

# Ad Tracking and Attribution for Aesthetic Clinics

Platform-default ad tracking under-reports for aesthetic clinics, so accurate measurement means connecting the ad account to the booking system and counting deposit-paid bookings, not clicks or leads.

Written by Mitchell Kwan, an aesthetic clinic marketing consultant based in Perth, Western Australia. He builds ad tracking connected to the booking system as a standard part of every clinic engagement.

## Why platform-default tracking under-reports

The standard Meta pixel sits in the patient's browser. iPhone privacy settings and browser tracking limits blank out a share of conversions before they reach the ad platform. On top of that, most clinic setups never connect the ad account to the booking system at all. The platform reports what it can still see, which is less than what happened.

The cost is not just a wrong report. The ad platform learns from whatever it is told counts as a conversion. Feed it a partial or wrong signal and it spends the budget finding the wrong people. The campaign plateaus and nobody can say why.

## What booking-system-connected tracking looks like

- The Meta pixel stays in place for what the browser can still see.
- The Conversions API sends the booking directly from the clinic's systems to the ad platform, server to server, so privacy settings cannot silently drop it.
- The booking event, a real deposit-paid booking, is what the ad account is told to find more of: bookings, not clicks or form fills.
- The ad account is then reconciled against the booking calendar, because neither system alone tells the whole story.

## A worked example: PM Aesthetics

PM Aesthetics & Co is a laser clinic in Manning, Perth, owned by Priscilia Yong and named here with permission. Figures come from the clinic's Timely booking system and the Meta ad account. Ads ran 29 March to 28 May 2026.

- \$2,121.58 in ad spend produced a \$16,310 treatment pipeline.
- 51 patients booked at \$41.60 per booking, with a 100% show-up rate on a \$50 deposit.
- The attribution gap: Meta's Ads Manager reported 42 bookings. The clinic's Timely booking system showed 51. Nine real patients never appeared in the platform's own report, an 18% under-count.

That gap is why Mitchell builds ad tracking beyond the platform defaults. A clinic reading only one system's number makes scale-or-kill decisions on an instrument that is reading wrong. The full case study is at <https://mitchellkwan.com/insights/pm-aesthetics-case-study>

## What a clinic should measure

- **Cost per booked-and-attended patient.** Not cost per lead. A lead that never books costs money and produces nothing.
- **Pipeline value.** The treatment value the bookings represent, in dollars, from the booking system.
- **Payback.** Ad spend against the revenue the bookings produce. In the PM Aesthetics example, \$2,121.58 against a \$16,310 pipeline is a 7.7x return.
- **Show-up rate.** A deposit at booking changes this number. PM Aesthetics ran at 100%.

## What to stop measuring

- **Clicks.** A click is not a patient.
- **Reach and impressions.** Neither books an appointment.
- **Leads that never book.** A full inbox with an empty calendar is a failed campaign whatever the cost-per-lead says.

If a number cannot be traced to a deposit-paid booking in the calendar, it does not belong in the monthly report. Clinics that report in bookings and dollars can see which ad filled the chair. Clinics that report in platform metrics are guessing.

More detail: <https://mitchellkwan.com/ad-tracking>