample after it leaves your arm." |
| 44 | "Meet the people you never see who keep the [unit] running at night." |
| 45 | "Why I became a [specialist]." |
| 46 | "The part of my job patients never see." |

Awareness days and seasonal moments

Tie these to verified dates only, and give viewers one specific thing to do.

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| 47 | "It is [awareness day]. Here is one thing worth doing today." |
| 48 | "[Awareness day] is more than a hashtag. Here is a check worth discussing with your doctor this month." |
| 49 | "This [awareness day], send this to someone who needs to hear it." |
| 50 | "[Season] is when we see more [problem] in OPD. Here is how to be ready." |

Free to use and adapt inside your organisation. Not legal or clinical advice. More tools at gauravphogat.com/tools