OPERATIONS, MODULE 7

Keeping patients coming back

You already paid to get every patient in your system once. A patient who comes back costs nothing to acquire and is worth more each visit. After this module you know the four habits that raise return rates, and the numbers that prove they are working.

The arithmetic that makes this the best investment in the building

A neurotoxin patient returns every three to four months. At $450 a visit, one patient kept for a year is about $1,600; kept for three years, closer to $5,000, plus whatever else they buy. A new patient costs $100 to $200 to acquire (Marketing 4). So a rebook script that keeps ten more patients a month is worth more than most ad budgets, and it costs a sentence at the desk.

Habit 1. Rebook at checkout

The single number that separates good clinics from average ones. The industry average is around 30 to 35 percent of visits rebooked before the patient leaves; the best desks run 55 percent and up. The difference is not the patients. It is whether someone asks, and how.

What does not work	What works
"Would you like to book your next appointment?"	"Your next visit should be around March 12. I have Tuesday the 11th at 2 or Thursday the 13th at 5:30. Which is better?"
The provider says nothing; the desk asks cold	The provider says in the room: "See you in twelve weeks; they'll set it up at the desk." The desk confirms.
Asking after payment, on the way out	Asking before payment, while the patient is still seated

Track it by provider and by desk person. The gap between best and worst is a training gap, and it closes in a month once the number is visible.

Habit 2. Recall

For everyone who did not rebook, a recall message before the treatment wears off. Neurotoxin at day 75. Filler at nine months. Facials and skin treatments at six weeks. Members with no upcoming appointment, every month. A text with a link to book beats an email; a call from the provider beats both for the patients worth the most. Most booking systems automate this; the setup is the work.

Habit 3. No-shows and late cancellations

Under 6 percent is the target. Two things get you there: a card on file with a stated late cancellation fee (not always charged, always stated), and a reminder at 48 hours that asks for a reply. New patient bookings with a deposit no-show at a fraction of the rate. Every no-show slot is provider time you paid for and product you may have reconstituted (Operations 3).

Habit 4. Bring back the lapsed

Pull the list of patients with no visit in six months. That list is worth more than any lead list you could buy: they know you, they came once, and most left for no reason at all. One personal message a month to twenty of them, from the provider they saw, brings back a few every time. Track "lapsed patients brought back" on the scorecard so it happens.

The numbers that prove it is working

Number	Target	What it tells you
Rebook at checkout	55% and up	The desk is asking, and asking well
Patients back within 90 days	60% and up for injectables	Rebook plus recall are landing
Share of revenue from returning patients	Above 70%	The clinic is keeping patients, not renting them
No-show and cancellation rate	Under 6%	Deposits and reminders are in place
Lapsed patients brought back	Growing	Someone is working the list

A return visit rate above 65 percent over twelve months is what buyers look for (Advanced 5). Every one of these habits feeds it.

> **Where Benchmark comes in.** All five numbers are on your scorecard by provider. In every plan, the rebook script, the recall setup and the deposit policy are typical monthly fixes we build with you and write up for the team.

Try it yourself

- [ ] Stand at the desk for one afternoon and count how many patients are asked to rebook, and how. Write down the exact words used.
- [ ] Pull the list of patients with no visit in six months. Message ten of them this week.
- [ ] Check that your 48 hour reminder asks for a reply, and that your late cancellation policy is on the confirmation.

Check yourself: Operations 7

The best time to ask a patient to rebook is

- By email the next day
- Before payment, while they are still seated, with two specific times offered
- On the way out the door

Specific times, before the transaction closes, after the provider has set it up in the room.

Neurotoxin recall should go out at about

- Day 30
- Day 75
- Day 180

Before the treatment wears off, so the patient books before they notice.

The cheapest new revenue in the clinic is usually

- A new ad campaign
- Patients you already have who did not rebook
- A new service line

Acquisition cost of zero and a known history.

No-shows at 12%. The first fix is

- Overbook the schedule
- Card on file with a stated fee, and a 48 hour reminder that asks for a reply
- Stop taking new patients

Both together usually halve the rate within two months.

A return visit rate above 65% over twelve months matters because

- It is a nice number
- It is the benchmark buyers use to judge whether revenue will keep showing up
- It lowers product cost

Retention is what makes earnings transferable, which is what sets the multiple.

Pick an answer for each question.

Want this done, not just explained?

The 10-Day Sprint finds the leaks for $1,000, one time. After that, on the plan, the scorecard keeps coming and at least one growth initiative is executed with you every month. Plans from $2,299 a month. Everything in this module is part of that work.

See the sprint and pricing | Text Nate

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