

PRINT FORM

## PT Clinic Marketing Strategy Assessment

SAVE

### About This Marketing Strategy Assessment

SAVE and SUBMIT

This assessment gets you started with your free trial and Strategic Marketing Plan (SMP). In our SMP process, in addition to kick-starting your new patient acquisition system, we are trying to help you discover your most powerful strategic communication options.

Think about our collaboration with you this way: Your product or service is on trial, doctors and patients are the jury, and **your marketing strategist is your attorney**. The content and materials we are about to create need to convince the jury why they should choose you over your competitors.

Even though we are expert PT "attorneys," you need to help us build your case. We can't do it alone. We are not magicians, and we do not espouse marketing "tricks." Instead, we follow principle-based marketing techniques.

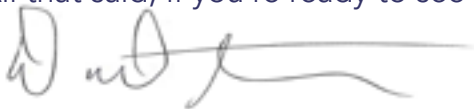
The most important principle is attitude: A sincere desire to become better than the competition and a commitment to market and advertise your unique value so it becomes evident to your target audience. We are ready to do most of that heavy lifting, but if you're looking at us as the entire solution, we can't help.

As you answer the questions in this assessment, please be as specific as possible. Feel free to attach as many notes as you need to fully describe your business and capture your thoughts.

Don't worry if you struggle with this. The process is designed to **make you think A LOT**. You **SHOULD** feel like you're on trial and out of your comfort zone. You **SHOULD** feel like your business needs work. **It always will. Marketing is like fitness.** You have to start from where you're at, set realistic goals, and find the **discipline** to make it happen.

It's our job to take your information, ask more questions, share our perspective on market opportunities that fit your unique personality and business goals, and then **collaborate with you** to create your strategic plan. We are a practice development tool, process facilitator, advisor, and your marketing fitness coach. All information is strictly confidential.

All that said, if you're ready to see where this process can take you, let's get started...



David C. Steinberg, Founder & Senior Consultant

**P.S. Please attach or email copies of your current marketing and ad materials to [ptrmsupport@ptreferralmachine.com](mailto:ptrmsupport@ptreferralmachine.com) so we can see what you are currently saying and how you are saying it in your messaging strategy.**

## Company Info

Today's Date: \_\_\_\_\_

|   |   |
|---|---|
| Company Name  |   |
| Contact & Title   |   |
| Address, City, State, Zip   |   |
| Email   |   |
| Phone   |   |
| Website   |   |
| Years in business   |   |
| Number of locations   |   |
| Number of licensed PTs  |   |
| Average visits per week   |   |
| Annual collected billings   |   |
| Average billing per visit   |   |
| <b>New patient inquiry stats (average per week):</b>  | If you don't know these numbers, <b>please provide your best guesstimates</b> for your new patient phone and website inquiries. These numbers will be used in your Practice Growth Worksheet. |
| Phone inquiries received  |   |
| Phone inquiries booked  |   |
| Web inquiries received  |   |
| Web inquiries booked  |   |
| Other Company Background  |   |
| <ul style="list-style-type: none"> <li>• Staffing</li> <li>• Special certifications</li> <li>• Equipment &amp; facilities</li> <li>• Location visibility &amp; signage restrictions</li> <li>• Neighborhood profile (business &amp; residential)</li> </ul> |   |

## Section 1: Business Goals and Service Snapshot

|                                   |
|-----------------------------------|
| 1. Please describe your practice: |
|                                   |

| 2. Please breakdown your sales by top 4 service or treatment categories | % of total |
|---|------------|
| 1.  |            |
| 2.  |            |
| 3.  |            |
| 4.  |            |

| 3. Please rank your top 4 services or treatment categories by profitability per visit | % of total |
|---|------------|
| 1.  |            |
| 2.  |            |
| 3.  |            |
| 4.  |            |

|  |
|--|
| 4. Please describe your goals for business growth. : |
|  |

| 5. To meet the growth goals described above, which of the systems listed below have the capacity TODAY to meet the demand without additional investment? | A - Adequate<br>I - Inadequate |
|--|--------------------------------|
| 1. Billing, scheduling, & EHR  |                                |
| 2. Facilities & equipment  |                                |
| 3. Personnel (PTs, PTAs, other staff)  |                                |

|   |
|---|
| Other comments or info about services and growth goals: |
|   |

## Section 2: Competitor Analysis

1. List and rate your TOP 3-5 competitors:

| Competitor Name | Web Address | Strengths | Weaknesses |
|-----------------|-------------|-----------|------------|
|                 |             |           |            |
|                 |             |           |            |
|                 |             |           |            |
|                 |             |           |            |
|                 |             |           |            |

Other comments about your competitive environment:

|  |
|--|
|  |
|--|

### Section 3: Your Selling Advantages

1. What are the TOP 3-5 problems or **frustrations DOCTORS have when referring** patients for treatments or services you provide?

1.

2.

3.

4.

5.

2. What are the TOP 3-5 problems or frustrations PATIENT-CLIENTS have when **SELECTING** a PT provider?

1.

2.

3.

4.

5.

3. What are the TOP 2-3 problems or frustrations PATIENT-CLIENTS have with their **TREATMENT and patient experience?**

1.

2.

3.

4. If you were giving advice to a friend about how to choose the best PT for them, what would it be?

5. Your current elevator pitch - explain what you do and why people should choose you RATHER THAN your competitors:

## Section 4: Your Marketing Budget

1. Marketing Tools Budget: How much do you spend on materials?

| Format  | Quantity | Cost |
|---|----------|------|
| 1. Clinic brochures                                       |          |      |
| 2. New patient handouts                                   |          |      |
| 3. Physician flyers/treatment guides/presentation folders |          |      |
| 4. Website  |          |      |
| <b>Total:</b>   |          |      |

2. Advertising Budget: How much do you spend on advertising?

| Format                                 | Quantity | Cost |
|--|----------|------|
| 1. Internet ads                        |          |      |
| 2. Local print publications            |          |      |
| 3. Direct mail consumers & clients     |          |      |
| 4. Direct mail physicians              |          |      |
| 5. Events (health fairs & in-services) |          |      |
| 6. Broadcast                           |          |      |
| <b>Total:</b>                          |          |      |

|  |
|--|
| 3. Describe your new patient acquisition process step-by-step: |
| 1.   |
| 2.   |
| 3.   |
| 4.   |
| 5.   |

**Notes & Ideas:**

**Please submit assessments to:**

David Steinberg, PTRM Senior Strategist  
Email: [dsteinberg@PTreferralMachine.com](mailto:dsteinberg@PTreferralMachine.com)  
Fax: 508-772-0014

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Mailing address (general mail only, no assessments please):  
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