PATIENT RETENTION

Bring lapsed patients back without chasing them

Treat re-engagement as care continuity, not a sales campaign. Who, why, when, and in whose voice.

Swipe →

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WHY DIFFERENT

A lapsed patient already made a choice

REASON	Mostly friction: vague review date, no call, bad parking
TONE	Resuming a relationship, not persuading a stranger
ECONOMICS	A message, a call and a slot, versus paid acquisition
RISK	Pushing people with no reason to return creates no-shows

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WHO IS LAPSED

"

Define lapse relative to an expected return, not relative to the calendar.

If no return was expected, they are a past patient, not someone who owes you a visit.

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SEGMENTS

Five groups, each with its own handling

- Missed reviews: highest value, most sensitive, doctor's name matters
- Incomplete journeys: need a counsellor, not a campaign
- Annual and preventive returns: suited to automation
- Relationship lapses: service recovery beats any offer
- Do not contact: deceased, withdrawn consent, open complaints, team flags

Check the do-not-contact list before every send. The mortality flag often lives in another system.

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NOT INTRUSIVE

Three levers: relevance, frequency, voice

RELEVANCE	Refer to the department or doctor, never name a diagnosis in a preview
FREQUENCY	One patient-level cap across every team, quiet period after clinical events
VOICE	The treating doctor's team, plainly, in the patient's language

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A hierarchy of permission

1. Follow-up reminders about the patient's own care: the core
2. Preventive and annual reminders, with clear opt-out
3. Offers for new services: explicit permission only
4. A doctor's name is a separate permission

   Agree templates in advance, let doctors exclude specific patients

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THE CADENCE

Two touches and a call, then stop

1. WhatsApp message in the doctor team's voice with a direct booking link
2. A call from a trained care coordinator, not a sales agent
   The only point where you learn why they stopped coming
3. No response: log it and let them return on their own terms

Check the path from reply to confirmed appointment before you send anything.

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MEASURE HONESTLY

Replies are the wrong metric

- Honoured appointments per segment within a sensible window
- Compared against a random holdout group left uncontacted
- Track opt-outs, complaints, blocked numbers and angry calls
- Reverse any wording or frequency change that raises them

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READ THE FULL GUIDE

Re-engaging lapsed patients, in full

- What changed under the 2026 NMC guidelines
- Planning sends against clinic capacity
- A six-week plan starting with one specialty
- gauravphogat.com/re-engaging-lapsed-patients

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