

Marketing Plan

prepared for:

[redacted]

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Statement of Confidentiality and Non-Disclosure

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Situational Analysis

A. Industry Analysis

Consumer Demand

According to data from the American Society for Aesthetic Plastic Surgery (ASAPC), demand for select nonsurgical cosmetic procedures increased by 10.4% from 2011 to 2012. The Top 5 Nonsurgical Cosmetic Procedures were named in the ASAPC's Cosmetic Surgery National Data Bank Statistics 2012 Report, ranked by number of total procedures in 2012: 1) Botox; 2) Hyaluronic Acid (Juvaderm, Perlane, Restylane, Belotero, Prevelle, Eleveess); 3) Laser Hair Removal; 4) Microdermabrasion; and 5) Chemical Peel.

Using data from 2009, 2010, 2011, and 2012 from the ASAPC - of the 2012 Top 5, immediate growth/decline rates (from 2011 to 2012) were:

- Consumer demand for Botox & Dysport increased by 24.4%
- Consumer demand for Hyaluronic Acid increased by 18.0%
- Consumer demand for Laser Hair Removal decreased by 3.9%
- Consumer demand for Microdermabrasion decreased by 0.1%
- Consumer demand for Chemical Peels increased by 15.5%

Sustained growth/decline rates (from 2009-2012) were:

- Consumer demand for Botox & Dysport increased by 27.4%
- Consumer demand for Hyaluronic Acid increased by 8.4%
- Consumer demand for Laser Hair Removal decreased by 30.9%
- Consumer demand for Microdermabrasion decreased by 19.7%
- Consumer demand for Chemical Peels decreased by 16.1%

Further analysis of these reports reveals:

The three nonsurgical procedures with the fastest rate of immediate growth (since 2011):

- Tattoo Laser Treatment - 43.2% growth
- Laser Treatment of Leg Veins - 29.0% growth
- Laser Skin Resurfacing - 25.1% growth

The three nonsurgical procedures with the fastest rate of sustained growth (since 2009):

- Poly-L-Lactic Acid (Sculptra) - 77.1% growth
- Botox & Dysport - 27.4% growth
- Calcium Hydroxylapatite (Radiance) - 9.5% growth

The three nonsurgical procedures with the fastest rate of immediate decline (since 2011):

- Calcium Hydroxide (Radiance) - 25.7% decline
- IPL Laser Treatment - 23.2% decline
- Sclerotherapy - 16.1% decline

The three nonsurgical procedures with the fastest rate of sustained decline (since 2009):

- Sclerotherapy - 34.3% decline
- Laser Hair Removal - 30.9% decline
- IPL Laser Treatment - 25.4% decline

According to separate data from the American Society of Plastic Surgeons (ASPS), consumer demand for minimally-invasive cosmetic procedures increased by 46.0% between 2005 and 2011. Specifically, the demand for the “[redacted] Five” (Botox, Chemical Peels, Laser Treatments, Microdermabrasion, and Dermal Fillers) increased by 53.5% between 2005 and 2011.

Between 2009 (when ASPS began tracking consumer demand for IPL) and 2011:

- **consumer demand for Botox has increased by 18.3%**
- **consumer demand for Chemical Peels decreased by 2.8%**
- **consumer demand for Laser Treatments** (including IPL treatments, laser hair removal, laser skin resurfacing, and laser treatment of leg veins) **increased by 15.5%**
- **consumer demand for Microdermabrasion decreased by 1.1%**
- **consumer demand for Soft Tissue Fillers** (including calcium hydroxylapatite (Radiesse), collagen (Evolence, Zyderm, Zyplast, Cosmoderm, Cosmoplast, Cymetra), fat, hyaluronic acid (Juvaderm Ultra, Juvaderm Ultra Plus, Perlane, Prevelle Silk, Restylane), polylactic acid (Sculptra), and polymethyl-methacrylate microspheres (Artefill)) **increased by 12.4%**

Demand for each category of procedures is changing by different rates in different regions.

The United States has been divided into five *regions* for analysis, according to the following:

- **Region 1** includes Connecticut, Maine, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont.
- **Region 2** includes Illinois, Indiana, Iowa, Kansas, Michigan, Missouri, Montana, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin.
- **Region 3** includes Delaware, the District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico, South Carolina, Virginia, and West Virginia.
- **Region 4** includes Alabama, Arkansas, Kentucky, Louisiana, Mississippi, Oklahoma, Tennessee, and Texas.
- **Region 5** includes Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, Oregon, Utah, Washington, and Wyoming.

The rate of growth for each procedure between 2009 and 2011 is ranked from least to greatest by Region:

- Botox
 - 20.6% - Region 5
 - 20.1% - Region 3
 - 18.6% - Region 1
 - 14.9% - Region 4
 - 13.5% - Region 2

- Chemical Peels
 - 0.07% - Region 1
 - -1.9% - Region 5
 - -3.7% - Region 3
 - -4.5% - Region 4
 - -7.0% - Region 2

- Laser Treatments
 - 16.0% - Region 3
 - 15.7% - Region 5
 - 15.6% - Region 1
 - 15.2% - Region 4
 - 14.4% - Region 2

- Microdermabrasion
 - 2.4% - Region 3
 - 1.4% - Region 4
 - 1.3% - Region 1
 - -1.7% - Region 2
 - -7.2% - Region 5

- Dermal Fillers
 - 14.6% - Region 3
 - 13.2% - Region 1
 - 11.4% - Region 2
 - 7.2% - Region 4
 - 2.9% - Region 5

[redacted] provides training and certification for the vast majority of the above products and procedures. Overall, consumer demand for the products and procedures for which [redacted] provides training is growing.

Consumer Expenditure

According to a report from the American Society of Plastic Surgeons (ASPS), 2011 consumer expenditure for the 2011 Top Five Minimally-Invasive Cosmetic Procedures topped \$3.4 billion:

- Botox & Dysport: \$1.0 billion
- Soft Tissue Fillers: \$1.2 billion
- Chemical Peel: \$725 million
- Laser Hair Removal: \$386 million
- Microdermabrasion: \$127 million

B. Competitive Analysis

Major Competitors

There are a number of competitive providers of training and certifications for the “[redacted] Five” and for hCG weight loss training.

The top competitors were determined by the results of numerous google searches. Using Google Trends, the top five searches related to services offered by [redacted], from January 2009 through April 2013, were determined to be:

- “laser training”
- “aesthetic medicine”
- “Botox training”
- “aesthetic training”
- “hCG training”

Search results for these five search terms are listed in the Appendix.

Based on the results of these searches (both paid and organic results), the top comprehensive competitors* were identified as:

- American Academy of Aesthetic Medicine (AAAMed)
- American Academy of Procedural Medicine (AAOPM)
- Empire Medical Training
- Esthetic Skin Institute (ESIW)
- National Laser Institute

* Comprehensive competitors are identified as competitors that offer all or most of the same trainings that [redacted] offers: Botox, dermal fillers, hCG weight loss, laser therapies, microdermabrasion, chemical peels, and practice development trainings.

(The American Association of Aesthetic Medicine and Surgery was not included in this list, as their website is currently nonfunctional and it was unable to be determined if they are still operating. In addition, they appear in very few search results.)

Other competitors include:

- American Academy of Facial Aesthetics (AAFA) - Dentist focus
- American Association of Aesthetic Medicine and Surgery (AAAMS)
- Elite ABMT (Aesthetic, Medical & Business Training)

C. Analysis of Marketing Activities

Presently, [redacted] runs an ad in Contemporary OB/GYN. This publication is a good outlet for targeting potential members of [redacted]. However, the ad itself appears cluttered, and the call to action is buried.

[redacted] also employs a number of SEO strategies. However, [redacted] or [redacted]-related links appear organically in only two (“Botox training” and “hCG training”) of the top five search terms, and appear in the other three (“aesthetic medicine”, “aesthetic training”, and “laser training”) in ad results only.

Objectives

A. Corporate Objectives

From [redacted]'s homepage: [redacted]

[redacted]'s mission: [redacted]

B. Marketing Objectives

[redacted] desires to increase enrollments in its training programs.

[redacted] desires to be the go-to source for all industry news, trainings, certifications, and physician networking.

Marketing Strategies and Tactics

In order to achieve the Marketing Objectives, it is recommended that [redacted] undertake the following measures within one year:

A. Website

The current [redacted] website offers much valuable content to physicians and [redacted] members, as well as some content appropriate for patient education; however, it is not organized as well as it could be, and much of it is duplication. The site navigation should be simplified for ease of use by visitors. Traffic should be driven to the website through the use of social media, print ads, and direct mail.

Recommendations for improvement includes updating, renaming, and reorganizing the main header bar (and getting rid of the secondary header bar) according to the following:

- HOME
- ABOUT
 - Why train with [redacted]?
 - Faculty
 - Blog
 - News (formally “Press Releases”)
- BOTOX TRAINING
 - [redacted] with Botox
 - Why train in Botox?
 - Botox training FAQ
 - Botox training facility
 - Botox Certification
 - Before and After Photos
- HCG WEIGHT LOSS TRAINING
- COSMETIC LASER TRAINING
- ADVANCED BOTOX & DERMAL FILLER TRAINING
- REGISTRATION
 - Hotel & Travel
- RESOURCES
 - For Physicians
 - Botox Best Practices eReport
 - Six Tips for Aesthetic Practices
 - Educational Videos
 - Aesthetic Certification
 - Industry Resources
 - For Physicians & Patients
 - Body Shaping
 - Common Skin Conditions

- Cosmetic Dermal Fillers
- Cosmetic Injectables
- Lasers & Light-based Devices
- Microdermabrasion
- Chemical Peels
- Weight Management
- MEMBER BENEFITS
 - Join Today
- PHYSICIAN DIRECTORY
 - Member Spotlight

The Physician Directory would be a new, searchable directory for patients to find physicians who have completed [redacted] certifications. It would be searchable by location (zip code) and service (training completed: Botox, hCG, laser, fillers). This would be an added benefit to Members only.

The Member Spotlight should either be updated regularly or eliminated. There is currently only one featured physician.

B. Search Engine Optimization

As presented earlier, [redacted]-related links appear organically in only two (“Botox training” and “hCG training”) of the top five search terms, and appear in the other three (“aesthetic medicine”, “aesthetic training”, and “laser training”) in ad results only. In addition, only one of these search results links back to [www.\[redacted\].com](http://www.[redacted].com); the rest link back to [www.\[redacted\].com](http://www.[redacted].com), www.youtube.com, or www.beforeitsnews.com.

A new SEO strategy should be developed with an SEO firm to bring [redacted] into the top 10 organic search results for “laser training”, “aesthetic medicine”, “aesthetic training”, and “hCG training”, and to boost positioning in organic search results for “Botox training”. Organic search results are preferred to ad results, as many will ignore ads and trust the Google search algorithms to produce “true” search results.

C. Social Media

As with the website and SEO strategy, the building of brand recognition and loyalty for [redacted] is key in social media. Secondary accounts for “botox training” and “aesthetic medicine symposium” should be eliminated, and the main focus should be on one [redacted] account for each social network. The aim should be to develop a branding concept that leaves [redacted] as the one and only trusted source for industry training, news, certification, and networking. In this regard, secondary accounts serve only as distractors.

The current audience for social media accounts is as follows:

- [redacted]
 - Facebook: 907
 - Twitter: 2100
 - Google +: 1
 - Pinterest: 2 followers, 2 likes
 - YouTube: 24 subscribers, 42,000 views
 - (LinkedIn: Information available only to administrators of group)

- [www.\[redacted\].com](http://www.[redacted].com)
 - Facebook: 14
 - Google +: 4

- [www.\[redacted\].com](http://www.[redacted].com)
 - Facebook: 5
 - Twitter: 55

- [www.\[redacted\].com](http://www.[redacted].com)
 - Facebook: 35
 - Twitter: 737

The only accounts with a strong following are [redacted] accounts, and the “Botox Training” Twitter account.

In order to build [redacted]’s presence on Pinterest, the activity on this network should be primarily driven at patients, i.e. information from the [redacted] website that is informative and useful to patients, such as information on acne, aging, rosacea, etc. The Pinterest audience is not aimed at professionals; therefore it does not make sense as a strategy to try to target physicians through this network.

Building the Google + audience does not need to be a top concern, as it is still considered a secondary social network, much like Reddit or Tumblr, compared with the main networks of Facebook and Twitter. It has sustained popularity in some circles, but mainly with the tech industry. Content should continue to be posted there so long as the account exists and is linked to from the [redacted] homepage, but energies to build an audience can be better directed into building, maintaining, and engaging with the Facebook, Twitter, and LinkedIn audiences.

D. Print Advertising

According to research done in 2012 by Kantar Media Healthcare Research, 90% of physicians still prefer to read medical journals in print, rather than digital, format. As such, additional print ads should be run as the budget allows, rather than moving to online banner ads or other formats.

Ads in Contemporary OB/GYN should continue. A redesign of the present ad, to be more efficient with a clearer call to action (CTA), is presented in the Appendix. Ads should have only one CTA (i.e. Botox training or hCG training, not both).

Additional outlets for ads include:

- ADVANCE for NPs and PAs
- Annals of Internal Medicine
- ACP Internist
- ACP Hospitalist

Finally, based on the regional growth in consumer demand for minimally-invasive cosmetic procedures, and regional popularity of Google searches for training, specific city publications should be targeted. The following is a list of locally-based publications with high-end readership, which have a once-per-year feature of the city's Best Physicians. This edition would be of special interest to physicians in the area, and is an ideal way to target the local physician audience.

- Washingtonian (July issue)
- Atlanta Magazine (July issue)
- Phoenix Magazine (April issue)
- Seattle Magazine (July issue)
- Orlando Magazine (December issue)
- San Diego Magazine (October issue)

A sample ad for these publications is found in the Appendix.

E. Direct Mail

It is likely cost-prohibitive to implement a direct mail program for the Botox training/Aesthetic Medicine Symposium training. However, a program targeting previous Aesthetic Medicine Symposium attendees inviting them to attend the Advanced Botox & Dermal Filler training could be effective. A sample direct mail piece is included in the Appendix.

Appendix

Most Doctors Still Prefer Reading Journals in Print Format



For someone who began his career working at a daily newspaper, this headline was quite jarring: "Print: Still Not Dead."

Yes, we acknowledge that tablets and other devices have supplanted traditional magazines and newspapers for high-tech readers. But it's tough to accept the idea that the print medium is living on borrowed time, as the headline on MM&M magazine's website postulates. (Read the story behind the [MM&M headline here \(http://www.mmm-online.com/print-still-not-dead/article/269366/\)](http://www.mmm-online.com/print-still-not-dead/article/269366/).)

Surprisingly, however – and this is good news for believers of ink and paper – it looks like many doctors are still engaging with their favorite journals the old-fashioned way: on paper.

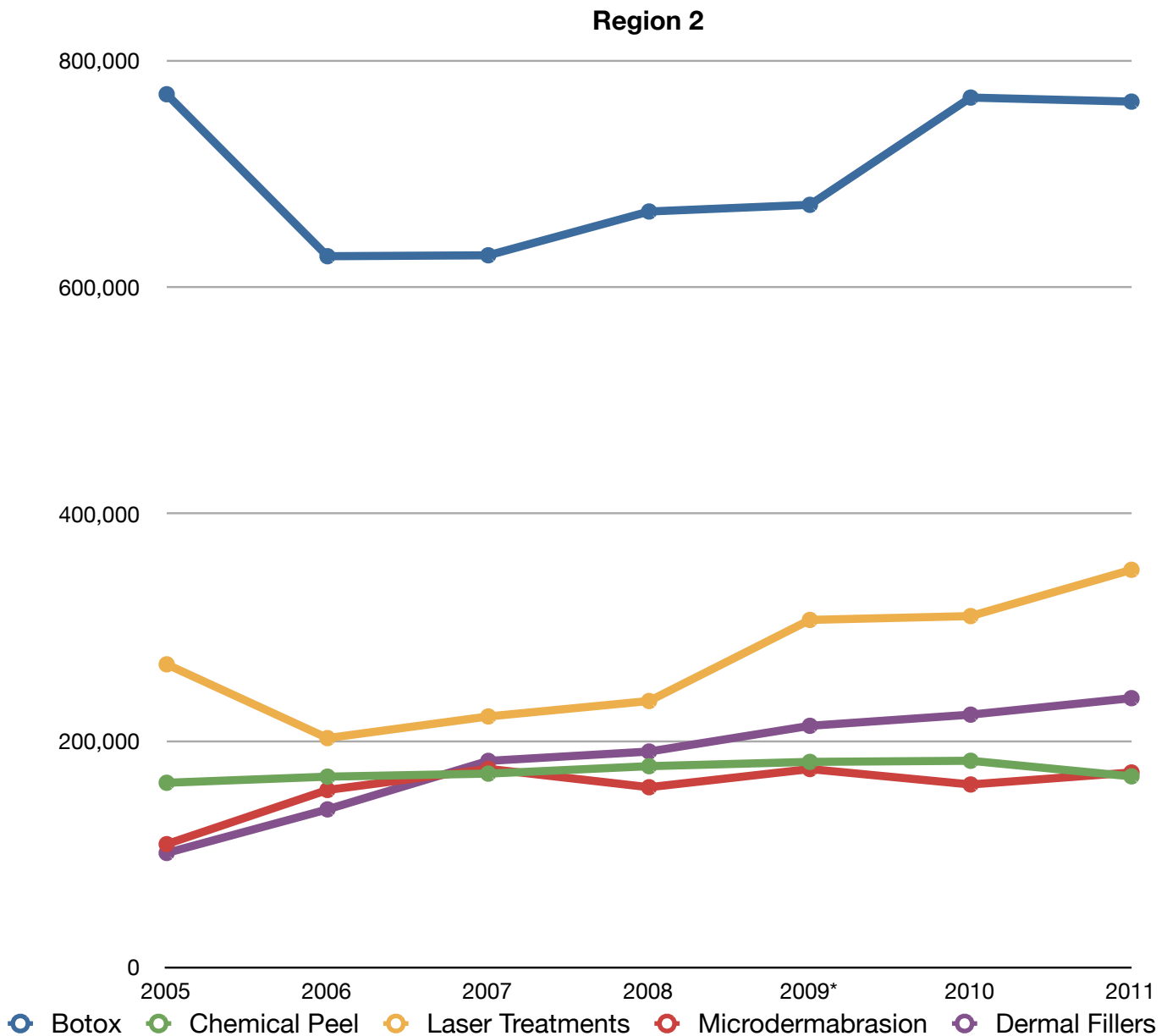
Kantar Media Healthcare Research recently released the findings of a survey of roughly 1,600 physicians that showed the power of print in medical circles. Kantar's survey found that 90% of physician respondents read the current issues of their medical journals in a real print format.

Among the respondents, 40% noted that they read both a print and a digital version of the journal. In terms of breaking down these numbers, Kantar reports that for the most recent journal issue read 50% of physicians indicated they were print-only readers and fewer than one in 10 doctors (or 8%) said they read only a digital version.

Among all of the digital-doctor readers, 21% indicated that they read the website edition of the journal, 11% opted for a tablet-based version and 10% used a smartphone device to read the publication. The findings indicate that digital media is a channel that has to factor into any brand's media mix, but we also see signs here that print is far from dead.

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Region 2, Midwest: IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, WI							
	2005	2006	2007	2008	2009*	2010	2011
Botox	770,270	627,361	628,170	666,819	672,710	767,334	763,770
Chemical Peel	162,793	168,186	170,867	177,440	181,223	182,198	168,462
Laser Treatments	267,278	202,210	221,309	234,943	306,485	309,855	350,699
Microdermabrasion	108,640	156,444	175,086	158,874	174,898	161,278	171,874
Dermal Fillers	100,872	139,324	182,103	190,342	213,058	222,903	237,451
<i>SUBTOTAL</i>	<i>1,409,853</i>	<i>1,293,525</i>	<i>1,377,535</i>	<i>1,428,418</i>	<i>1,548,374</i>	<i>1,643,568</i>	<i>1,692,256</i>
TOTAL MINIMALLY-INVASIVE COSMETIC PROCEDURES	1,483,966	1,362,317	1,434,681	1,483,728	1,603,368	1,694,116	1,743,486
							*Began tracking IPL



Percent Change from Previous Year, Region 1						
	2006	2007	2008	2009*	2010	2011
Botox	57.3%	15.9%	8.0%	0.9%	12.2%	5.7%
Chemical Peel	-8.9%	6.3%	5.5%	10.8%	-0.8%	0.8%
Laser Treatments	0.2%	15.3%	1.0%	42.3%	1.1%	14.4%
Microdermabrasion	56.0%	6.0%	-3.3%	3.3%	-11.2%	14.1%
Dermal Fillers	16.0%	11.4%	4.6%	10.5%	2.1%	11.1%
						*Began tracking IPL

Percent Change from Previous Year, Region 2						
	2006	2007	2008	2009*	2010	2011
Botox	-18.6%	0.1%	6.2%	0.9%	14.1%	-0.5%
Chemical Peels	3.3%	1.6%	3.8%	2.1%	0.5%	-7.5%
Laser	-24.3%	9.4%	6.2%	30.5%	1.1%	13.2%
Microdermabrasion	44.0%	11.9%	-9.3%	10.1%	-7.8%	6.6%
Dermal Fillers	38.1%	30.7%	4.5%	11.9%	4.6%	6.5%
						*Began tracking IPL

Percent Change from Previous Year, Region 3						
	2006	2007	2008	2009*	2010	2011
Botox	81.8%	14.3%	11.4%	-6.5%	13.2%	6.1%
Chemical Peels	-24.3%	-11.7%	3.3%	9.9%	-1.8%	-2.0%
Laser	58.7%	4.1%	3.7%	31.4%	1.7%	14.1%
Microdermabrasion	6.9%	15.1%	-7.3%	11.8%	-7.8%	11.0%
Dermal Fillers	82.2%	27.5%	3.6%	10.1%	2.3%	12.0%
						*Began tracking IPL

Percent Change from Previous Year, Region 4						
	2006	2007	2008	2009*	2010	2011
Botox	-8.8%	12.7%	8.8%	0.9%	10.7%	3.7%
Chemical Peels	15.1%	-23.1%	-3.5%	9.5%	2.1%	-6.5%
Laser	33.4%	27.2%	0.8%	26.2%	2.7%	12.2%
Microdermabrasion	-30.7%	5.5%	-5.3%	5.7%	-10.9%	13.8%
Dermal Fillers	56.5%	14.5%	4.9%	10.5%	8.5%	-1.1%
						*Began tracking IPL

Percent Change from Previous Year, Region 5						
	2006	2007	2008	2009*	2010	2011
Botox	-16.9%	17.2%	7.2%	-10.8%	11.1%	8.5%
Chemical Peels	51.0%	0.0%	0.2%	10.6%	1.4%	-3.3%
Laser	-5.1%	13.7%	4.8%	25.2%	2.2%	13.2%
Microdermabrasion	-23.0%	10.0%	-5.9%	10.1%	-9.4%	2.5%
Dermal Fillers	82.6%	38.4%	4.7%	1.8%	-0.4%	3.3%
						*Began tracking IPL

Trends

Web Search Interest: aesthetic training, botox training, aesthetic medicine, hcg training, laser training. United States, Jan 2009 - Apr 2013.



Explore trends

Hot searches

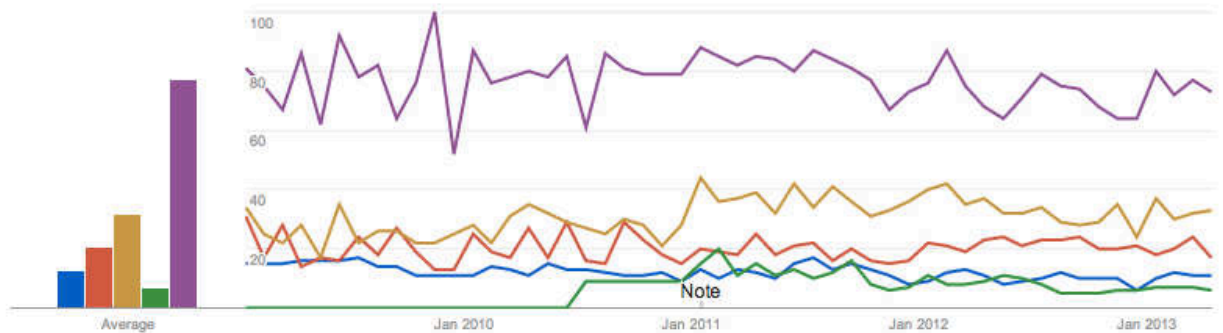
Interest over time ?

The number 100 represents the peak search interest

 News headlines

 Forecast ?
Search terms ?

- x aesthetic traini
- x botox training
- x aesthetic medic
- x hcg training
- x laser training



Top 10 organic search results for “aesthetic medicine”

- en.wikipedia.org/wiki/Aesthetic_medicine
- drdarm.com
- www.aaamed.org
- www.aestheticmedicineswmontana.com
- www.aestheticmedicine.com
- www.a4m.com/fellowship-aesthetic-overview-what-is-aesthetic-medicine.html
- www.yelp.com/biz/the-center-for-aesthetic-medicine-portland
- www.medscape.com/resource/aesthetic-medicine
- www.yelp.com/biz/aesthetic-medicine-lake-oswego
- thecamio.orclinic.com

Ads appearing for “aesthetic medicine”

- “Aesthetic Medicine” (www.adamedicine.com)
- “MD/DO Aesthetic Training” (www.aestheticmedicinesymposium.com)
- “Micro Needling Training” (www.needlelogics.com)
- “Aesthetics Training” (www.aestheticmedicaltraining.com)
- “Aesthetics Workshops” (www.esiw.com)
- “Treatment for Frown Lines” (www.frownlineinformation.com)
- “Aesthetic Medicine” (www.aaamed.org)

Top 10 organic search results for “Botox training”

- www.facialesthetics.org
- aaopm.com/comprehensive-botox-training/
- www.esiw.com
- www.empiremedicaltraining.com

- www.empiremedicaltraining.com/workshops/seminar_details.listevents/8/Comprehensive-Botox-Cosmetic-Training/
- cosmeticmedicaltraining.com
- www.eliteambt.com
- [www.\[redacted\].com/botox-training](http://www.[redacted].com/botox-training)
- www.ae1400.com
- www.aestheticmedicaltraining.com/botox_training.asp

Ads appearing for “Botox training”

- “BOTOX Cosmetic” (www.botoxcosmetic.com)
- “Botox Training Seminar” (www.aestheticmedicaltraining.com)
- “Botulinum Tox Training” (www.esiw.com)
- “Botox School - Signup” (www.nationallaserinstitute.com)
- “MD/DO Botox Certification” (www.aestheticmedicinesymposium.com)

Top 10 organic search results for “aesthetic training”

- forum.bodybuilding.com/showthread.php?t=811997&page=1
- www.empiremedicaltraining.com/workshops/seminar_details.listevents/63/Advanced-Aesthetic-Workshop
- www.instituteofaesthetictraining.com
- www.aestheticadvancements.com
- aaopm.com/advanced-medical-aesthetic-training
- www.texasaestheticstraining.com
- www.esiw.com
- www.aestheticmedicaltraining.com
- www.gorskikotar.com/genious.advice_Thibaudeau.php
- Nationallaserinstitute.com/medical-aesthetics-training

Ads appearing for “aesthetic training”

- “Aesthetics Training” (www.aestheticmedicaltraining.com)
- “Nurse Aesthetic Training” (www.esiw.com)
- “Aesthetic Laser Training” (www.nationallaserinstitute.com)
- “Free CME for Physicians” (www.medscape.org/cme)
- “MD/DO Aesthetic Training” (www.aestheticmedicinesymposium.com)
- “Laser Career Training” (www.nalainstitute.com/Laser-Courses)
- “Aesthetic Medicine” (www.aaamed.org)
- “Micro Needling Training” (www.needlelogics.com)
- “Esthetician Course” (www.scitraining.com)
- “Aesthetic Schools” (www.beautyschoolsdirectory.com)

Top 10 organic search results for “hCG training”

- www.hcgtraining.com

- www.empiremedicaltraining.com/workshops/seminar_details.listevents/35/hCG-Training-for-Physicians/
- www.hcgdietcouncil.org/hcg-diet-training-certification
- www.trimyou.com
- aaopm.com/hcg-training
- hcgtraining.net
- www.hcglaunch.com
- [beforeitsnews.com/healthcare/2013/01/\[redacted\]-announces-the-newest-date-for-its-respected-physician-hcg-training-march-22-2013-2445118.html](http://beforeitsnews.com/healthcare/2013/01/[redacted]-announces-the-newest-date-for-its-respected-physician-hcg-training-march-22-2013-2445118.html)
- [http://beforeitsnews.com/healthcare/2013/04/\[redacted\]-announces-next-date-for-physician-hcg-training-may-3-2013-2446464.html](http://beforeitsnews.com/healthcare/2013/04/[redacted]-announces-next-date-for-physician-hcg-training-may-3-2013-2446464.html)
- www.youtube.com/watch?v=d-YGEQ0t0yw ([redacted])

There are no ads appearing for “hCG training”

Contemporary OB/GYN ad sample

[redacted]

City magazines “Top Docs” special section ad sample

[redacted]

Direct mail sample

[redacted]