Is This the Party to Whom I Am Speaking?

Omedienne Lily Tomlin’s well-known line spoofed the scripted speech of telephone operators who toiled in airless rooms for Ma Bell and the Bell children. That was in the day when there were such people as telephone operators. Today, telephone answering is performed by automatons at the majority of medical practices that I call on a regular basis. The script has been recorded by a mellifluous female voice, as though the automaton knew before I called that I would need calming after reaching yet another recorded message.

I get my jollies by answering back to the recording. Makes me feel better even though I know my comments are falling on deaf, electronic ears. So here I am calling Dr. X at University Y, not about a patient (as though I should be ashamed for bothering the doctor for any other reason), using the number in the latest Academy directory.

She: “Your call is very important to us.”

Me: “Well, if it were so important, why can’t you pay a real person to answer the phone?”

She: “If this is a medical emergency, hang up and dial 911.”

Me: “Is it that the doctor doesn’t take emergency calls, or perhaps I might die before I get to talk to her?”

She: “This call may be monitored for quality purposes.”

Me: “Whose quality? Certainly not my quality of life being reminded of my privacy invasion!”

She: “Please listen carefully, as our menu has changed.”

Me: “Well, since this is the first time I’ve called, and your menu takes too long to unravel as it is, it must have been a real corkscrew before you changed it.”

My futile response was long enough that I missed the first two choices she gave, probably the ones I wanted, since the rest don’t seem relevant to my problem, which is I’d like to talk to a person who can get me through to the doctor. I try pressing zero, for operator. Sometimes that works.

She: “That is an invalid response. Good-bye.”

OK, I try again (dialing). I work on some charts while She runs through her routine. Almost miss the second choice, “Press two if you are a doctor or a doctor’s office.” That’s me, I press two.

She: “This is Dr. X’s secretary. I’m away from my desk right now, so please leave a message and I’ll call you back just as soon as...”

Me: “I’m sure the doctor I’m calling is sitting in her office wondering why I haven’t called.”

I have noticed that automated telephone answering is implemented with greater prevalence in large multispecialty clinics and in academic medical centers. Places where chief financial officers are running the asylum. Not at my place. My partners and I understand that most of our glaucoma patients are elderly, and that real people are important to their quality care experience. So we don’t have automated phone answering. No menu to get automated directions to the office. No recorded messages about the benefits of LASIK (to the 90-year-old caller). No direct transfer to the billing lady who’s on the phone to somebody else. No trip to the automated phone gulag.

When I begin thinking these thoughts, I know I should be calling my own practice number. At least then, the party to whom I am speaking would be me.