STERLING LONGEVITY · FOR CLINICS SERVING INTERNATIONAL PATIENTS

What if you converted twice as many enquiries, and kept twice as many patients?

Most international clinics don't lose patients on medicine. They lose them in the gaps around it: the slow reply, the vague quote, the silence after the patient flies home. Each gap has a published cost.

7×

The enquiry that waits overnight

A lead answered within an hour is seven times more likely to qualify than one answered later. International enquiries arrive in the evening, in other time zones, while your team is asleep.

Harvard Business Review, 2011

3–7%

The contact form that doesn't qualify

That is the typical enquiry-to-booking rate for international leads. 10–20% is published as achievable. The difference is answers, trust and a clear next step, not more advertising.

Medical Tourism Magazine; industry sources

40%

The cost that appears late

of online buyers abandon a purchase because of extra costs shown late. Patients borrowing from family to pay for treatment need the full price, inclusions and terms before they commit.

Baymard Institute, checkout research

22%

The patient who goes quiet at home

of patients were lost to follow-up in a study of 400,000+ visits. For medical travellers, unreturned calls and no follow-up after treatment are the most common complaint, and the end of any referral.

Demandforce study; patient accounts and reviews

Two levers, one platform

Conversion: every visitor gets an instant, cited first read of their condition, a clear next step and a booking that takes minutes, day or night.

Retention: every patient keeps a follow-up assistant that knows their record, scheduled check-ins their physician sees, and a reason to come back.

AN ILLUSTRATIVE CLINIC

What doubling both could be worth

Assumptions, stated plainly so you can change them: 50 international enquiries a month, a USD 15,000 average treatment, and today's rates in the middle of the published range.

LEVER 1 · CONVERSION, 5% → 10%

Today	Doubled	Extra revenue
2.5 patients a month	5 patients a month	$450k a year

LEVER 2 · RETURN VISITS AND REFERRALS, 20% → 40% OF 60 PATIENTS A YEAR

At 20%	Doubled to 40%	Extra revenue
12 returning or referred	24 returning or referred	$180k a year

Together, about **USD 630,000 a year** of extra revenue, before upsells to larger programmes. A licence costs **less than one extra patient a quarter**.

How the platform closes each gap

Instant, cited answers
An AI assessment gives each visitor a personal first read in seconds, then an in-depth report citing published research. It never diagnoses; physicians decide.

Qualified leads, not forms
Your coordinators see every answer, the condition and the next step taken, so they spend time on patients who are ready.

Clear prices, easy booking
Programmes, dates and inclusions up front; card or bank transfer into your own account; forms that fill in what the patient already told you.

Follow-up that never goes quiet
An AI follow-up assistant that knows the patient's record, check-ins your physicians review, and correction of any AI answer by your doctors.

See it in two minutes
sterlinglongevity.com/demo · or a 20-minute call: Aleksi Heinonen, aleksi.heinonen@sterlinglongevity.com, +358 50 577 4661

- Oldroyd, McElheran, Elkington. "The Short Life of Online Sales Leads." Harvard Business Review, March 2011.
- Enquiry-to-booking ranges: Medical Tourism Magazine (guest article, "Patient Management 101") and industry sources.
- Baymard Institute, cart and checkout abandonment research (extra costs shown late).
- Loss to follow-up: analysis of 400,000+ outpatient visits, via Demandforce. Patient complaints: published patient accounts and clinic reviews.
- Illustrative figures are Sterling analysis of these benchmarks, not measured results. Return/referral rates are assumptions.