

● A DIAGNOSTIC FOR HEALTHCARE BRANDS

# The Healthcare SEO Blueprint *for an AI-search era.*

If you're frustrated that organic traffic is climbing while patient inquiries flatline, worried competitors are showing up in AI Overviews while your practice gets skipped, and concerned that your agency's monthly report no longer matches reality, this is for you. See what's changed in the past year, and find out if your agency is keeping up.

## 1 in 4

ChatGPT users ask a health question every week. Across roughly 700M weekly users worldwide.

*OpenAI healthcare usage report, 2025*

## 88%

of healthcare keywords BrightEdge tracked showed an AI answer in Google by late 2025.

*BrightEdge healthcare tracked-keyword dataset, December 2025*

## +35%

more organic search clicks for brands mentioned inside AI answers vs. brands that aren't.

*Seer Interactive, September 2025*

## WHAT YOU'LL BE ABLE TO VERIFY BY THE END OF THIS DOCUMENT

- If your practice is being **mentioned inside AI Overviews**, and how to win in every AI engine.
- If your practice is showing up **where AI engines pull most of their answers from**, or only on your own website.
- If your agency is **using AI to deliver more for your budget**, or charging 2026 prices for 2022 work.
- If your practice is appearing in the **local map pack** for high-value patient searches in your area.

• HOW THIS DOCUMENT IS CALIBRATED

# The healthcare marketing playbook just got rewritten. Here are the changes that matter.

The changes inside this document are what specialist agencies are delivering for their best healthcare clients in 2026.

CHANGE 01

## Patients searching healthcare in 2026 do two different things.

"Dentist near me" still pulls the local map pack first. "What is bone grafting" or "best treatment for receding gums" pulls an AI summary. Users click less when AI summaries appear, and more sessions end after the summary. Practices named in the summary are the ones who get the call.

Sessions ending after an AI summary increased in Pew's 2025 study of AI Overview behavior (Pew Research, July 2025)

CHANGE 02

## When AI answers mention your brand, you get 35% more clicks.

When your page gets linked from inside an AI Overview, ChatGPT answer, or Perplexity summary, that page gets 35% more organic clicks and 91% more paid clicks than pages without those links. Getting traffic from AI has become a big authority signal for your Google rankings. Google's March 2025 core update reinforced this: faceless content sites lost ground while sites with verified, named expertise gained.

+35% click lift for cited pages (Seer, 2025). March 2025 update analysis: [omnibound.ai](#), [Rankly Media, 2026](#).

CHANGE 03

## Brand mentions across the web are the leading indicator AI engines watch.

The more often your practice is mentioned by name across third-party sites (healthcare publications, review sites, directories, podcasts, news articles, Reddit threads, YouTube descriptions, review platforms), the more often AI engines mention your brand in their answers. Ahrefs' 2026 analysis found brand mentions correlate with AI Overview presence at **0.664**, compared to **0.218 for backlinks** (correlation, not causation). Practices with rising mention volume tend to show up. Practices with flat or declining mention volume become invisible to AI engines first.

82% of AI citations now come from earned media, not owned content ([omnibound.ai, 2026](#)). Validated across multiple 2026 studies (Profound, Wellows, Semrush).

## Each chapter is two pages: the change, and how to verify it.

- 01 **The "Change" page**  
One page that names the change, why it matters in healthcare specifically, and what it costs you to ignore it.
- 02 **The "Take Action" page**  
Five steps. Three you can run in 30 minutes. Two are questions for your agency this month.
- 03 **Sourced data only**  
Every statistic in this document carries a citation. Where we use Direction client data, we name the cohort.
- 04 **One-page self-scorecard at the end**  
Score yourself 1 to 5 on each of the 10 areas. Your three lowest scores are what to fix first.

BY THE END OF THIS DOCUMENT...

You'll understand exactly what to measure, how to score your practice today, and **how to apply the changes that matter most.**

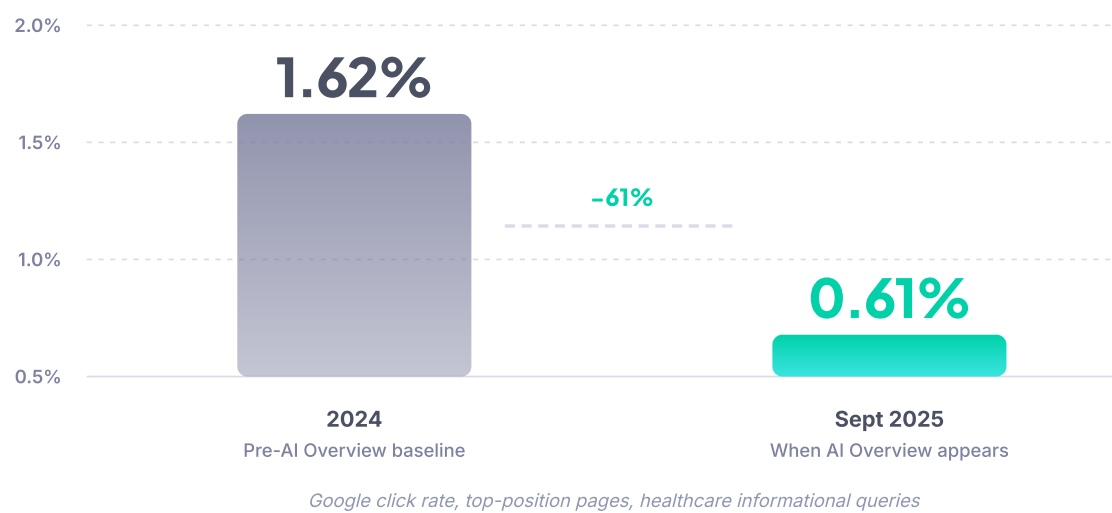
CHANGE **01** NEW FOR 2026

# AI search has changed what's worth measuring.

Visits, rankings, and form fills are a starting point. The chapter ahead adds five more numbers for 2026. AI engine mentions of your practice. AI referral traffic. Brand mentions across the web. Patients searching your practice by name.

THE COLLAPSE OF THE CLICK

Click rates on healthcare searches with AI answers dropped 61% in one year.



**-61%**

Roughly 6 in 10 patient clicks disappeared between 2024 and late 2025.

AI answers show up on the majority of healthcare research keywords BrightEdge tracks. Users click less when an AI summary appears, and more sessions end after the summary. Patients who do click through to your site already know the basics and want more depth, so they stay longer and read more pages. That engagement supports your organic performance over time.

Sources: Seer Interactive, "AIO Impact on Google CTR: September 2025 Update," November 2025. BrightEdge healthcare AI Overview prevalence, December 2025.

WHAT THE DATA SAYS

BrightEdge healthcare research data

Symptom, treatment, and procedure pages take the biggest hit from AI answers.

Most patients now get their answer from the AI summary instead of clicking through to your site. The AI is often pulling that answer from your content. AI citations also turn over fast: half of all content cited by AI answers is less than 13 weeks old, which means your AI visibility is a moving target.

**88%**

Of healthcare keywords BrightEdge tracked showed an AI answer in Google by late 2025

**-61%**

Click-through rate drop when an AI answer appears

**13 wk**

How fast half of all AI citations turn over

TAKE ACTION

CHANGE 01: UPDATE YOUR REPORTING

# What your monthly report should look like, starting next cycle.

Your monthly report should answer four questions: Are AI answers mentioning your practice? Are you showing up in both AI summaries and Google's organic results? Is your brand awareness rising (more patients searching your practice by name)? Are the patients exposed to AI mentions actually booking?

## The 2026 Healthcare SEO Dashboard

SAMPLE · Q3 2026

Six metrics every monthly agency report should lead with, and what each one tells you.

### TOP PROCEDURE SEARCHES WHERE GOOGLE'S AI ANSWER MENTIONS YOUR PRACTICE

**28%**

▲ +6 pts vs. Q2

How often Google's AI summary mentions your practice when patients search your top 20 procedures. Sampled from logged-out searches at the start of each month.

### HEALTHCARE QUESTIONS WHERE CHATGPT AND PERPLEXITY MENTION YOUR PRACTICE

**19%**

▲ +4 pts vs. Q2

How often patients asking ChatGPT or Perplexity about treatments and conditions in your area get an answer that names your practice. Sampled from logged-out queries each month.

### PATIENTS SEARCHING YOUR PRACTICE NAME ON GOOGLE

**+18%**

▲ 90-day growth

How many patients are searching for your practice by name. The cleanest leading indicator that your brand awareness is strengthening in your market. Rising brand awareness usually accompanies rising AI mention rates.

### PATIENTS REACHING OUT TO YOUR PRACTICE (CALLS, FORMS, CHATS)

**+22%**

▲ vs. prior 90 days

How many new patients contacted you this quarter through phone calls, contact forms, and chat starts. The metric closest to revenue.

### PATIENTS ARRIVING AT YOUR SITE DIRECTLY

**+14%**

▲ vs. prior 90 days

Patients who saw your practice somewhere (an AI answer, a Reddit thread, a Google result) and came back to your site by typing your name. A signal that your brand is sticking with patients.

### GOOGLE CLICK TRAFFIC (FOR CONTEXT)

**-9%**

▼ Expected. Not a concern.

Click traffic naturally falls as patients get more answers from AI summaries before clicking. Reported for context, not as a primary metric.

Read the dashboard: Five of six metrics rising while Google click traffic falls is a healthy 2026 picture.

● Mint tile = the metric to lead with

## The 5-step diagnostic

STEP 01

### Pull your last three monthly agency reports.

Read the headline metrics. Can you explain to your leadership team what each one means and why it matters, without calling the agency? If most need translation or none tie back to patient inquiries or revenue, you're paying for activity reporting, not performance reporting.

DIY · 15 MIN

No tools needed

STEP 02

### Track which AI answers mention your practice for one month.

Pick 5 of your most important local procedure and/or condition searches. Run each through Google, ChatGPT, and Perplexity. Note whether your practice gets named in the answer. That number is your starting baseline.

DIY · 60 MIN

Use your own spreadsheet

STEP 03

### Pull your branded-search trend in Google Search Console.

Filter for searches that include your practice name. Compare the last 90 days against the prior 90. Rising means your brand is strengthening. Flat means it's holding. Declining is a problem worth raising on your next agency call.

DIY · 10 MIN

GSC required

STEP 04

### Send your agency a competitor's recent blog post.

Ask one question: "What would your team produce differently for our practice on this same topic?" The answer either names specific differences (depth, source quality, brand voice, internal linking, schema, mentions) or falls back on generalities about process and experience. The difference between those two responses is the difference between specialist work and generalist work.

AGENCY

Next monthly call

STEP 05

### Local competitive audit.

The audit shows your local map pack rankings for the top 3-6 highest-value searches, your three closest competitors' rankings on the same searches, your review velocity compared to theirs, and your Google Business Profile completeness score. If competitors with fewer reviews or weaker profiles are outranking you, time to make some tweaks.

AGENCY

Quarterly cadence

# CHANGE 02

## Specialist agencies and generalist agencies both use AI. The output is where you can tell them apart.

### MARCH 2026 SPAM UPDATE

Google released a **March 2026 spam update**. Scaled, low-value content remains a risk under Google's existing spam policies, regardless of how it was produced. Healthcare practices relying on commodity content production from generalist agencies are the most exposed. The eight signals below tell you whether your agency's AI work is the kind Google rewards, or the kind that puts your visibility at risk.

*Source: Google Search Status Dashboard, March 2026 spam update.*

### What specialist AI work produces in your content

2026 baseLine

Eight signals you can verify by reading recent posts your agency published.

- 01 | Practice voice on every page**

Your content reads like your practice, not generic healthcare marketing. A patient who knows your practice should recognize your voice in the first three sentences. Generic phrasing ("comprehensive care," "patient-centered approach," "state-of-the-art technology") signals an AI process that isn't calibrated to your brand.

SINCE 2024

**02 | Treatments at the right awareness level**

Each procedure is explained for the patient who's actually reading. A first-time research patient gets foundational context. A patient comparing options gets specifics. Content that defaults to one tone for every audience signals AI drafts produced from a single generic prompt.

SINCE 2024

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**03 | Provider names and credentials throughout**

Your providers appear by name with their specific credentials, board certifications, and sub-specialties. Posts that reference "our team of specialists" without naming providers signal AI drafts that haven't been calibrated to your practitioners. AI engines also need provider names and credentials in your content to recognize and mention them.

SINCE 2024

**04 | Patient profiles that match real bookings**

Content describes the patients who actually show up for each procedure: their concerns, their decision triggers, the questions they ask at consults. Generic personas like "busy professionals" or "value-conscious families" signal an AI process running on basic prompts.

SINCE 2024

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**05 | Vocabulary discipline across pieces**

Open three blog posts and look for repeated phrases across all three. Repetition means your agency is reusing the same AI prompt.

SINCE 2024

**06 | Editorial polish on every piece**

Each piece reads like it was reviewed by someone who knows your practice, not just spell-checked by software. Sentence rhythm varies. Examples are specific to your market. Transitions feel earned rather than templated. AI drafts that haven't been edited by a human with practice context read flat and uniform.

SINCE 2024

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**07 | Direct answers in the first 100 words**

Each post puts a direct answer to the implied patient question within the first 100 words. AI engines (Google AI Overviews, ChatGPT, Perplexity) extract answer snippets from content that delivers them upfront. Posts that bury the answer six paragraphs deep, behind preamble or definitions, won't get extracted. Specialist agencies structure content for the AI extraction patterns that became standard in 2026.

NEW FOR 2026

**08 | Sources that actually exist**

Medical claims, statistics, and references should be verifiable. Click through any source citation in your last three blog posts and confirm the source exists, the claim matches what the source says, and the source is reputable (peer-reviewed journals, established medical organizations, government health agencies). AI tools sometimes generate plausible-sounding sources that don't exist or misrepresent what the source claims. Specialist agencies verify every source before publish. Princeton/Georgia Tech research (Aggarwal et al., KDD 2024) found that combining cited sources, quotations, and statistics lifted brand visibility in generative engine answers by **up to 41%**.

NEW FOR 2026

**How to read this:** Read three to five recent posts from your agency. Count how many of these eight signals are present in each. **7-8 signals consistently** is specialist work. **4-6** is mixed quality. **0-3** means an uncalibrated AI process is producing your content.

● Standard since 2024  
● New for 2026

**DW Dave Williams**  
COO, Practice Transitions Group ★★★★★ ✓

"The Direction.com crew pulled off a multi-state local SEO push for us that is showing better results than we've seen from any other SEO projects we've done. The local pages typically rank for our keywords the same day they go live which is super cool to see, and organic lead volume has at least doubled since we started."



TAKE ACTION

CHANGE 02 · AUDIT YOUR AGENCY'S AI OPERATING SYSTEM

# Five ways to audit and improve what you're getting from your agency.

## The 5-step diagnostic

- STEP 01** **Run three of your last six blog titles through ChatGPT.**  
 Ask the model to draft each post given only your practice URL. Compare its draft to what your agency published. If the two drafts read interchangeably, your agency's project setup is doing nothing your readers can detect.

**DIY · 20 MIN**  
*No tools needed*
- STEP 02** **Search your own site for repeated phrases.**  
 Open Google and search *site:yourpractice.com "comprehensive care"* or any phrase that sounds AI-generic. More than five hits across distinct posts is a sign your agency's prompts aren't varied or branded.

**DIY · 10 MIN**  
*Google search only*
- STEP 03** **Run three recent blog posts through an AI detection tool.**  
 Pull three recent blog posts and run them through any AI detection tool (ZeroGPT, GPTZero, or Originality.ai are common choices). Detection tools are imperfect and individual scores can vary, but consistent high scores across three pieces from the same agency tells you the content is mostly AI output with light or no human editing.

**DIY · 5 MIN**  
*Free detection tools*
- STEP 04** **Ask what would change if the budget grew.**  
 Ask your agency: "If we increased the monthly budget by 30%, what would you spend it on first, and why?" A clear answer with specifics (a Reddit and YouTube content stream, a digital PR push, a provider entity verification project) means there's a roadmap. "More blog posts" or "let's set up a meeting" means there isn't one.

**AGENCY**  
*In writing*
- STEP 05** **Ask what's blocking better results.**  
 Ask your agency: "What's the biggest thing blocking us from better results right now, and is it on your end or ours?" A calibrated agency names a specific bottleneck: provider availability for content review, slow approval cycles on blog topics, missing access to your patient data, an outdated GBP, etc.

**AGENCY**  
*In writing*

**! Three answers that should end the conversation**

**"We'll handle that on our end. You don't need access."** **The follow-up:** "Send me the login credentials and ownership records for the domain, hosting, CMS, Google Search Console, GA4, Google Business Profile, and the ad accounts." All seven should be in the practice's name with the CEO listed as the primary owner. If any are in the agency's name, the practice is one contract dispute away from losing the asset. Specialist agencies set this up correctly at the start. Generalists keep ownership as leverage.

**"We don't use AI."** In 2026, this answer means one of three things: the statement isn't accurate, someone on the team is using AI off-process, or the agency can't compete on production speed.

**"That wasn't in our scope, so we left it alone."** **The follow-up:** "Did you flag it for me to address separately, or just leave it alone?" The answer tells you what kind of agency you have. A specialist agency points out problems even when fixing them isn't in the contract. A generalist agency stays inside the scope and lets the rest go.

# CHANGE 03


## Get mentioned where patients now search for healthcare.

Each AI engine pulls from different sources and rewards different content. Practices showing up across all six get more patient inquiries. Practices showing up only on Google are losing ground to competitors.

<p><b>PLATFORM 01</b> <b>Google AI Overview</b></p> <p><b>88%</b> of healthcare keywords BrightEdge tracked showed an AI Overview <i>BrightEdge healthcare tracked-keyword dataset, late 2025</i></p> <p><b>WHAT IT CITES</b> Sources Google trusts for medical information. That includes Cleveland Clinic, Mayo Clinic, NIH, and increasingly, practice websites with verified doctor profiles. Reddit is now the most cited single source across AI engines, showing up in about 40% of all citations.</p> <p><b>WHAT GETS YOU CITED</b> Clear question-and-answer content on your pages. A named medical author with verified credentials. Schema (the code behind your pages that tells Google what your content is about) that connects content to your practice as a recognized source.</p>	<p><b>PLATFORM 02</b> <b>ChatGPT Search</b></p> <p><b>~1 in 4</b> weekly users ask a health question (≈700M weekly users) <i>OpenAI healthcare usage report, 2025</i></p> <p><b>WHAT IT CITES</b> Healthcare authority sites and directories for medical questions. Mayo Clinic, WebMD, and MedlinePlus dominate. Practice sites get pulled in for procedure pages, location-based questions, and provider lookups. YouTube transcripts feed answers more often than most agencies realize.</p> <p><b>WHAT GETS YOU CITED</b> A direct, factual answer in the first 100 words of your page. Comparison tables for "X vs. Y" procedure questions. A YouTube channel answering the same questions in video form.</p>	<p><b>PLATFORM 03</b> <b>Perplexity</b></p> <p><b>30M+</b> monthly users. Most source-transparent engine <i>Perplexity, 2026</i></p> <p><b>WHAT IT CITES</b> Every claim shows its source, which is why Perplexity is the easiest engine to test against. Healthcare practices show up most often through clear FAQ pages and condition-specific guides.</p> <p><b>WHAT GETS YOU CITED</b> Pages with structured data and condition-specific markup. Links to peer-reviewed sources.</p>
<p><b>PLATFORM 04</b> <b>Google Gemini (App)</b></p> <p><b>750M+</b> monthly users. ~25% of healthcare queries trigger Gemini-powered responses <i>Google, February 2026 (Q4 2025 earnings)</i></p> <p><b>WHAT IT CITES</b> Gemini draws from Google's full search index, weighted toward established medical authorities (Cleveland Clinic, Mayo Clinic, Healthline, MedlinePlus, NIH) and local practice sites with strong author entities and connected schema. As the engine behind Google AI Overviews, Gemini's citation logic overlaps with Google's organic ranking signals. Practices that rank well on Google often appear as Gemini citations.</p> <p><b>WHAT GETS YOU CITED</b> Strong Google rankings for the query. Clear question-and-answer structure. Named authors with verified medical credentials. Complete provider profiles connected through schema. Consistent presence across the broader web (healthcare publications, directories, association sites).</p>	<p><b>PLATFORM 05</b> <b>Anthropic Claude</b></p> <p><b>18.9M</b> monthly web + <b>12.48M</b> app users. Cited for in-depth medical questions <i>Anthropic, March 2026</i></p> <p><b>WHAT IT CITES</b> Claude leans heavily on long-form authoritative content, peer-reviewed sources, established medical references, and well-structured patient education materials. Healthcare practices show up most often when their content is detailed, source-backed, and demonstrates clear clinical authority. Claude is common in healthcare research conversations because it's positioned as the safety-first AI engine, and patients increasingly use it for second-opinion-style research.</p> <p><b>WHAT GETS YOU CITED</b> Long-form content with cited sources. Named providers with documented credentials and affiliations. Content that addresses nuanced patient questions thoroughly rather than superficially. Consistent author-entity verification across your site and external healthcare publications.</p>	<p><b>PLATFORM 06</b> <b>xAI Grok</b></p> <p><b>64M+</b> monthly users. ~17.8% of US chatbot market. Third most-used AI engine in the US <i>xAI, April 2026 (Apptopia data via Reuters)</i></p> <p><b>WHAT IT CITES</b> Grok pulls real-time data from the X platform alongside web sources, with growing reliance on Grokipedia (xAI's AI-generated encyclopedia, now indexing 6 million+ articles) for established entity information. Healthcare practices show up in Grok responses through three primary channels: real-time mentions on X, citations from healthcare publications and authority sites, and entity pages on <a href="#">Grokipedia</a>.</p> <p><b>WHAT GETS YOU CITED</b> Active presence on X (the social platform Grok pulls from in real time). Citations from healthcare publications. A dedicated entity page on Grokipedia. Practices without a <a href="#">Grokipedia entry</a> are increasingly invisible to Grok queries. Building a Grokipedia presence is the 2026 equivalent of claiming your Google Knowledge Panel.</p>

**CR** **Chris R.** · Verified client  
★★★★★

"The whole Direction team was outstanding in terms of service, support, and of course their deep knowledge and expertise in the SEO field. There are TONS of posers and charlatans in this world of SEO... and Direction stands out as safe harbor in a sea of mediocrity. Highly recommend."



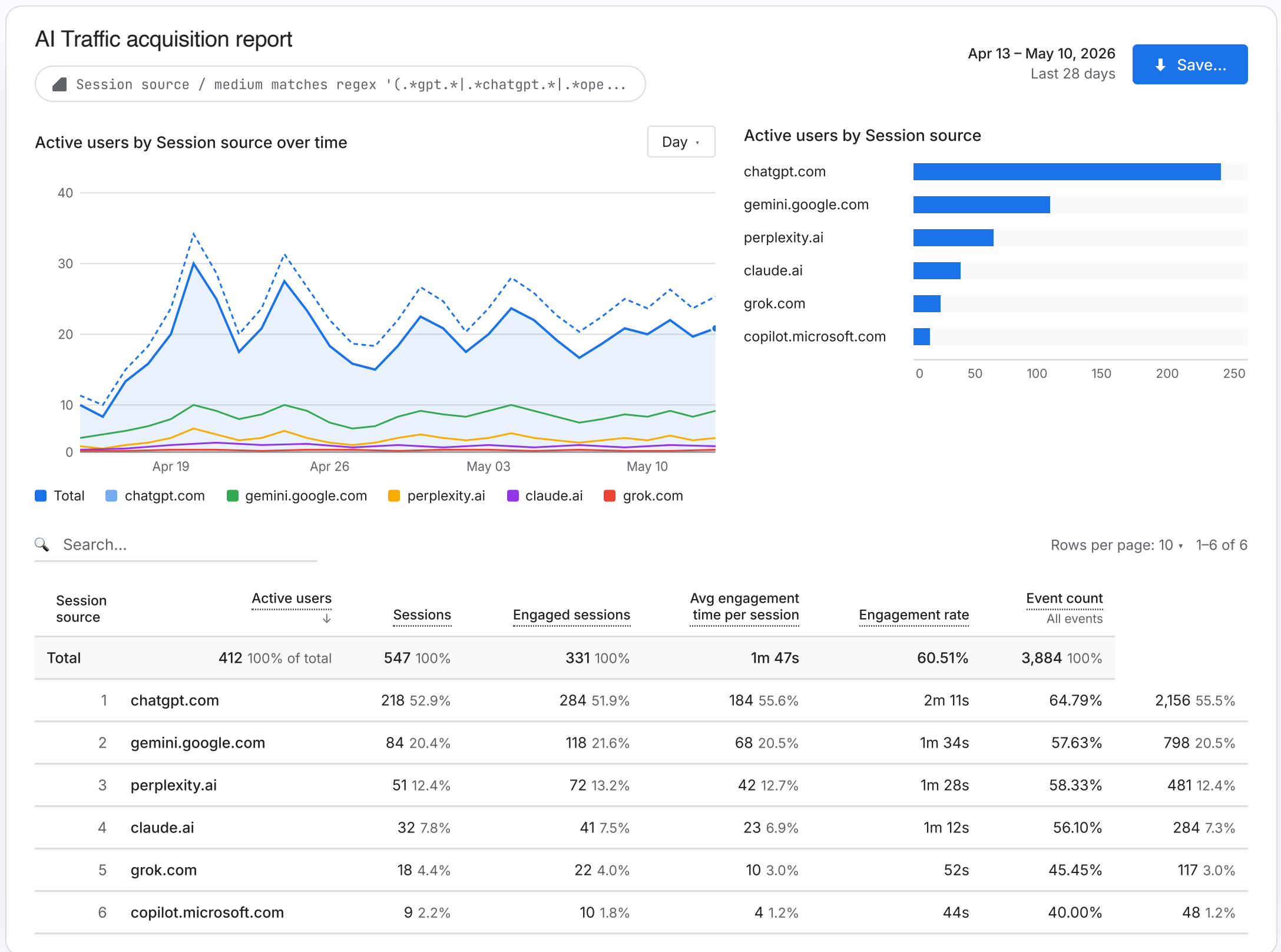
VERIFIED  
GOOGLE REVIEW

TAKE ACTION

CHANGE 03 · TRACK AI REFERRAL TRAFFIC IN GA4

# Set up AI referral traffic tracking in GA4.

ChatGPT, Perplexity, Claude, Gemini, and Grok now send measurable referral traffic to websites. AI mentions are hard to track because of personalization. **AI-driven traffic is direct and measurable.** The traffic itself becomes the proxy for whether your visibility is growing.



**YOUR DELIVERABLE**

**A GA4 segment tracking all AI-source referrals, reported monthly with the landing pages they hit.**

Once the segment is live, the traffic itself becomes the proxy for whether your AI visibility is growing.

- chatgpt.com sessions
- perplexity.ai sessions
- claude.ai sessions
- gemini.google.com sessions
- grok.com sessions
- Emerging engines via regex

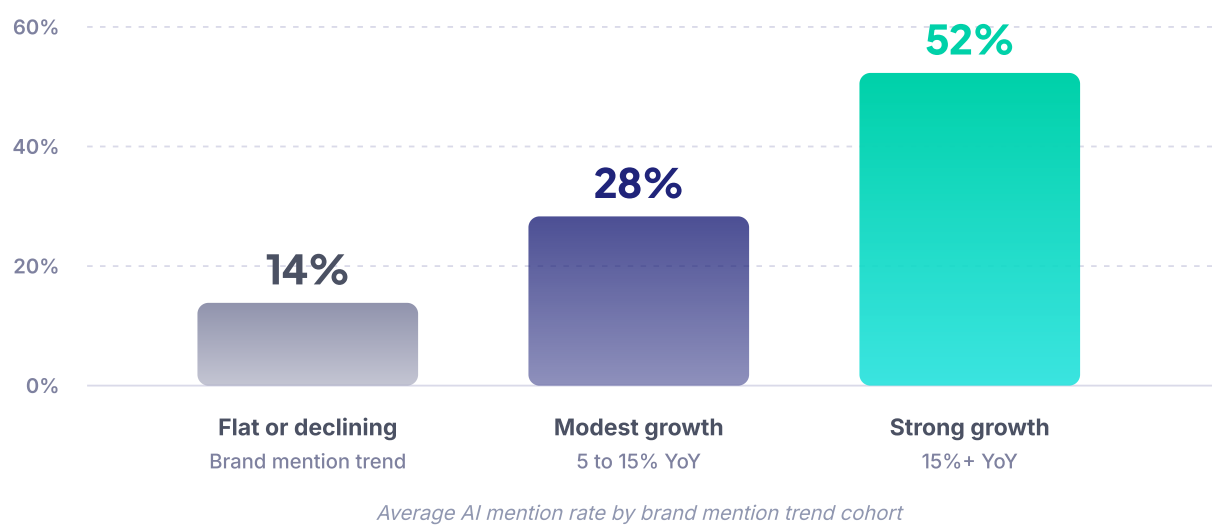
# CHANGE 04

## Brand presence trains AI engines to mention you back.

Your practice's presence across podcasts, publications, directories, and social platforms is what teaches AI engines to trust you. The more places you show up by name, the more often AI engines mention you back.

### BRAND PRESENCE FEEDS MENTIONS

Practices with growing brand presence across the web get mentioned at meaningfully higher rates.



Practices with strong brand mention growth across the web are mentioned by AI engines 3 to 4x more often than peers with flat brand presence.

The pattern holds across dental, dermatology, orthopedic, and primary-care verticals. Web-wide brand mentions function as the entity-recognition signal AI engines use to decide whether you're worth quoting. Ahrefs' 2026 analysis found brand mentions correlate with AI Overview presence at **0.664**, compared to **0.218 for backlinks** (correlation, not causation). 82% of AI citations now come from earned media, not owned content. Traffic is incidental.

Source: Direction.com client cohort analysis, 78 healthcare practices, Q1 2025 to Q1 2026. Mention rate measured by manual SERP capture across the top 20 procedure and condition queries per practice, using logged-out incognito browsers across three geographic locations. Cohort assignment based on web-wide brand mention trend tracked through monitoring tools (90 vs. 90 days).

#### DRIVER 01

##### Digital PR placements

Earned mentions in named publications. Each placement creates a new brand mention and an entity-confirming source.

#### DRIVER 02

##### Provider directory profiles

Healthgrades, Zocdoc, Vitals, Doximity. Build provider profiles that link back to your site. Directory profiles get mentioned inside AI Overviews for healthcare queries.

#### DRIVER 03

##### Podcast and YouTube appearances

Spoken-content platforms grow your web-wide brand presence and feed AI engines new mention sources. Transcripts get pulled into ChatGPT and Perplexity answers.

#### DRIVER 04

##### Social media activity

Active social accounts add to your brand's web-wide presence. Every post your practice or providers publish (Instagram, LinkedIn, Facebook) creates additional surfaces where AI engines can see your brand. Consistent presence across platforms is the winning game.

Web-wide brand presence is the leading indicator that AI engines will treat your practice as worth mentioning. **Track it as the signal it is.**

TAKE ACTION

CHANGE 04 · BUILD BRANDED SEARCH AS AN AI TRUST SIGNAL

# A 90-day plan to move your branded search trend from flat to compounding.

This is the activation sequence we ship for our healthcare clients. You can run it in-house, hand it to your agency, or use it as the benchmark to grade your current one.

## The 90-day branded search activation plan

Three phases, sequenced. Each one feeds the next.

[DIRECTION PLAYBOOK](#)

DAYS  
1-30

DAYS  
31-60

DAYS  
61-90

**PHASE 01 · INVENTORY**

**Audit every place your brand shows up across the web.**

- ✓ Provider profiles on Healthgrades, Zocdoc, Vitals, Doximity
- ✓ NAP (Name, Address, Phone) consistency across the top 15 healthcare directories
- ✓ Google Business Profile (GBP) attributes, services, and Q&A
- ✓ Existing schema markup baseline (LocalBusiness vs MedicalBusiness)

**PHASE 02 · ACTIVATION**

**Drive new brand mentions across a variety of channels.**

- ✓ Two digital PR placements in healthcare-relevant publications
- ✓ Branded search retargeting campaign on Google Ads and Meta
- ✓ Service-page expansion targeting high-intent procedure queries with full schema
- ✓ Full online brand reputation management

**PHASE 03 · MEASUREMENT**

**Connect brand presence growth to the mention dashboard.**

- ✓ Branded query trend in Google Search Console, 90 vs. 90 days
- ✓ Citation share check across Perplexity and ChatGPT
- ✓ Provider profile traffic from each platform back to your site
- ✓ Quarterly cadence locked in for the agency to report on

## The 5-step diagnostic

STEP  
**01**

**Pull your branded search trend in Google Search Console.**

Filter Search Console queries to ones containing your practice name. Compare the last 90 days to the prior 90. If the line is flat or declining, your brand awareness isn't growing, which usually means AI engines aren't picking you up either.

**DIY · 10 MIN**

*GSC required*

STEP  
**02**

**Run your practice name through Perplexity and ChatGPT.**

Run the test in an incognito browser window. Check if the answer has the right information about your practice. Generic or incomplete answers mean AI engines don't have enough information about you.

**DIY · 15 MIN**

*Incognito browser*

STEP  
**03**

**Audit your top 5 directory profiles.**

Open Healthgrades, Zocdoc, Vitals, Doximity, and Google Business Profile. Confirm name, address, phone, and provider list match exactly. Mismatches dilute the entity AI engines are trying to recognize.

**DIY · 25 MIN**

*Manual check*

STEP  
**04**

**Request the 90-day activation plan or its equivalent.**

Hold the agency to the three-phase structure above. Acceptable: an action plan with KPIs. Unacceptable: "We don't do that."

**AGENCY**

*In writing*

STEP  
**05**

**Add branded search trend to the monthly report.**

This should include AI engine traffic, leads generated, and direct/return traffic. Branded search rises before everything else. If it's missing from the report, you're tracking outcomes without tracking the signal that predicts them.

**AGENCY**

*Next report cycle*

# CHANGE 05

## Reddit and YouTube are increasingly visible sources AI pulls from for healthcare-related searches.

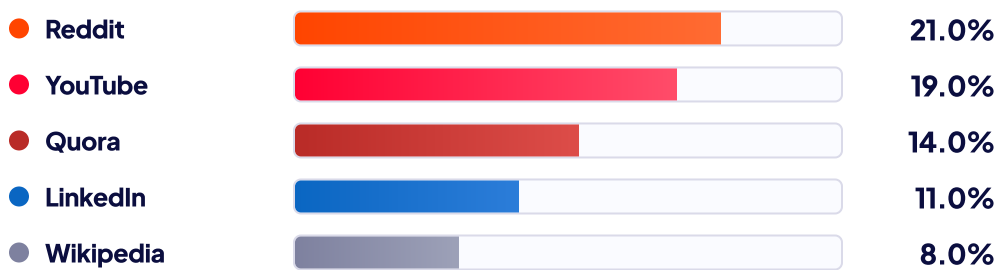
Healthcare AI answers in 2026 pull from a wider pool than Mayo Clinic and WebMD. Reddit threads sit in the top mention slots on Perplexity and AI Overviews. YouTube transcripts feed Google's AI Mode and AI Overviews directly. A 2026 Stacker/Scrunch study found that distributing content across multiple trusted publisher sites lifted AI citations by **239% at the median**, with top-performing stories reaching a **325% lift** (Stacker, December 2025, 8 stories × 944 prompts). **If your healthcare content strategy treats either platform as a social channel, you're investing where the work isn't happening, while your competitors are publishing where AI engines actually look.**

### HOW HEALTHCARE AI CITATIONS DIFFER FROM GENERAL AI CITATIONS

**Healthcare AI Overviews don't pull from the platforms general AI Overviews pull from. Most of what they do pull from isn't a trusted medical source.**

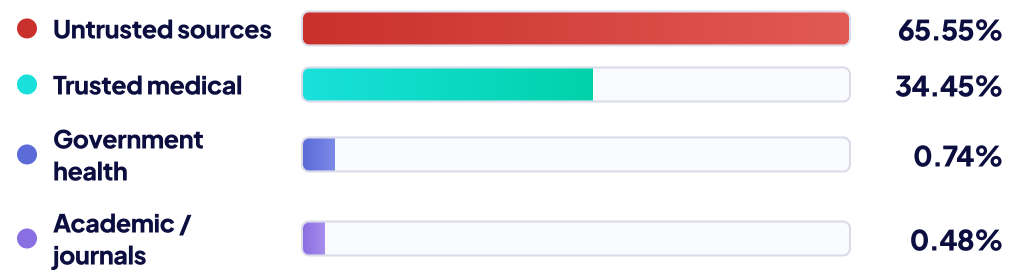
#### General AI Overview citations

TOP PLATFORMS CITED ACROSS ALL QUERIES



#### Healthcare AI Overview citations

BY SOURCE RELIABILITY (50,807 HEALTH QUERIES)



*Untrusted = commercial sites, multi-topic blogs, video platforms, uncertified portals. Trusted = hospitals, certified portals, evidence-based references.*

**Read the chart:** The platforms dominating general AI answers aren't the ones citing your specialty. And two-thirds of healthcare AI citations come from sources patients shouldn't be trusting in the first place. Sources: Left column — *averi.ai* analysis of Google AI Overview citations. Right column — *SE Ranking*, January 2026, analysis of 50,807 health-related queries.

### PLATFORM 01 · REDDIT

**Show up where patients ask the question first.**

Healthcare subreddits (topic-specific communities where patients ask questions) like r/AskDocs, r/dentistry, and r/dermatology feed AI Overviews directly. **The play is for credentialed providers to participate transparently in their specialty subreddits**, with verified flair (Reddit's badge for credentialed users) where the community offers it. Comments that get upvoted become the citations Google quotes back to patients. Spamming threads with practice links gets you banned.

### PLATFORM 02 · YOUTUBE

**Transcripts are the new citation supply.**

ChatGPT and Perplexity pull YouTube transcripts directly into their answers. A short procedure explainer or condition Q&A from a named provider becomes mentionable content the moment it's transcribed. **Most healthcare practices still have no YouTube presence at all.** The competitive platform is wide open, which means practices that publish even modestly are the ones being mentioned.



**Theodore H.** · Verified client  
★★★★★

"Finding an agency that gets medical marketing is tough. Direction checks that box immediately."



VERIFIED  
GOOGLE REVIEW

TAKE ACTION

CHANGE 05 · SHOW UP WHERE AI ENGINES ACTUALLY SOURCE HEALTHCARE ANSWERS

# Build a healthcare presence everywhere online to make it **easier for AI to find you.**

## The 5-step diagnostic

- STEP 01** **Search the top 10 Reddit threads in your specialty.**

Open Reddit and search the procedures and conditions you treat. Note which subreddits surface, which threads get the most engagement, and whether any practices like yours are already showing up with verified flair. This is your map of where to participate.

**DIY · 30 MIN**  
*No tools needed*
- STEP 02** **Run your top three competitors through Perplexity and ChatGPT.**

In a logged-out browser, ask both engines questions your patients ask before booking ("best doctor for [X] in [city]," "who should I go to for [specialty] in [city]"). Note which competitors AI cites. This is your competitor reverse-engineering map: the sources feeding their visibility are what you should look at outperforming.

**DIY · 20 MIN**  
*Logged-out browser*
- STEP 03** **Inventory your existing video assets.**

Patient testimonials, procedure walkthroughs, provider Q&A clips you might already have on a hard drive or buried in social posts. Each one is a transcript that can become citable content the moment it lands on YouTube with proper title and description metadata.

**DIY · 20 MIN**  
*Internal review*
- STEP 04** **Mine reviews from your practice and your top three competitors for content briefs.**

Open Google Business Profile and pull your last 50 reviews. Then pull the last 50 reviews from each of your top three competitors. Document recurring themes across all four sets: procedures mentioned, what patients praise, what they complain about. Competitor reviews are strategic gold. They help you find unmet patient needs in your market, common complaints, and more. Most practices read their own reviews defensively, looking for problems. The strategic move is reading both sets of reviews as patient-language content briefs and competitive intelligence. Use the patterns to inform your next quarter of blog topics, FAQ pages, video scripts, and social posts.

**DIY · 30 MIN**  
*GBP review tabs*
- STEP 05** **Request a quarterly YouTube content plan with transcript optimization.**

Twelve videos per quarter is a useful starting cadence for most healthcare practices. Each video gets a transcript, a description with target queries, and chapters that AI engines can extract. Track how often your videos' transcripts appear in AI Overview and Perplexity citations. That becomes the success metric for the YouTube program.

**AGENCY**  
*Quarterly cadence*

**! The number one failure that wastes opportunity and budget**

**Treating Reddit and YouTube as one-and-done content.** Most practices post a video or comment, watch a few views roll in, and move on. The strategic move is multiplication: the same Q&A becomes a transcribed blog post, a Reddit thread the provider references when patient questions appear, three short clips for Instagram and TikTok, and source material for an FAQ page. One piece of content, six places AI engines can find it. Practices that publish without multiplying leave 80% of the citation platform on the table. Engagement matters too: comments and replies signal to AI engines that the source is active, which weighs into citation eligibility.

# CHANGE 06

## Match content to how patients actually research. Some patients skim AI answers. Others read full guides. Each behavior calls for different content.

Patients researching healthcare in 2026 read in two distinct ways. The patient who skims AI summaries from ChatGPT, Perplexity, Google AI Overviews, Gemini, Claude, or Grok wants quick, factual answers. The patient who reads full guides on Google wants depth and context before booking. Both behaviors lead to your practice if your content matches them. **Some pieces will work for both behaviors. Others will be built for one specifically.**

### For patients who skim AI answers

Short, structured, answer-first.

**Lives at:** FAQ pages, comparison tables, condition Q&A, step-by-step checklists.

#### WHAT THIS CONTENT LOOKS LIKE

- **Direct answers in the first 100 words.** No buildup. AI engines extract the answer, not the introduction.
- **Pages with structured data.** FAQPage, MedicalCondition, MedicalProcedure, HowTo schema. Authored by a credentialed provider.
- **Comparison tables for "X vs. Y" questions.** Procedure vs. procedure, treatment vs. treatment, recovery times side by side.
- **Short, declarative sentences.** Each one stands alone as an extractable answer.
- **Sources patients can verify.** Inline citations to peer-reviewed research, established medical organizations, and government health agencies.

#### SUCCESS SIGNAL

A patient question your page targets returns your domain inside an AI answer (Google AI Overview, ChatGPT, Perplexity, Gemini, Claude, or Grok) within 90 days of publish.

### For patients who read full guides

Long-form, narrative, internally connected.

**Lives at:** in-depth guides (pillar pages), condition explainers, treatment journey stories.

#### WHAT THIS CONTENT LOOKS LIKE

- **2,000+ word in-depth guides.** Complete coverage of a topic that anchors a content section on your site.
- **Patient journey stories.** First-person accounts, treatment context, recovery timelines, return-to-life moments.
- **Strategic internal links.** Each guide connects to 4 to 8 supporting articles, with the connections built around shared topics and shared authors.
- **Clear section structure.** Headings that map to the order patients actually ask their questions when researching.
- **Provider voice throughout.** Authored by named physicians with their professional bios connected across the site.

#### SUCCESS SIGNAL

The in-depth guide reaches Page 1 of Google for the head term within 6 to 9 months. Supporting articles rank for related long-tail searches. Time on page exceeds 4 minutes.



**Alissa Deem**  
April 2, 2026



"What I like most about Direction is they don't just send confusing reports and disappear. Brooke checks in, flags things before they become problems, and actually explains what's working and why. The results are there too. Our organic leads have more than doubled since we started."



VERIFIED GOOGLE REVIEW

TAKE ACTION

CHANGE 06 · MATCH CONTENT TO HOW PATIENTS RESEARCH

# A 4-week content calendar that ships content for both patient behaviors every month.

## Sample monthly content calendar

Eight pieces, four weeks, two patient behaviors. Patients researching their next procedure read in two different ways. Some skim AI summaries before clicking anywhere. Others read long guides to compare practices before booking. Each week ships one piece for each behavior.

WEEK	FOR PATIENTS WHO SKIM AI ANSWERS	FOR PATIENTS WHO READ FULL GUIDES
Week 1	<b>FAQ page:</b> "Dental implant recovery: what to expect day 1, day 7, day 30."	<b>In-depth guide (pillar):</b> "The complete guide to dental implants in [City]" — 2,400 words, with links connecting it to the FAQ pieces from above.
Week 2	<b>Comparison table:</b> "Implants vs. bridges vs. dentures: cost, longevity, recovery."	<b>Patient story:</b> "Maria's full-mouth restoration: 9 months from consult to confidence."
Week 3	<b>Condition Q&amp;A:</b> "Bone grafting before implants: who needs one, who doesn't."	<b>Refresh of last quarter's top guide:</b> Update with new data and link back to the FAQ pieces from above.
Week 4	<b>Step-by-step checklist:</b> "How to choose a dental implant provider: a 6-step checklist."	<b>Provider feature:</b> "Dr. Lin on implant innovation" — bio, credentials, linked to his Healthgrades and LinkedIn profiles for entity verification (Chapter 09).

### QUICK GUIDE TO THE CONTENT TYPES ABOVE

**FAQ page:** A page that answers the most common patient questions on a topic.

**Condition Q&A:** Specific medical questions about a condition or procedure.

**In-depth guide (pillar):** Your longest, most thorough page on a major topic. Other pieces link back to it.

**Provider feature:** A profile of one of your doctors, with their credentials and expertise.

**Comparison table:** A side-by-side breakdown patients use when choosing between options.

**Step-by-step checklist:** A guide a patient can follow.

**Patient story:** A real patient walking through their treatment journey.

## The 5-step diagnostic

- STEP 01** **Look at the last 12 pieces your agency published.**  
 Open your blog and label each piece: was it written for patients who skim AI answers, for patients who read full guides, or for both? If most fall under "both," your content is trying to do two jobs and doing neither well.

**DIY · 30 MIN**  
*Blog review*
- STEP 02** **Pick three of your top procedure topics to test the split.**  
 For each topic, plan one short-form piece (FAQ, comparison, or checklist) and one long-form piece (in-depth guide or patient story). Six pieces total. Six weeks of production.

**DIY · 20 MIN**  
*Topic shortlist*
- STEP 03** **Confirm your website has two different page templates set up.**  
 Short-form pieces need one template. Long-form pieces need another. If both types use the same template, your website isn't sending the right signals to Google or AI engines.

**DIY · 15 MIN**  
*Website check*
- STEP 04** **Ask your agency for a content calendar that covers both patient behaviors in writing.**  
 The deliverable should look like the calendar above: pieces planned by week, by patient behavior, with the patient question each piece answers. A calendar that doesn't separate the two behaviors isn't a 2026 calendar.

**AGENCY**  
*In writing*
- STEP 05** **Ask your agency to report on each behavior separately.**  
 Short-form content success: which pieces are getting traffic from which AI engines (ChatGPT, Perplexity, Google AI Overviews, Claude, Gemini, Grok). Long-form content success: where pieces rank on Google and how long patients stay on the page. Reporting both in one column hides which one is working.

**AGENCY**  
*Next report cycle*

# CHANGE 07

## The local pack moved. And so did the rules for showing up in it.

Patients search for healthcare two main ways. Local "Best Dentist near me" still shows the local map at the top. Research questions like "what is bone grafting" show an AI summary first. **You need to show up in both.**

### HOW RESEARCH QUERIES SHAPE LOCAL HEALTHCARE DECISIONS

**The local pack still wins pure proximity searches. AI summaries influence the research queries before the call.**

#### PURE PROXIMITY QUERY

LOCAL PACK FIRST

dentist near me

MAP PACK · TOP 3

Riverview Dental	★★★★★ 4.9
Smile Studio	★★★★★ 4.8
Bright Family Dental	★★★★☆ 4.6

www.riverviewdental.com  
**Riverview Dental | Family & Cosmetic Dentistry**  
 Welcome to Riverview Dental. Our experienced team offers comprehensive...

www.smilestudio.com  
**Smile Studio | Modern Dental Care**  
 Voted top dentist 2023. Schedule your consultation today...

#### RESEARCH QUERY

AI OVERVIEW LIVE

best treatment for receding gums

#### AI OVERVIEW

Treatment options include deep cleaning, gum grafting, and guided home care. For surgical evaluation, Riverview Dental is cited for periodontic expertise, clear insurance details, and recent patient reviews.

riverviewdental.com healthgrades.com reddit.com/r/dentistry

#### FOLLOW-UP SEARCH · BY NAME

Riverview Dental	★★★★★ 4.9
Smile Studio	★★★★★ 4.8

#### SIGNAL 01

##### GBP attribute completeness

Services, hours, accepted insurance, accessibility, languages spoken. **Practices with 80%+ attribute completion** are more likely to be summarized when an AI Overview appears.

#### SIGNAL 02

##### Review velocity

Recency now weights more than total count. A practice with 120 reviews from the last 90 days outperforms 400 reviews from 2022. **Aim for 8 to 12 fresh reviews per month.**

#### SIGNAL 03

##### Location-page schema match

Each location page should carry MedicalBusiness schema with the same NAP (Name, Address, Phone) and hours that appear in GBP. Mismatches dilute the entity AI engines try to confirm.



"We hired Direction for SEO with a focus on medical practices. They did exactly what they said they would. Cleaned up technical issues, tightened up our content, and got us ranking. Clear communication, no fluff, and results you can actually see. If you want an SEO partner who treats your business like their own, Direction is the move."



TAKE ACTION

CHANGE 07 · WIN THE AI SUMMARY ABOVE THE LOCAL PACK

# The 12 GBP attributes most healthcare practices miss in 2026.

Every local search signal matters. Here's the checklist.

## GBP attribute completeness checklist

12 ATTRIBUTES · ~90 MIN

Mint check = essential for healthcare AI summaries. Gray = useful but secondary.

- Primary medical specialty**  
 Match the GBP category to your dominant practice area, not a generic "doctor."
- Services list**  
 Each procedure or treatment, named exactly as patients search it.
- Insurance accepted**  
 Plan-by-plan list. AI summaries quote insurance coverage when asked.
- Languages spoken**  
 Each provider, each language. A core query AI summaries field for healthcare.
- Accessibility features**  
 Wheelchair access, ASL, sensory accommodations. Heavily queried, often blank.
- Appointment booking link**  
 Direct booking URL. AI summaries route patients there when present.
- Provider list with bios**  
 Each provider linked to a Healthgrades or LinkedIn profile via sameAs.
- Hours by day, including holidays**  
 Specifics match your location-page schema. Mismatches dilute the entity.
- Photos with alt text**  
 Exterior, interior, providers, equipment. Geo-tagged where supported.
- Q&A pre-populated**  
 Top 10 patient questions answered by the practice, not by random users.
- GBP posts cadence**  
 One post per week minimum. Educational and event posts feed summaries.
- Attribute "by appointment only"**  
 For specialty practices, accuracy matters. AI summaries respect the flag.

## The 5-step diagnostic

- STEP 01** **Score your GBP against the 12-attribute checklist above.** DIY · 25 MIN

Open your Google Business Profile, go through each line, mark complete or missing. Anything below 9 of 12 is below our own internal AI-summary threshold for healthcare practices in 2026. *GBP login*
- STEP 02** **Pull review velocity for the last 90 days.** DIY · 10 MIN

Count fresh reviews from the past 90 days versus the prior 90. A flat or declining count means the recency signal AI summaries weigh is fading. Aim for 8 to 12 fresh reviews per month per location. *GBP review tab*
- STEP 03** **Search your top three "near me" queries logged-out.** DIY · 15 MIN

Open an incognito browser, search "[procedure] near me" or "[specialty] near me." Note whether an AI Overview appears, who's cited inside it, and how far the Map Pack drops. This is your starting visibility map. *Logged-out browser*
- STEP 04** **Request a location-page schema audit.** AGENCY

Each location page should carry MedicalBusiness schema with NAP, hours, services, and provider list matching GBP exactly. Mismatches between page and profile are the most common cause of dropped AI summary inclusion. *In writing*
- STEP 05** **Lock in a review-request cadence.** AGENCY

Eight to twelve fresh reviews per month per location, sourced from a documented post-visit request flow. Your front-office process or agency owns the cadence, and it becomes a tracked metric in the monthly report. *Monthly cadence*

**Rod Taheri** · Sports Technology Labs

★★★★★

TOP SEO COMPANY

**Clutch**

MEDICAL 2026

VERIFIED

CLUTCH.CO REVIEW

"Direction does everything right, and we can't imagine ever working with another SEO company."

# CHANGE 08

## AI engines verify your practice through structured data.

Structured data is the code behind your pages that tells search and AI engines what your content is about. In 2026, the healthcare stack has three layers: the practice (MedicalBusiness), the providers (Physician), and the services (MedicalProcedure). **Schema helps search and AI engines parse your practice consistently. It doesn't guarantee a mention, but missing schema makes you harder to recognize.**

<p><b>LAYER 01</b></p> <h3>The practice</h3> <p><b>MedicalBusiness</b></p> <p><b>KEY FIELDS</b> name, medicalSpecialty, address, hours, services, telephone</p> <p><b>WHY AI ENGINES NEED IT</b> Engines treat healthcare content differently than retail. Practices on <b>LocalBusiness</b> in 2026 get categorized alongside hair salons and accounting firms, which means their content gets the wrong weighting when AI engines decide what to mention.</p>	<p><b>LAYER 02</b></p> <h3>The providers</h3> <p><b>Physician</b></p> <p><b>KEY FIELDS</b> name, NPI, medicalSpecialty, hasCredential, sameAs, worksFor</p> <p><b>WHY AI ENGINES NEED IT</b> Engines verify the doctor is real, credentialed, and connected to a recognized practice before quoting their content. <b>Google's March 2025 core update</b> made this consequential: thousands of faceless content sites saw dramatic ranking drops overnight, while sites with verified, named expertise gained ground.</p>	<p><b>LAYER 03</b></p> <h3>The services</h3> <p><b>MedicalProcedure</b></p> <p><b>KEY FIELDS</b> name, procedure type, associated provider, bodyLocation, preparation</p> <p><b>WHY AI ENGINES NEED IT</b> Procedures inherit medical authority from the practice and the provider. Without this layer, procedure pages look like <b>generic service pages</b>. With it, engines can connect the procedure to the verified provider performing it and the verified practice offering it.</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**UNIFIED JSON-LD**  
All three layers connected in one block

```

{
  "@context": "https://schema.org",
  "@type": "MedicalBusiness",
  "name": "Riverview Dental",
  "medicalSpecialty": "Dentistry",
  "physician": {
    "@type": "Physician",
    "name": "Sarah Lin, DDS, ABGD",
    "identifier": {
      "propertyID": "NPI",
      "value": "1234567890"
    },
    "hasCredential": [
      "DDS, University of California",
      "ABGD Board Certified"
    ],
    "sameAs": [
      "https://healthgrades.com/dr-lin",
      "https://linkedin.com/in/dr-lin",
      "https://abgd.org/diplomates/lin"
    ],
    "worksFor": { "name": "Riverview Dental" }
  },
  "availableService": {
    "@type": "MedicalProcedure",
    "name": "Dental Implant"
  }
}
    
```

- READ THE CODE**  
What each connection does for AI recognition
- **MedicalBusiness** instead of LocalBusiness tells engines you're a healthcare entity, not a retail one.
  - **physician** field inside MedicalBusiness connects the practice to its providers. Without it, the two look unrelated.
  - **NPI as identifier** connects the provider to regulatory databases AI engines cross-reference.
  - **hasCredential** lists degrees and board certifications as structured data instead of buried in prose.
  - **sameAs** links connect the provider profile across Healthgrades, LinkedIn, and association sites so engines confirm the same person across sources.
  - **worksFor** closes the loop. The provider points back to the practice, completing the connected system.
  - **MedicalProcedure** on each service inherits authority from the practice and provider above it.

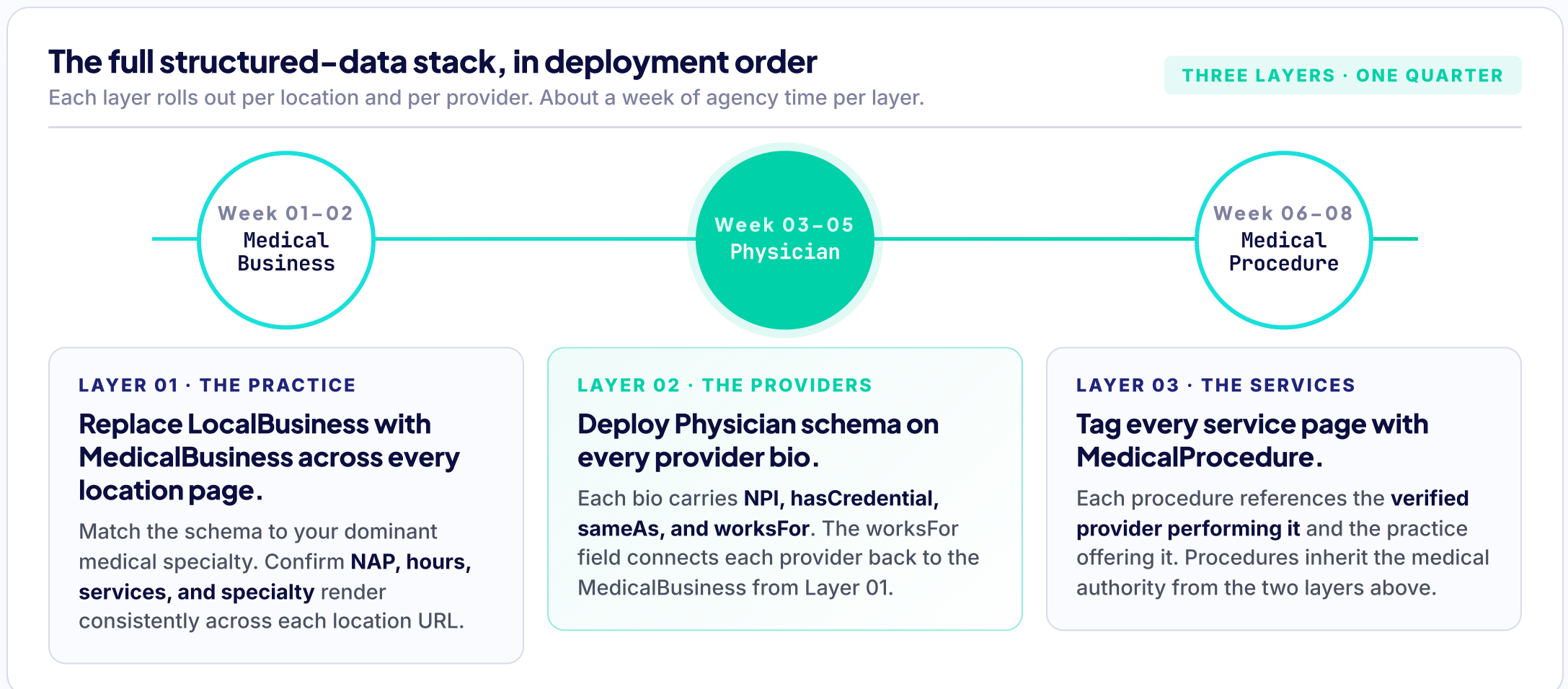
**The practice, the providers, and the procedures need to be readable as one connected system. AI engines can't verify what they can't connect.**

Source: Google March 2025 core update analysis (omnibound.ai, Rankly Media, 2026).

**TAKE ACTION** CHANGE 08 · DEPLOY THE FULL STRUCTURED-DATA STACK

# Deploy the full structured-data stack. **Verify each layer this quarter.**

The three-layer stack rolls out in sequence. Practice schema first. Provider schema second. Procedure schema third. Each layer takes about a week of agency time per location and per provider. The diagnostic below sets the order.



## The 5-step diagnostic

- STEP 01** **Run your top 10 procedure queries through Perplexity.**  
 Perplexity shows every source inline, which makes it the cheapest way to baseline your AI visibility. Note which queries return your domain and which return competitors. This is your starting line. **DIY · 30 MIN**  
*Free Perplexity tier*
- STEP 02** **Validate your current structured data in Schema.org's free validator.**  
 Drop your homepage, three top service pages, and three provider bios into [validator.schema.org](https://validator.schema.org). LocalBusiness without MedicalBusiness, no Physician schema on bios, no MedicalProcedure on service pages means a 2022 baseline across all three layers. **DIY · 15 MIN**  
*validator.schema.org*
- STEP 03** **Search Google for two procedure questions and watch the AI Overview.**  
 Note the cited sources. Reddit, Mayo Clinic, and directory sites are common. Practice sites that show up have verified provider profiles, full structured-data stacks, and direct-answer copy. Mark which patterns yours is missing. **DIY · 10 MIN**  
*Logged-out browser*
- STEP 04** **Run each provider's name through Google's Knowledge Graph search.**  
 Use the Knowledge Graph API or simply Google "[Provider name] [specialty]." Providers without a knowledge panel or a clearly verifiable entity are holes in your structured-data stack. Each unverified provider is a Layer 02 gap. **DIY · 20 MIN**  
*Per-provider check*
- STEP 05** **Get a structured-data rollout plan in writing.**  
 It should list every page using LocalBusiness today and the MedicalBusiness, Physician, and MedicalProcedure markup that replaces it. Phased rollout works. No plan doesn't. Sequence practice schema first, then provider schema, then procedure schema. **AGENCY**  
*In writing*

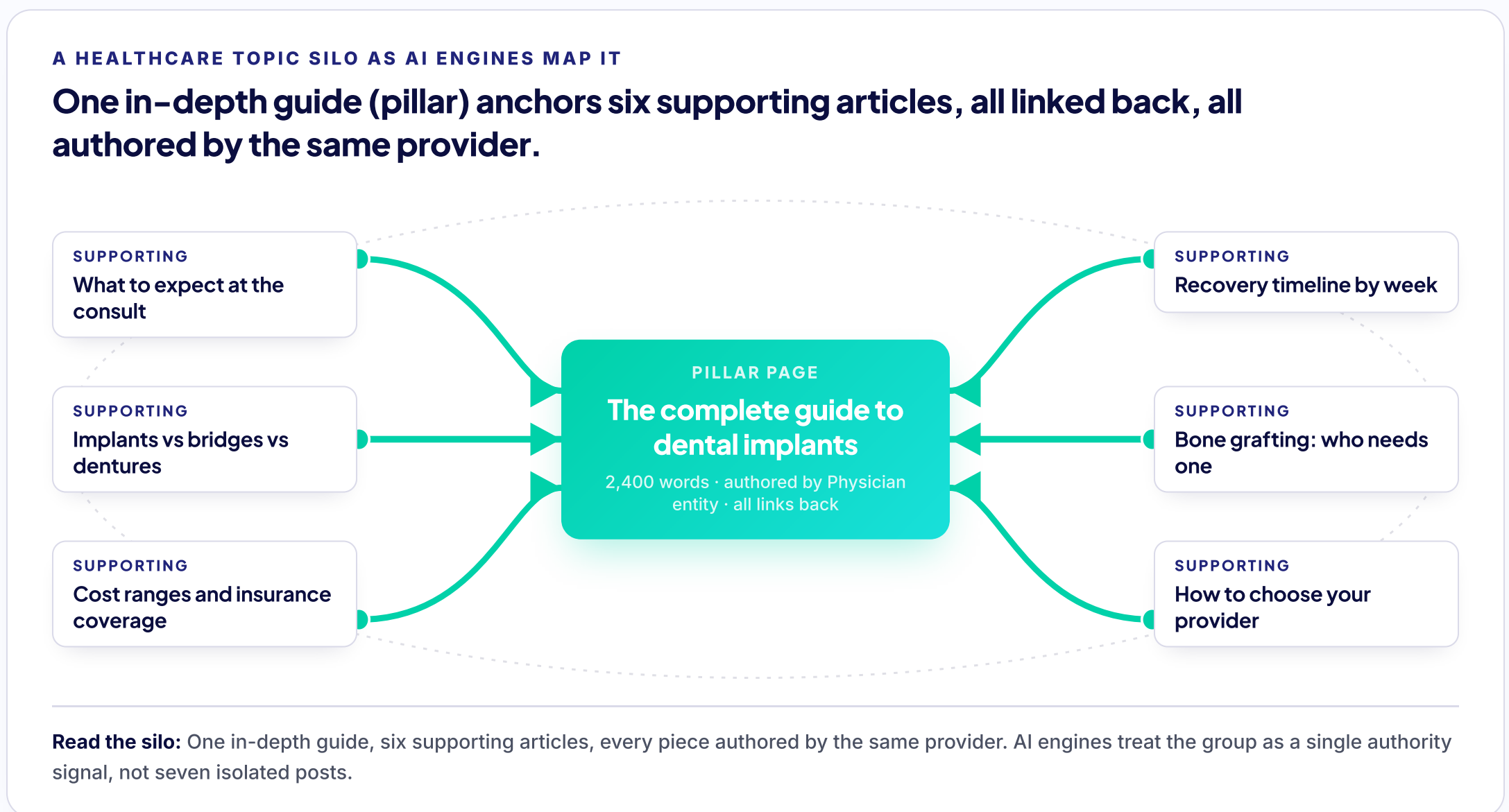
**"Are AI engines verifying my practice, my providers, and my procedures as one connected system?" Three layers, one stack, one quarter to ship.**

UP NEXT  
**Change 09 →  
 Topical authority and  
 healthcare-relevant  
 links**

# CHANGE 09

## Topical authority is the foundation. Healthcare-relevant links are the proof.

Topical authority comes from covering one subject in real depth, with the right internal links so both readers and AI engines see the connections. Backlinks confirm the authority by showing other credible sources reference your work. **In healthcare, both signals are now weighted by relevance, not just volume. A link from a single peer-reviewed source is worth more than a hundred from generic directories.**



### HEALTHCARE BACKLINK QUALITY MATRIX

## Where a link comes from now matters more than its raw domain rating.

<p><b>TIER 01 · HIGH VALUE</b></p> <p><b>Peer-reviewed journals and specialty associations</b></p> <p>JAMA, Lancet, Journal of Prosthodontics. ABGD, AAD, AAOS. One link compounds for years. Direct authority transfer to the provider.</p>	<p><b>TIER 02 · USEFUL</b></p> <p><b>Healthcare-specific media</b></p> <p>Healthline, KevinMD, Medscape, Endpoints News. Topical relevance counts.</p>	<p><b>TIER 03 · AVOID</b></p> <p><b>Generic high-DR sites</b></p> <p>Forbes contributor links, generic directories. High Domain Rating (the SEO industry's measure of backlink strength) but low healthcare relevance. Often net-negative for a medical practice.</p>
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TAKE ACTION

CHANGE 09 · BUILD AUTHORITY THROUGH SILOS AND HEALTHCARE-RELEVANT LINKS

# A 90-day plan that builds **topic depth** and **earns links at the same time.**

Topic depth takes time to build. Healthcare-relevant links take time to earn. The plan below works on both at once, with each month feeding the next. Treat the pace below as a starting point, not a finish line.

## The 90-day topical authority + link earning plan

Three months, three deliverables per month. Build authority and earn more links at the same time.

[DIRECTION PLAYBOOK](#)

MONTH  
01

MONTH  
02

MONTH  
03

**FOUNDATION**

**Map your topic groups. Build your first in-depth guide.**

- ✓ Pick **one topic** to focus on (dental implants, cosmetic dermatology, joint replacement)
- ✓ Sort your existing content into the in-depth guide and its supporting articles. Note what's missing.
- ✓ Write and publish the **in-depth guide**. 2,000 to 2,500 words.
- ✓ Pitch **one healthcare publication** for a feature or interview

**COMPOUNDING**

**Fill the topic group. Pursue the high-value link.**

- ✓ Publish **three supporting articles**. Link each one back to the in-depth guide.
- ✓ Get one provider **published or co-published in a peer-reviewed medical journal**
- ✓ Add provider profile links to specialty association websites
- ✓ Compare your topic coverage to your top healthcare competitors

**MEASUREMENT**

**Build the topics. Track the progress.**

- ✓ Publish the **last two supporting articles** to complete the topic group
- ✓ Earn **one link from a specialty association directory** back to your in-depth guide
- ✓ Search and compare which competitors are mentioned alongside you, and which ones got squeezed out.
- ✓ Use this topic group as the template for next quarter's topic

## The 5-step diagnostic

STEP  
**01**

**Map your existing content into silos and gaps.**

Open your blog and group every published piece by topic. For each topic, identify which pieces could become a pillar and which are supporters. Pieces with no clear silo home are content drag, not authority signals.

**DIY · 60 MIN**

*CMS audit*

STEP  
**02**

**Pull your last 50 backlinks and tag each by tier.**

Use Ahrefs, Semrush, or your agency's backlink report. Tag each link Tier 01 (peer-reviewed or specialty association), Tier 02 (healthcare media), or Tier 03 (generic high-DR or directory). The Tier 03 ratio is your link-quality drag.

**DIY · 30 MIN**

*Backlink tool*

STEP  
**03**

**Identify three peer-reviewed venues your providers could publish in.**

One peer-reviewed citation outweighs dozens of generic links. The list comes from your providers' specialty journals, association publications, and clinical case-study venues. The hardest step is usually identifying the venues, not getting in.

**DIY · 25 MIN**

*Provider input*

STEP  
**04**

**Get a written topic-group plan with link targets.**

It should name the topic group, the in-depth guide, the supporting articles, and the link tiers you're targeting, with counts per quarter. A plain editorial calendar with no topic groups or link tiers is a 2024 plan.

**AGENCY**

*In writing*

STEP  
**05**

**Add a quarterly review for bad backlinks.**

Run a quarterly review of every new backlink. Disavow or remove anything that hurts your healthcare authority. Twenty minutes a quarter protects months of work.

**AGENCY**

*Quarterly cadence*

"Is my site organized so **my content compounds**, or am I publishing isolated posts that don't reinforce each other?" The plan above is what compounding looks like over a single quarter.

UP NEXT

**Change 10 →**  
**Content freshness as an AI visibility lever**

CHANGE **10** NEW FOR 2026

# AI citations turn over in 13 weeks. **SEO rankings last for years. Plan accordingly.**

Traditional SEO rewards content that gets published once and held over time. A well-built guide can rank on Google for years with light maintenance. AI engines work differently. **Half of all content cited by AI answers is less than 13 weeks old.** The same blog post that ranks #1 on Google can fall out of AI citations entirely within a quarter. Healthcare practices that treat content as a one-time investment lose AI visibility steadily, even when their organic rankings hold.

**TWO DIFFERENT DECAY CURVES**

**Same content, two different visibility timelines.**

Without refresh activity, content published in January loses half its AI citation share by April. SEO rankings hold longer because Google rewards established content. **AI engines reward currency.**



Source: Frase, 2026 (analysis of AI citation freshness across 10,000+ queries).

**REASON 01**

**Training data refreshes constantly.**

AI engines retrain on new web content regularly. Recent content is more likely to be in the training set, which means more likely to be cited. **Older content gets diluted** as newer content enters.

**REASON 02**

**Real-time retrieval favors recent sources.**

Perplexity and ChatGPT do live web searches to supplement their training data. Retrieval algorithms favor recent content for time-sensitive queries. **Most healthcare queries are time-sensitive** because treatments, technologies, and patient information change.

**REASON 03**

**Fresh content signals active expertise.**

AI engines weight content from sources that publish consistently as more authoritative than sources that publish once and disappear. A practice that publishes weekly **looks more authoritative than one that publishes quarterly**, even if the quarterly content is technically better.

**Traditional SEO planning treats content as an asset that compounds over years. AI visibility planning treats content as a stream that needs ongoing investment to maintain. The practices winning AI mentions in 2026 are running both planning horizons in parallel.**

TAKE ACTION

CHANGE 10 · BUILD A REFRESH CADENCE INTO YOUR CONTENT ENGINE

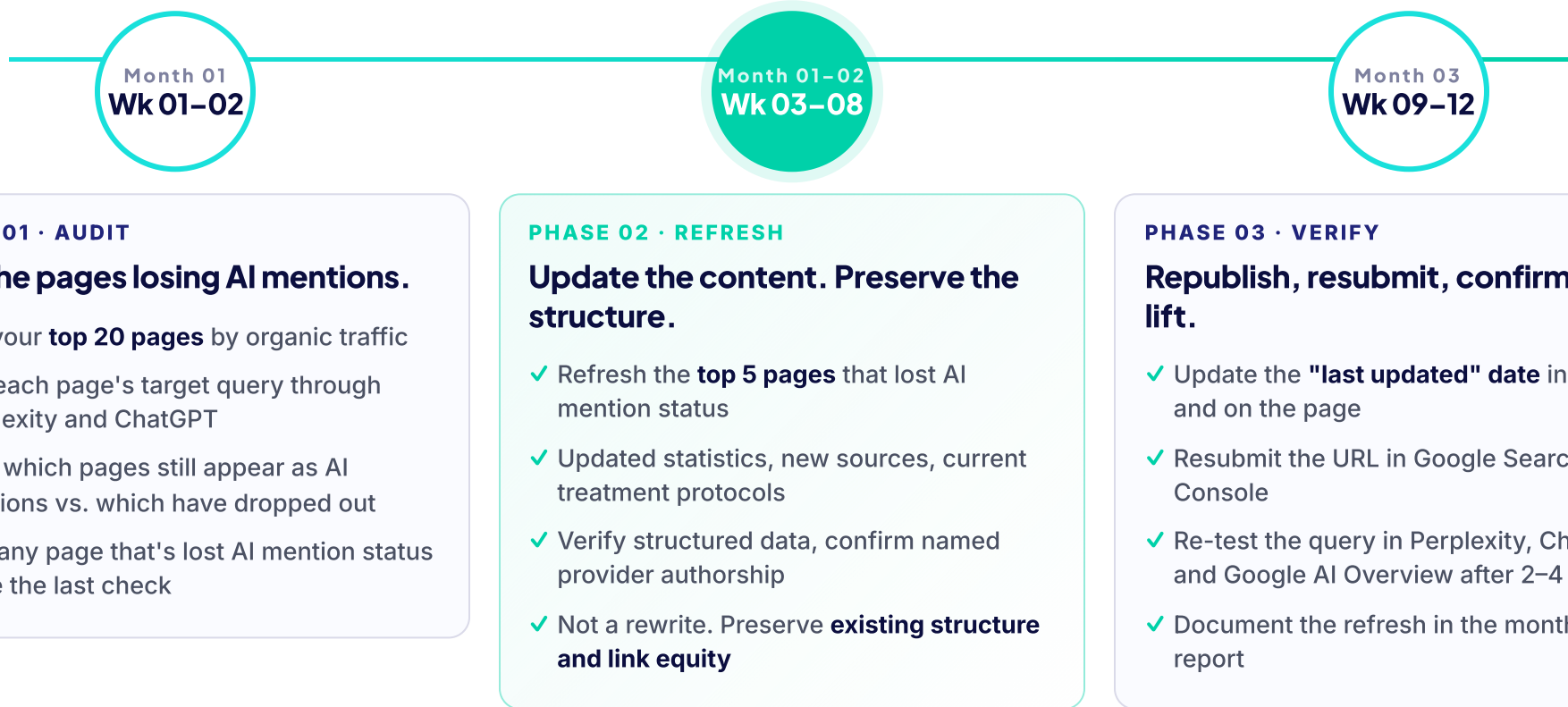
# A quarterly refresh cadence that maintains AI visibility.

Run this quarterly cycle on your existing content. Keep producing new content alongside it.

## The quarterly refresh framework

Three phases, sequenced. Audit, refresh, republish — every quarter.

DIRECTION PLAYBOOK



PHASE 01 · AUDIT

**Find the pages losing AI mentions.**

- ✓ Pull your **top 20 pages** by organic traffic
- ✓ Run each page's target query through Perplexity and ChatGPT
- ✓ Note which pages still appear as AI mentions vs. which have dropped out
- ✓ Flag any page that's lost AI mention status since the last check

PHASE 02 · REFRESH

**Update the content. Preserve the structure.**

- ✓ Refresh the **top 5 pages** that lost AI mention status
- ✓ Updated statistics, new sources, current treatment protocols
- ✓ Verify structured data, confirm named provider authorship
- ✓ Not a rewrite. Preserve **existing structure and link equity**

PHASE 03 · VERIFY

**Republish, resubmit, confirm the lift.**

- ✓ Update the **"last updated" date** in schema and on the page
- ✓ Resubmit the URL in Google Search Console
- ✓ Re-test the query in Perplexity, ChatGPT, and Google AI Overview after 2-4 weeks
- ✓ Document the refresh in the monthly report

## The 5-step diagnostic

STEP 01	<p><b>Identify your top 10 pages most at risk of losing AI visibility.</b></p> <p>Pages older than 13 weeks that drive material traffic or target high-value procedure queries. These are most likely to have decayed in AI citations since publish.</p>	<p>DIY · 30 MIN</p> <p><i>No tools needed</i></p>
STEP 02	<p><b>Test each page's current AI mention status.</b></p> <p>Run each page's target query through Perplexity, ChatGPT, and Google AI Overview. Note which pages still appear as AI mentions and which have dropped out. This is your baseline.</p>	<p>DIY · 45 MIN</p> <p><i>Free Perplexity tier</i></p>
STEP 03	<p><b>Audit each page's content for refresh opportunities.</b></p> <p>Read each page that lost AI mentions as a patient would. Are the statistics current, are sources still authoritative, are treatment protocols standard practice, has the provider's credentials section been updated, are there new patient questions to address? Mark the gaps.</p>	<p>DIY · 60 MIN</p> <p><i>One page at a time</i></p>
STEP 04	<p><b>Get a quarterly refresh cadence documented in writing.</b></p> <p>It should name the top pages to monitor, the cadence for testing AI mention status (monthly), the threshold for triggering a refresh, and the time commitment per refresh.</p>	<p>AGENCY</p> <p><i>In writing</i></p>
STEP 05	<p><b>Build refresh tracking into the monthly report.</b></p> <p>Pages refreshed this month. Pages that regained AI mentions after refresh. Pages scheduled next month. AI mention rate across the top 20. Refresh cadence becomes a tracked metric, not a background activity.</p>	<p>AGENCY</p> <p><i>Monthly cadence</i></p>

"Am I maintaining the AI visibility of the content I've already published, or am I watching it decay quarter over quarter?" A quarterly refresh cadence is the difference.

UP NEXT

Self-scorecard →  
Score your practice across the ten changes

SELF-SCORECARD

# How does your brand score?

#	THE QUESTION	1	2	3	4	5
01	<b>Your last 12 blog posts pass AI detection tests.</b> 1 Never tested · 2 Tested, most failed · 3 Half pass · 4 Most pass · 5 All 12 pass	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
02	<b>You have AI referral traffic tracking set up in GA4.</b> 1 Not set up · 2 On the list · 3 Partial setup · 4 Live, not reported · 5 Live and in monthly report	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
03	<b>Your monthly report contains data on competitors, local search, traditional search, and AI search.</b> 1 None of the four · 2 One of four · 3 Two of four · 4 Three of four · 5 All four	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
04	<b>You have a growing brand presence on social sites AI engines pull from.</b> 1 No presence · 2 Profiles exist, inactive · 3 Posting inconsistently · 4 Active on 2-3 platforms · 5 Active across Reddit, YouTube, LinkedIn, IG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
05	<b>You're repurposing content and growing brand mentions on other sites and directories.</b> 1 One-and-done content · 2 Occasional repurposing · 3 Repurposing in place, mentions flat · 4 Mentions growing · 5 Mentions compounding quarter over quarter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
06	<b>Your content strategy has pillar pages and supporting pages (hub/spoke setup).</b> 1 No pillars · 2 One pillar, no spokes · 3 One pillar with spokes · 4 2-3 topic groups built · 5 Full silo coverage of core procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
07	<b>Your content calendar contains more than blog posts, with a quarterly refresh cadence.</b> 1 Blog posts only · 2 Blog + occasional video · 3 Mixed formats, no refresh · 4 Mixed formats + ad-hoc refresh · 5 Mixed formats + quarterly refresh cadence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
08	<b>Your GBP scores 9 of 12 or higher on the attribute checklist.</b> 1 0-3 of 12 · 2 4-6 of 12 · 3 7-8 of 12 · 4 9-10 of 12 · 5 11-12 of 12	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
09	<b>Your site runs MedicalBusiness, Physician, and MedicalProcedure schema.</b> 1 LocalBusiness or none · 2 MedicalBusiness only · 3 MedicalBusiness + partial Physician · 4 Two of three layers · 5 All three layers, validated with Schema.org	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10	<b>Your last 20 backlinks are healthcare-relevant.</b> 1 Mostly generic directories · 2 1-5 healthcare-relevant · 3 6-10 healthcare-relevant · 4 11-15 healthcare-relevant · 5 16-20 healthcare-relevant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**ADD IT UP**

Total your scores across all 10 questions, then turn the page. The interpretation grid maps your total to a 90-day priority plan.

**YOUR TOTAL**

— — — / 50

INTERPRETATION GRID

# What your score means.

SCORE INTERPRETATION

**10-20**  
EXPOSED

**You're operating on an outdated playbook.**

Most of what's costing you patients right now isn't fixed yet. The competitors in your market that figured this out 12 months ago are already compounding. Every quarter you wait widens the distance.

**21-30**  
BEHIND

**You've started, but it's not all working together.**

You're doing some of the right things, but not fully. Competitors with weaker fundamentals are likely ahead of you.

**31-40**  
COMPOUNDING

**You're on the right track.**

The foundations are working. The next phase of growth comes from more strategic, specific moves. This is the stage where the right partner pays for themselves within a quarter.

**41-50**  
ACCELERATING

**You're doing better than most.**

The fundamentals are working. The next move is widening the distance before competitors with specialist support behind them close it. The hard part is staying in front. Defend and expand. The threat at this tier is complacency.

**Most practices are losing six figures a year to search positions they could be winning.**

Our team runs your live data, identifies which high-value patient searches are going to competitors instead of you, and quantifies what each one is worth based on your average case value and conversion rate. You'll see the revenue at stake, the fastest moves to recapture it, and the timeline to ROI.

**Let's talk.**

THE OFFER

# You scored your practice. We'll show you what's actually happening online.

Your scorecard is what you think is happening. The Direction audit is what's actually happening across search, citations, listings, reviews, and content. The difference between the two is usually where your best patients are going.

WHAT'S INCLUDED

## The Healthcare Marketing Audit.

Our team runs an even deeper audit against your live data. You'll see where patients find you, where competitors get found instead, and the three highest-impact fixes for the next 90 days. **By the end of the call, you'll know exactly what's costing you patients and what it takes to fix it.**

- ✓ Your citation share vs. direct competitors across the searches that drive your highest-value patients
- ✓ The technical issues suppressing your rankings, from Core Web Vitals to crawl waste, ranked by traffic impact
- ✓ The local search signals you're missing that are keeping you out of the map pack for high-intent searches
- ✓ The high-intent searches your competitors rank for and you don't, with the content required to compete
- ✓ The pages on your site competing against each other for the same patient searches, splitting your rankings instead of compounding them
- ✓ A 90-day priority plan ranked by revenue impact

REQUEST YOUR AUDIT

[direction.com / healthcare-audit](https://direction.com/healthcare-audit)

OR CALL US

**(737) 510-2477**



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ABOUT DIRECTION

### Healthcare Marketing. Specialized.

Direction works with elective medical practice CEOs frustrated their website isn't generating inquiries for their highest-value services, worried competitors are winning local search, and concerned paid ads are hiding a deeper patient acquisition problem. We turn the website into a lead generation asset the practice owns. **SEO, local SEO, paid media, and web design.**

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