

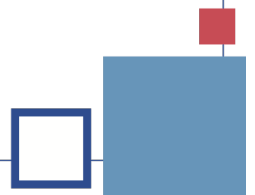
Employing Psychology When Selling a Lab Service

By
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August 2026

In my first job after college, I began selling lab services to physicians. My sales manager explained that selling is both an art and a science. The “art” includes thoroughly understanding your lab’s offerings, identifying customer needs, and demonstrating how your lab outperforms competitors. That’s Sales 101. The “science” part relates to psychology, and unfortunately, not every sales rep fully uses this crucial aspect. Sales psychology combines an understanding of human behavior with communication techniques and emotional triggers to influence customer decisions.

The Basics

Generally, healthcare professionals and patients view clinical labs as commodities. The lab receives the specimen, performs the tests, reports the results, and invoices for the service. Despite this broad view, field reps visit prospective accounts, never knowing when they'll encounter someone facing frustrating lab problems. Research shows, however, that about 95-97% of prospects in any sales territory say they're not experiencing serious lab issues, aren't considering changing labs, or have been directed by a hospital or corporate owner to use a specific lab. That's a daunting sales situation for someone tasked with activating new business. To make matters worse, office managers and doctors have busy jobs and rarely have time to chat with a marketer about an ancillary clinical service that is ostensibly working well. After all, labs are all the same, aren't they? What could be different or improved?



Building Trust and Credibility

Let's assume you represent a typical clinical lab. If it's your first visit—or if you haven't been there in a while—you have three main objectives when speaking with the receptionist: (1) confirm which laboratories they partner with, (2) ask whether they routinely draw blood on-site, and (3) explain your legitimate reason for being there—i.e., *relevant* information for the doctor or office manager (i.e., you're not there to blabber about your wonderful lab; you want to share something worthwhile). Examples might include a newly introduced test or profile, an upgrade to a testing methodology, a new PSC location, a relevant clinical abstract or testing algorithm, etc. Four scenarios typically occur: (1) you get to speak with either the manager or a provider; (2) you are told, "Just leave me your material, and I'll make sure the doctor sees it." If so, write a brief, personal note on a single piece of literature, sign it, and attach your business card; (3) you are instructed to email the office manager to request an appointment; or (4) the office policy is for vendors to provide lunch for the staff (with the doctor and office manager present). While this last one is common, the deep-pocketed pharmaceutical industry established this practice more than four decades ago. When deciding about using a lab, the only two people you *initially* want to meet with are the lead physician and the practice administrator—either together or one-on-one. You would be happy to provide a salad or sandwich in exchange for understanding their lab needs. For a first-time introduction, buying lunch for the entire office is—well—what one might call extortion. One last point: don't waste time trying to convince the receptionist of your wonderful lab. He or she typically does not make a firm decision about switching labs and rarely has much, if any, influence.

Let's consider a first visit with a prospect—office manager Mary—because the valid reason you gave at the front desk has piqued her interest. Your first two objectives are: (1) start building credibility and (2) collect background information about the labs they use. The selling part comes later.

A Sample First-Time Introduction

You: "Hi, Mary, I'm Johnny Jones from ABC Lab. It's nice to meet you." (as you present your business card)

Mary: "It's nice to meet you, Johnny. Have a seat."

You: I assume you have a lot going on, so I'll keep this brief. I hope you can help me. My boss asked me to visit your office to update you and the doctor on _____ (the same valid reason you gave the receptionist). Before I get into that, I'd appreciate it if you could help me understand your current laboratory situation by answering a few questions.



It is important to recognize the logic and psychology behind your statements in this brief introduction.

- You mention Mary's name. This matters because our name is the most pleasing sound we hear; saying it helps create a personal connection.
- You hand her your business card as you say your name and who you represent. This is the proper way to introduce yourself (unlike my experience with some reps).
- You show empathy by acknowledging, "I assume you have a lot going on." Demonstrating empathy is a fundamental part of sales.
- Saying you'll be brief sounds like a symphonic chord to Mary. It's another empathetic remark that illustrates you respect her time.
- You ask for help. Asking someone for assistance generally prompts a positive mental reaction. It's in our nature to want to help others when asked.
- You state that your boss asked you to visit the office with some information—you're following orders. People understand this. It also creates the impression that this office has been singled out, indicating importance.
- You explain that before discussing your valid reason, you need to ask a few questions about their lab situation. Mary thinks to herself: *That's reasonable. Sure, I don't mind answering a few questions.*

Pay attention to the final point. You're using a psychological tactic called *quid pro quo*: I'll give you something relevant, but you first have to answer some questions. That's acceptable to most people. You haven't said, "I'm here to sell you on trying my wonderful lab," which can be a turn-off. People love to buy, but they hate to be sold. Your less-than-60-second introduction has started building your credibility.

The Questions

Research shows that sales success depends on how the sales representative manages the investigation phase of the call. To fully understand the client's lab situation and develop a strategy, you need to ask 15 questions about various topics (though not all in the initial meeting).

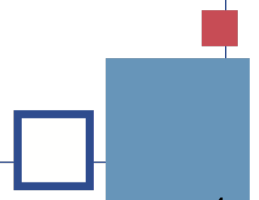


Top performers use a pre-printed questionnaire to record Yes/No responses and notes, including the date, office name, and contact person. After asking 7 or 8 questions, they shift to explaining the original legitimate reason. The remaining unanswered queries give you a reason to revisit the account later.

It may seem redundant to confirm information you may have been told by someone else (or observed), but successful marketers verify their data. However, a word of caution: avoid saying that someone else shared details with you. You want to get independent comments from different people (sales experts call it “triangulating data”).

The following is a suggestion for several questions during a first-time visit with an office manager:

1. Do you routinely draw blood in the office, or do you refer patients to a PSC?
 - If the latter, do you designate a lab, or do patients choose their own?
2. What lab is integrated into your EMR? Alternatively, “What laboratory do you use for Medicare patients with specimens collected in the office?”
 - Either response will likely signal their lab preference.
3. What other labs do you use?
4. Are you and the provider(s) generally happy with _____’s services?
5. What is a typical number of patients this office sees in a day?
 - With this statistic, you can gain a sense—*specialty-dependent*—of the general test volume. For GP/IM, divide patient visits by 50%.
6. (In states allowing client bill) Besides billing federal programs, how does the lab billing work?
7. What do you *like* about your primary lab?
 - Ideally, on follow-up visits, you eventually want opinions from other office personnel (providers, clinical coordinator, PA, phlebotomist).
 - Note the person’s facial expression, voice tone, attitude, or any noticeable delay in their response.
 - Asking initially about “likes” has a psychologically upbeat connotation—people enjoy giving positive comments.
8. I hear from other offices like yours that they face issues with their lab. What are some of the problems you encounter?



Let's assess the sequence of Questions 7 and 8. It's a natural progression to move from positive to negative, but Question 8 is where the rubber meets the road. If the client quickly identifies a current hot-bed issue, the conversation understandably flows easily into how your lab can address it. For example, "It's obvious to see how that delay in reporting can affect patient care, not to mention the doctor's reputation. Let me explain how my lab handles that."

However, hot-bed problems are infrequent with most prospects. When you say, "I hear from other offices like yours that they face lab issues," you are invoking the Herd Mentality Theory (or Social Proof). This appeals to a basic behavioral instinct: "If others are doing or saying it, we probably should too. Let me think of a minor problem we've had so I don't sound like this office is unique from others."

When someone describes what seems like a minor problem, untrained sales reps often respond quickly with a solution. However, we're not talking about a small sale, such as a pen or a magazine subscription, where a simple two-step approach might work. This is where implication questions play a more nuanced and sophisticated role.

If the customer mentions a random issue that your lab can easily address, you say, "What effect does that have on _____" (e.g., office productivity, healthcare costs, the doctor's reputation, the office reputation, the patient, etc.). An implication question (or even better, two or three) explores the problem and encourages your contact to think more deeply about its effects and consequences (either personally or within the office).

Following their response to your implication question(s), you then explain how your lab can address the problem(s). Using implication questions tied to a minor problem is a powerful psychological tool that even successful marketers often overlook.

An Example of a Presentation to a Prospect That's Using a National Lab

"Allow me to explain who we are and who we are not" (it's natural for people to like hearing both sides). We are a small lab that performs routine testing, with same-day or next-day results. If we cannot perform a test in-house, we send it to a trusted lab partner. We are not a large, national mega-lab. Those labs process thousands of samples daily, and their volume can cause issues that create frustrating headaches for customers and patients. Also, unlike the large labs, we are not a public company. Public companies want to boost stock value and attract new investors. But we have no motive to inflate a stock price. Our main goal is to satisfy you and your patients. We are a local business that handles our clients' specimens with a personal, high-touch, customer-focused approach.



As I see it, your practice and our lab are in the same boat: small businesses delivering exceptional healthcare, one patient at a time, on a scale much smaller than national organizations. That's why discerning clients choose to work with us. Beyond being a private, customer-focused business, we are a *value-driven* company with several unique advantages.

- Placing their office and your lab in the same space fosters a positive psychological feeling. There is a sense of unity.
- You include the phrase "value-driven" because, ultimately, *that's* what you are selling and what prospects are buying: *value*.

Your Presentation: Preparing the Soil, Planting the Seed

This approach serves as both a strategy and a tactic. It requires that the representative understand the details that distinguish their lab from competitors.

You start with "preparing the soil," which sets the context. Then you "plant the seed" by showing how your lab addresses the issue and the benefit it offers to the client or patient. Essentially, you're paving the way *to* your advantage—not leading with it. This follows a strong A-to-B structure and contrasts with reps who jump into their differentiators, sounding robotic: "We do this, and we do that, and we also offer...and another difference is..."

The following are examples. Although these are not universal across all labs, they are real cases discussed in prior training sessions. The lab must ensure that every field representative receives comprehensive training by reviewing *all* lab operations, including courier, processing, PSC/phlebotomy, billing, methodologies, pathology, supplies, reporting, client-specific reports, and lab connectivity. Each department supervisor is responsible for outlining any competitive advantages.

(Preparing the soil) "I've heard complaints from other offices that their patients are frustrated with both Quest and LabCorp because those labs push patients to schedule a blood-draw appointment. Patients don't like taking that extra step. They just want to drop in when they're nearby, get their blood drawn quickly, and be on their way."

(Planting the seed) My lab understands this. We're not a large lab, so we don't need to follow strict appointment schedules. Patients can walk in, be seen right away, and leave. We offer a convenient approach that fits your *patients'* schedules.

(Preparing the soil) "Most people I talk to want to support local businesses. Do you agree?"

(Planting the seed) We perform our testing just up the street. Think of us as almost an extension of your office."



(Preparing the soil) “It is common for labs to have an automated answering system for incoming calls. This requires callers to press a button to reach a department and then often wait on hold.”

(Planting the seed) My lab offers our clients something they appreciate: a live person answering the phone and handling their questions or issues. No buttons to push, no waiting on hold. This demonstrates our commitment to personalization and top-tier service.

(Preparing the soil) “The revenue Quest takes in supports the state of New Jersey because its headquarters are located there. Sending samples to LabCorp funds their North Carolina headquarters. Australia is home to Sonic’s headquarters.”

(Planting the seed) In contrast, our headquarter is located locally. Our customers are supporting the local economy and helping us create jobs in our community.

(Preparing the soil) “In large commercial labs, when clients face problems, the field rep or customer service typically handles them. Unfortunately, senior management rarely becomes aware of these problems, so no one at the top can create lasting solutions.”

(Planting the seed) This is not the case at ABC Lab. Because of our smaller size, our Chief Operating Officer *and* Lab Director personally review each client complaint and ensure we address the issue. In our lab, senior management oversees improvement measures.

(Preparing the soil) “Most labs use an immunoassay method for HgbA1c testing because it enables quick specimen processing and uses inexpensive reagents. However, this method cannot detect hemoglobin mutations. Unfortunately, such mutations can affect the accuracy of HgbA1c results.”

(Planting the seed) This is where our lab excels. We use ion-exchange HPLC for HgbA1c testing. The technician can view the mutational fractions on the instrument’s monitor and document this interference on the report. This alerts the clinician that a hemoglobinopathy may affect the result. In turn, the clinician can order a different test that is not affected by abnormal hemoglobin. When clients choose ABC Lab, they know they’re partnering with a quality provider.

(Preparing the soil) Labs generate their routine testing reports for next-day delivery.

(Planting the seed) Our courier system offers local clients and our PSCs twice-daily pickups. They return to the lab after the first run in the early afternoon. We analyze routine blood specimens immediately and upload test results to the lab portal before the end of the workday. This is another example of how we add value by enabling providers to act swiftly on serious, abnormal results. We elevate turnaround time to a whole new level.



A Note on Closing

Sales reps often *ask* for the business, but successful marketers take a more professional, psychological approach: they *suggest* the next step. This naturally leads to a successful call conclusion. Asking for a commitment can trigger resistance, but proposing an action helps keep the sale moving smoothly. For example, “I think the most logical next step would be for this office to try our lab (or send some patients to our PSC).”

Conclusion

Psychology is essential to successful sales, starting with the initial contact. It involves using techniques that build trust, clarify messaging, and align value propositions with customers’ needs.

To implement the ideas in this paper, laboratories should ensure that their field staff is well trained in each department's functions and highlight areas where they have competitive advantages over specific competitors. This industry knowledge provides a foundation for a professional approach and helps avoid sounding like a routine pick-up-and-delivery service. Additionally, field representatives should practice one-on-one with a colleague before venturing into the field. Practice and repetition are essential. Reading this paper once is unlikely to lead to full adoption or lasting improvement.

*Peter Francis is president of **Clinical Laboratory Sales Training, LLC**, a unique training and development company dedicated to helping laboratories increase their revenues and reputation through prepared, professional, and productive representatives. He is the author of over forty-five articles about laboratory sales. Visit the company’s website at www.clinlabsales.com for a complete listing of services.*

