



Comprehensive Online Analysis Questionnaire

Please complete this questionnaire prior to your call.

It's really important for us to gain a thorough understanding of you, your practice and your current and past marketing efforts to properly complete our analysis. Please answer the questions below so we can both make the most of our time.

Doctor's Name: _____

Name of Practice: _____

1. Which marketing channels is your practice currently utilizing?

- | | |
|---|---|
| <input type="checkbox"/> Website | <input type="checkbox"/> Practice Blog |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Email Marketing |
| <input type="checkbox"/> Facebook Ads | <input type="checkbox"/> Yelp |
| <input type="checkbox"/> Google My Business | <input type="checkbox"/> Bing Local |
| <input type="checkbox"/> Google Ads | <input type="checkbox"/> Yellowpages/DexYP/Thryv |
| <input type="checkbox"/> Remarketing | <input type="checkbox"/> Direct Mail Marketing |
| <input type="checkbox"/> Asking patients to leave reviews | <input type="checkbox"/> Magazines/Local Publications |
| <input type="checkbox"/> Using a software solution to ask patients to leave reviews | <input type="checkbox"/> Radio |
| | <input type="checkbox"/> Television |
| | <input type="checkbox"/> Billboards |

2. What do you most enjoy about being a dentist?

3. What are your marketing goals?

4. What are your marketing frustrations?

- 5. What makes your practice unique?**

- 6. What is the average number of new patients you have seen per month over the last 12 months?**

- 7. Please explain how you communicate that your practice is unique when using social media.**

- 8. Please explain how your website communicates that your practice is unique.**

- 9. Please explain how you communicate that your practice is unique when utilizing email.**

- 10. What percentage of patients researched your practice online prior to scheduling their first appointment?**

- 11. What percentage of patients referred to you by “word of mouth”, researched your practice online prior to scheduling their first appointment?**

- 12. What do you think patients see when they research your practice online?**

c. After their visit:

18. Describe your strategy for handling negative and less than desirable reviews posted about your practice on major review websites (Google, Facebook, Yelp, HealthGrades, etc.):

19. Who in your office is consistently monitoring your online reviews?

20. Describe how you are consistently generating new content for your practice online.

21. What was your practice revenue the last calendar year?

22. What are your revenue goals?

23. How do you envision your PRACTICE'S BRAND evolving over the next 3-5 years?

24. Are referrals important to you?



25. How many referrals are you currently getting per month?

26. How are you engaging your patients to generate more referrals?

27. How are you building awareness about your practice within your local community?

Please return this completed questionnaire **prior** to your call
Email: analysis@mydentalagency.com | fax: 727-255-5132