

Avoid the term "non-medical" like the plague. It is a weapon of our adversaries. Are they not "non-optometric?"

When asked if you guarantee your work—

Negative: "I don't know. Something might be arranged."

Positive: "No real professional man ever gives a guarantee; besides, my professional ethics and also my insurance forbid such statements. We will do our best for you, which is the important thing, isn't it?"

The positive approach affirms your professional status, and you gain rather than lose prestige.

When asked, "How much are your frames and lenses?"—

Negative: "Our prices are as cheap as any place in town."

Positive: "It really is impossible to answer this. Lenses, in particular, vary for the needs of each patient."

Alternate answer to shift emphasis: "What is your visual condition?"

Since the patient's question inquires basically about your office, you have every right to use the alternate answer. Frames and lenses are devoid of value without your professional care.

INFLUENCE ON PATIENTS

Phase One in influence is predicated on people (patients). The modern professional optometrist recognizes more than the patient's need for a pair of glasses. Generally speaking, if primary needs were the basic criteria of importance, China and India would be the greatest nations in the world because of the great and perpetual needs of their masses.

A successful professional equation requires more than just a patient needing something.

Phase Two in influence is the optometrist himself. We must constantly watch our in-office language, since we may not be aware of its tremendous inherent power. Our professional language impresses and is automatically projected to patients, their friends, and acquaintances.

An optometrist's greatest practical asset is his in-office semantics. His words and assertions have meaning and impact when properly used. The patient has sought him for advice and is willing to listen to his opinion. How he influences the patient by what he says and does directly equates his success in practice.

"OPTOMETRY"—GOOD, BAD, OR NEUTRAL?

Near the turn of the century certain opticians decided in assembly to use the words "optometry" and "optometrist." Naturally, not all those within the profession thought that this terminology was the best possible.

Is the term "optometrist" good or bad? Actually, it is neutral in certain aspects, a word through whose use and identification members of the profession theoretically create an image. Does "optometry" have a national image? Other professions, some through use of TV, have clearly delineated professional personalities. Is it possible to have professional prestige without a national image?

In the last analysis, the profession is a composite of individuals. If the public is confused by the various modes of optometric practice, the best presentation for personal prestige is to project the highest personal standards. *Effective public relations radiates from a quality professional image.*

Think over this fundamental question: How many of your patients know the educational qualifications of an optometrist? Can a professional image be built on sand? A careless projection or publication of qualifications may clash with state statutes and damage carefully nurtured prestige. At times the indirect presentation of educational credentials is the most effective way.

SUMMARY

General semantics is concerned with language habits, such as how we talk and what attitudes we have toward our own remarks. How we act is determined by how we think, but sometimes we may act without thinking. Even when we supposedly act without thinking, our acts follow guides of thought patterns, which co-relate to the language we use. Language most often reflects intrinsic behavior or innate cultural patterns of an individual.

One should study, think, act and talk professionally at all possible times. Management of the patient's visual needs in the most professional manner will reflect the highest interest of the practitioner and of the profession.