

Use this whether you work with us or not

Clinics & Aesthetics Growth Blueprint

How UAE treatment-led clinics build more booked consultations
without wasting budget

We keep seeing the same mistakes cost clinics thousands in wasted ad spend. This blueprint is what we wish every clinic knew before they ran their first campaign, whether you work with us or not.

“

“In aesthetics, hesitation is the default. Everything on your page either reduces it or adds to it.”

How to Use This Blueprint

If your ads are getting rejected → Go to Page 5





If you're unsure about budget → Go to Pages 7-8

If you want a full system audit → Start at Page 3






WHAT PATIENTS LOOK FOR BEFORE THEY BOOK

Most patients do not book because the ad looked pretty. They book because the clinic feels safe, credible, and easy enough to trust.

What they look for first

-  A treatment that feels relevant to their problem
-  A clinic they feel safe enough to trust
-  Clear proof that this actually works
-  An easy next step if they want to ask more

What makes them hesitate

-  Weak or fake-looking proof
-  No clear answer on pain, downtime, or sessions
-  A clinic page that feels empty, generic, or inactive
-  A booking path that feels annoying or uncertain
-  A promise that sounds too good to be true

WHAT ACTUALLY GETS THEM TO BOOK

“A clear treatment promise, believable proof, and enough reassurance to reduce hesitation.”

What your patients are silently asking

- > Is it painful?
- > How many sessions will I need?
- > Am I even suitable for this?
- > Is there downtime?
- > When should I expect results?
- > What happens after I enquire?


If your page does not answer those questions quickly, your ads do not fail — trust does.


WHERE YOU'RE MISSING THE MOST BOOKINGS

Do not fix everything. Fix the stage where you are losing the most good opportunities first.


Every stage of the journey tells you something different. If people do not click, the treatment angle is weak. If they click but do not book, the page probably did not reduce enough hesitation. If they book but do not show, the issue is usually the handoff, the reminder flow, or the confidence they felt after booking. The goal is to find the first place where good demand starts falling away.

Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6
Seen	Clicked	Trusted	Started booking	Booked consultation	Showed / treated / repeated
If this is weak: The treatment angle is not earning enough attention.	If this is weak: The promise is not strong enough to move someone forward.	If this is weak: The page has not reduced enough hesitation.	If this is weak: The booking path feels too uncertain or too annoying.	If this is weak: The issue is often follow-up, reassurance, or lead fit.	If this is weak: The issue is usually no-shows, weak consult quality, or low treatment take-up.
Usually owned by: The ad and the offer.	Usually owned by: The ad message.	Usually owned by: The page, proof, and clinic credibility.	Usually owned by: The booking flow.	Usually owned by: Response quality and consult handling.	Usually owned by: Operations and retention.
Check first: Change the first line, first visual, or the treatment angle.	Check first: Make the benefit clearer and more specific.	Check first: Move pain, downtime, session count, result timing, and specialist credibility higher.	Check first: Shorten the path and make the next step clearer.	Check first: Review scripts, speed-to-lead, and how objections are answered after enquiry.	Check first: Compare bookings to show rate and treatment take-up before touching the ads.


 **CTR and CPC look fine, but booked consultations stay weak.**


 **What that usually means:**

The ad probably did its job. The page did not reduce enough hesitation.


 **Where to focus first:**

Pain, downtime, session count, result timing, and how easy it feels to book.


 **Leads are cheap, but very few people actually show up.**

 **What that usually means:**

You are attracting interest without enough confidence or commitment.

 **Where to focus first:**

Follow-up speed, reminder flow, reassurance, and how clearly the next step was explained.

 **Prove it to yourself**

- ✓ Compare CTR to page visits
- ✓ Compare page visits to booked consultations
- ✓ Compare booked consultations to show rate
- ✓ The first weak stage usually tells you where the biggest missed opportunity sits

WHAT THE NUMBERS ARE TELLING YOU

These are directional diagnostics, not universal laws. Use them as a working operator sheet, not as a fixed rulebook.

Metric	What You See	Diagnosis	First Test
∞ Meta			
CPM	Jumps sharply while creative/seasonality are stable.	More competition or relevance weakened.	Refresh Narrow message to one treatment + promise.
CTR	<1% cold traffic 1.5%+ healthy	Hook is weak, generic, or wrong concern.	Angle Change the angle first, not structure.
Frequency	Climbs, CTR falls, CPA drifts up.	Creative fatigue or audience saturation.	Rotate Rotate hook, proof, and offer.
Conversion	Clicks ok, consultations don't follow.	Page weak, proof weak, or friction high.	Simplify Shorten path, improve reassurance.
G Google Search			
CTR	Low CTR on high-intent groups.	Ad doesn't match search intent.	Rewrite Headlines = treatment + benefit + location.
CPC	Rises while booking quality flat.	Competition up or Quality Score down.	Tighten Keyword grouping and LP match.
Terms	Spend on broad informational searches.	Buying research traffic, not booking intent.	Negatives Split commercial from informational.
Consults	Traffic relevant, consult rate weak.	Offer vague, trust thin, or path heavy.	Clarify Clear outcome + reduce friction.

Prove it to yourself

Open Meta and Google today and write down:

- ✓ CPM / CTR
- ✓ Booking conversion rate
- ✓ Show rate
- ✓ CPC
- ✓ lead-to-book rate

The first weak number usually points to the first real leak.

WHY CLINIC ADS GET REJECTED, AND HOW TO STAY PERSUASIVE ANYWAY

Clinic ads often get into trouble for two reasons: they either say too much, or they say it in a way the platforms do not like. The goal is not to become bland. The goal is to stay persuasive without crossing the lines that get ads rejected, limited, or quietly weakened.

⚠️ What usually gets clinic ads into trouble

- ✗ Calling out the viewer's insecurity too directly
- ✗ Using miracle / cure / fix language
- ✗ Saying less in the ad, then making stronger claims on the landing page
- ✗ Promising guaranteed or permanent results
- ✗ Overly dramatic before-and-after framing
- ✗ Using sensitive audience or targeting logic as if this were a normal ecommerce product

🚫 Examples of risky wording:

Do you have wrinkles? Struggling with acne scars? Tired of your sagging skin? Erase wrinkles Get rid of acne

Permanent fix

✅ Better ways to say the same thing

- | | |
|------------------------------------------------|----------------------------------------------------------------------------------|
| ✗ Instead of:
Get rid of acne | ✓ Use:
Explore the right acne treatment path for your skin |
| ✗ Instead of:
Erase wrinkles | ✓ Use:
A treatment approach designed to soften visible signs of ageing |
| ✗ Instead of:
Permanent fix | ✓ Use:
What kind of result is realistic, and on what timeline? |
| ✗ Instead of:
Do you hate your skin? | ✓ Use:
If you're exploring treatment options for... |

☰ What your landing page still needs to do

Even if the ad is safe, the page still has to sell the booking. It still needs to answer:

- ✓ What is this treatment for?
- ✓ Is there downtime?
- ✓ When do results usually show?
- ✓ Who is it right for?
- ✓ How many sessions do people usually need?
- ✓ What happens after I enquire?

Bottom line:

The safest clinic ads are not weak ads. They are just clearer, more believable, and less likely to trigger distrust or platform issues.

HOW TO STRUCTURE CLINIC CREATIVES THAT ACTUALLY CONVERT

Strong clinic creative does not just get attention. It moves someone from hesitation to enough confidence to book.

1. Hook

The hook earns the stop.

Strong clinic hooks usually come from:

- ⚡ Strong but compliant statement
- ⚡ Common concern patients repeat
- 📺 Visual or first line that makes the patient want to know more
- ⚡ A myth most patients believe
- ⚡ "What most people get wrong about..."

"What most people misunderstand before booking this treatment"

"If you're comparing cheaper options, read this first"

"What downtime actually looks like — not what people assume"

2. Meat

This is where trust gets built.

The middle should answer:

- ✔ What the treatment is meant to do
- ✔ Result timeline to expect
- ✔ Why this clinic is credible enough to trust
- ✔ Who it's for
- ✔ Pain or downtime reality

Proof belongs here:

- ★ Believable outcomes
- ★ Why this is worth choosing over a cheaper/louder option
- ★ What makes the clinic different

3. CTA

This is how you move them.

Strong clinic CTAs:

- Book a consultation
- Message to explore the right path
- Ask if you're suitable
- Learn what to expect first

⚠ Important Note:

The Hook and the Meat do most of the work. If the hook gets attention but the middle does not build trust, you will get curiosity without bookings.

🔍 Prove it to yourself

Look at your top 3 creatives and ask:

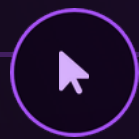
- ✔ Is the first line about the patient's real concern?
- ✔ Does the middle answer the hesitation questions?
- ✔ Does the CTA feel safe enough to act on?

If not, the issue is not "more content." The issue is that the creative is not reducing enough doubt.

BUDGET IS A DATA PROBLEM, NOT A “MINIMUM SPEND” PROBLEM

Platforms learn from events. The deeper the event, the rarer it is. That means treatment sales are often too rare to be the first thing you optimize toward.

The Clinic Event Ladder



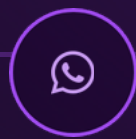
Click

Cheap signal. Weak buying intent.



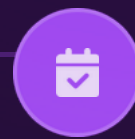
Landing Page View

Useful technical signal. Still weak commercial signal.



Lead / WhatsApp Start

Often the practical starting point.



Booked Consultation

Stronger business signal, but lower volume.



Treatment Sale

Best outcome, but often too rare to train early.

Why this matters

- Meta gets steadier with enough optimization events. Google's automation needs conversion data.
- If you optimize too deep too early, the platform lacks signal to learn properly.

Example Calculation

180/consult × 30 consults + buffer

- Base Budget: AED 5,400
- With buffer: AED 6,500–7,000
- 1 in 3 convert = High CAC

Start at consultation depth, not treatment-sale depth.

WhatsApp Reality

- ❌ WhatsApp can reduce lead quality, but in the UAE it also removes friction.
- ✅ Use it as a fast handoff, not as a no-filter shortcut.

Scale Warning

- ❌ **Too Little Spend**
No learning.
- ❌ **Too Much, Too Early**
You spill into weaker demand before the message is proven.

Prove it to yourself

- What event are you optimizing for?
- Can you generate enough of it this month?
- If not, what is the next-best event one step higher?

WHY FIRST-SALE MATH CAN MAKE GOOD CLINIC MARKETING LOOK BAD

If you judge clinic marketing only on the first sale, you can shut down good growth too early.

$$\text{Gross Profit} = \text{Revenue} \times \text{Margin}$$

$$\text{LTV Gross Profit} = \text{First Sale} + \text{Repeat Sessions} + \text{Packages} + \text{Referrals}$$

$$\text{Profit over Patient Life} = \text{LTV Gross Profit} - \text{CAC}$$

The First-Sale Trap

First Sale View

Treatment: AED 500 | Margin: 50%

First Sale Revenue	AED 500
Gross Profit (50%)	AED 250
Marketing Cost (CAC)	AED 650
First Sale Profit	- AED 400

Conclusion

"Marketing Failed" ❌

The LTV Reality

Full Cycle View

Average patient completes 8 sessions

Total Revenue (8 sessions)	AED 4,000
Gross Profit (50%)	AED 2,000
Acquisition Cost	AED 650
Real Profit (minus CAC)	AED 1,350

Conclusion

Profitable Growth ✅

ⓘ If the clinic also uses package offers, follow-up treatments, or referral incentives, the real value can be even higher — but only if it is actually being tracked.

“The first treatment may not justify the CAC. The full patient journey often does.”

Prove it to yourself

Take one treatment and estimate: first sale, gross margin, average repeat sessions, package or referral uplift if relevant. Then subtract CAC. That tells you much more than first-sale ROAS.

WHEN YOUR DASHBOARD LIES, THIS IS WHAT TO TRUST FIRST

Attribution is just the method a platform uses to decide who gets credit. The problem is that the patient journey rarely happens inside one platform.

What to trust first:

01 Real treatment revenue

02 Booked consultations and show rate

03 Platform-reported leads

04 Click metrics

■ Example Story

- A patient sees a treatment ad on Instagram on Monday.
- They Google the treatment on Wednesday.
- They click a search result on Thursday and book through WhatsApp.
- **Google gets the visible credit.**
- *Meta still helped create the intent.*

💡 What this means

- > Search often captures active need
- > Meta often creates desire or trust earlier
- > WhatsApp and offline follow-up can break the reporting trail

📋 Prove it to yourself

- ✓ Compare: leads, booked consultations, show rate, treatment take-up.
- ✓ If those stories don't match, your dashboard is only telling part of the truth.

This page is designed for skeptics. Use it to pressure-test the blueprint against your own business.

The 20-minute audit that tells you where the booking journey is lying

If you only do one thing this month, do this.

If you already run ads

If you don't run ads yet

STEP 1

Pull the last 30–90 days

- ✓ Leads
- ✓ Booked consultations
- ✓ Show rate
- ✓ Treatment take-up

STEP 2

Find the first weak stage

- ✓ Are they clicking?
- ✓ Are they trusting?
- ✓ Are they booking?
- ✓ Are they showing up?

STEP 3


Fix one thing only

- ✓ The offer
- ✓ The page
- ✓ The booking flow
- ✓ The follow-up


STEP 4

Compare before vs after


- ✓ Did the specific metric improve?

 **Answer the patient questions from Page 2 on the page itself**


Make sure you address pain, downtime, results, and suitability directly.

 **Check whether your strongest proof is actually visible**


Don't hide your best results or doctor credentials below the fold.

 **Check whether your wording is likely to get flagged**


Review against the ad rejection guide to avoid platform issues.

 **Make the consultation offer obvious**

Ensure patients know exactly how to book and why they should.

 **Decide whether your first real optimization event should be a booking or a lead**

Choose based on your budget depth and sales team capacity.

 If you find the issue and want help fixing it, that's where we come in. Hello@pledgemc.com
www.pledgemc.com