EDWARD EATON MARKETING • PDF COURSE

Google Ads for Clinics

Keywords, wording, policy and local visibility for physiotherapy, dental and aesthetic clinics

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About this course

Google Ads reaches patients who are searching for a treatment. This course covers keywords, wording and rules for private clinics.

Who it is for

Clinic owners and marketers who run clinic ads.

What you will be able to do

- Choose keywords by treatment
- Write policy friendly ads
- Look after your Google Business Profile
- Decide between ads and SEO
- Judge Performance Max for a clinic

How to use it

Read the chapters in order, do the "Try this" exercises where they appear and keep a simple log of what you change and what happens. Examples marked illustrative show method, not promises. Results depend on your business, area and effort.

Contents

1	Choosing the channel
2	Keywords and wording
3	Visibility, automation and cost

CHAPTER 1

Choosing the channel

Google Ads or Meta Ads for a clinic: which should you run first?

> **The short answer.** Run Google Ads first when patients search for the treatment by name, such as physiotherapy or a dental implant. Run Meta Ads first when the treatment is a choice people need persuading into, such as aesthetics. Many clinics end up running both, with Google capturing demand and Meta building it.

How they differ

Google reaches people who are already looking. Meta reaches people who are scrolling and may not yet know they want you. That one difference decides most of the rest.

Side by side

	Google Ads	Meta Ads
Intent	High: they searched for it	Lower: they were interrupted
Best for	Treatments patients search by name	Elective or considered treatments
Cost per enquiry	Often higher per click, better quality	Often cheaper per enquiry, more varied quality
Health policy limits	Restricted wording and targeting	Strict rules on personal attributes
Creative needed	Mostly text and a good page	Strong images or video
Tracking	Calls and forms	Forms, messages and pixel events

Real numbers from clinic Google accounts

These are tracked enquiries from three of our Google Ads clinic accounts. The accounts ran in different currencies and on different treatments, so use them to see the range, not to forecast your own result.

- A healthcare clinic over 15 months: **£25.64** per enquiry (388 conversions on £9.95K).
- A physiotherapy clinic aimed at higher value cases: **$61.79** per enquiry (277 conversions).
- A rebuilt, previously flat account: **$45.61** per enquiry (92 conversions).

See the full write ups on the results page.

Meta's limits for health ads

Meta restricts ads that imply you know a person's health condition or other personal attributes. "Physiotherapy for back pain, same week" describes a service. "Are you struggling with back pain?" speaks to the person and is more likely to be rejected. The same thinking helps on Google. Read the policy guide before you write copy.

When to run both

Once Google is working and tracked, add Meta to reach people earlier and to retarget visitors who did not book. A reasonable starting split is most of the budget on Google, with a smaller test on Meta, then move money to whichever gives the lower cost per booked appointment. (That split is illustrative, not a rule.)

A worked example (illustrative)

Take a private physiotherapy clinic in Blackpool with £1,500 a month to spend and room for about 20 new patients. Patients with back and sports injuries search Google when they hurt, so most of the budget goes to Google, perhaps £1,100. The remaining £400 goes to Meta, promoting sports injury assessments to local people and retargeting website visitors who did not book.

After eight weeks, compare cost per booked appointment on each. If Google gives £60 per booked patient and Meta £95, Meta is not wasted, because it may be warming people Google later converts, but it does not deserve more budget yet. The point of the split is to learn, not to guess. These figures are illustrative to show the method.

Common mistakes

- Judging Meta on cost per click, when what matters is cost per booked appointment.
- Running Meta with wording that implies a patient's condition, then blaming the platform for rejections.
- Starting both at once with too little budget for either to learn.
- Not tracking calls, so Google looks worse than it is.
- Forgetting that follow up speed matters as much as the ad.

A 30 day plan

1. **Week 1:** fix tracking for calls and forms, and build a page for your top two treatments.
2. **Week 2:** launch Google search campaigns for those treatments, with negatives for NHS and job searches.
3. **Week 3:** review the search terms report, tighten, and add Meta at a modest budget with policy friendly creative.
4. **Week 4:** compare cost per booked appointment, keep what books and cut what does not.

Where to read next

See which treatments suit Meta, Google Ads keywords for clinics and how to avoid Meta rejections.

Google Ads or SEO for a private clinic?

> **The short answer.** Google Ads can bring clinic enquiries within weeks and gives you control over treatments, areas and budget, but stops when you stop paying. SEO and a good Business Profile build slowly and keep working. Most private clinics start with ads for speed, fix the Business Profile and treatment pages at the same time, and add SEO as budget allows.

Side by side

	Google Ads	SEO and Business Profile
Speed	Weeks	Months
Control	High. Treatments, areas, budget.	Lower. You influence, not control.
Cost pattern	Pay per click plus management	Upfront effort, then lower ongoing cost
Stops when you stop paying	Yes	No
Best for	Filling the diary now	Long term visibility

Together

Ads show which searches turn into appointments. That tells you which treatment pages to improve for SEO. Treatment pages that convert help both.

What to do first

1. Fix your Google Business Profile this week. See the weekly routine.
2. Build a page for your top treatments.
3. Run Google Ads for the searches that mean ready to book.
4. Add SEO effort as budget allows.

A worked example (illustrative)

A new clinic runs ads for fast bookings, fixes its profile and writes a page for each treatment. After a year, organic and map traffic cover some enquiries, so it lowers ad spend on the cheapest searches while keeping ads on competitive ones. Illustrative.

Common mistakes

- Waiting for SEO alone.
- Ignoring the profile.
- Switching ads off completely.
- Not tracking which source books.

Want the full course?

This is a free sample of **Google Ads for Clinics**. The full course has 3 chapters.

Join the waitlist at edwardeatonmarketing.com/courses/google-ads-for-clinics-course and you will hear first when it launches.