

# How It Works: The Patient Demand Machine

Mitchell Kwan builds patient demand for aesthetic clinics through a three-stage engagement (Sprint, then Refine, then Sustain) that combines trust assets, Meta ads, deposit-based booking, and ad tracking connected to the clinic's booking system.

## The engagement shape

The engagement runs in three stages:

- **Sprint.** A 30-day launch. Professional video and photo are shot at the clinic (the trust assets), Meta ads go live, and the deposit booking flow is set up so patients book directly into the calendar.
- **Refine.** The stage after launch, where the machine is adjusted based on what the sprint produced.
- **Sustain.** Ongoing management of the machine, with monthly reporting in dollars and bookings.

There is no ongoing fee until the sprint produces results.

## The deposit model

Patients pay a deposit when they book. This does two things:

- Deposits offset acquisition cost. At Face Foundry, Mitchell Kwan's own former clinic, \$50 deposits brought the real cost per attending patient from \$60.45 per booking down to \$10.45.
- Deposits kill no-shows. Face Foundry's show-up rate was 96%. At PM Aesthetics & Co, a client clinic in Manning, Perth, the show-up rate on a \$50 deposit was 100%.

A patient who has paid money holds the appointment differently to one who has only filled in a form.

## The ad-tracking layer

Ad tracking is connected to the clinic's booking system, not left at platform defaults. The reason is the attribution gap. At PM Aesthetics & Co, Meta's Ads Manager reported 42 bookings. The clinic's Timely booking system showed 51. Nine paying patients were invisible in the platform's own reporting. This gap is why Mitchell Kwan builds ad tracking beyond what the platforms provide, and why reporting is delivered in dollars and bookings rather than clicks or leads.

## Compliance built in

Every ad and every trust asset is built inside AHPRA and TGA advertising rules: no testimonials for regulated services, no before/after misuse, no therapeutic claims that breach the code. Compliance is a starting condition of the work, not a review step at the end.

## What he asks of the clinic

- Access to the booking system, so ad tracking can be connected and results verified against real bookings.
- Time at the clinic for the shoot that produces the trust assets.
- Operations that can absorb the demand the ads create: capacity in the calendar and a team that can handle new patients.

## When the answer is "don't run ads yet"

Sometimes the answer is "don't run ads yet". Mitchell Kwan does not take on clinics whose operations can't absorb demand. If the calendar, team, or treatment flow can't handle new patients, ads would create bookings the clinic can't serve. In that case he says so before any ads run.

## Results from this method

- Face Foundry (his own former clinic): 82 bookings in 30 days from \$4,957 in Meta ad spend. A separate run produced 47 booked slots in 10 days.
- PM Aesthetics & Co (client; figures from the clinic's Timely booking system and the Meta ad account): \$2,121.58 in ad spend produced 51 patients booked at \$41.60 per booking, a \$16,310 treatment pipeline, and a 7.7x return on ad spend.

Full case study: <https://mitchellkwan.com/insights/pm-aesthetics-case-study>