100

MULTI-LOCATION HEALTHCARE

How clinic operators build local demand, centralize marketing operations, and manage the measurement systems in between.

01 **Dental DSO**	02 **Veterinary**
03 **Urgent care**	04 **Dermatology**
05 **Physical therapy**	06 **Med spa**
07 **Vision**	08 **Fertility**
09 **Vein & vascular**	10 **Other specialty**

35,004 KNOWN LOCATIONS / 10 SUB-INDUSTRIES / 32 DEEP DIVES

PUBLIC-SOURCE SNAPSHOT / JULY 2026

Scale creates a location-data problem first

Ownership, creative, media buying, booking, call tracking, analytics, and local brand architecture rarely centralize on the same timeline.

01

Consolidation is not centralization

A national operator can still run inherited brands, web stacks, advertiser accounts, and local conversion systems.

02

Paid intensity is structurally uneven

Category economics, franchise rules, and conversion speed change the operating model more than clinic count alone.

03

Location is the missing shared key

Media, calls, forms, appointments, and revenue become

04

Privacy pressure changes architecture

Privacy affects collection, consent, vendor contracts,

100
OPERATORS

35,004
KNOWN LOCATIONS

32
DEEP DIVES

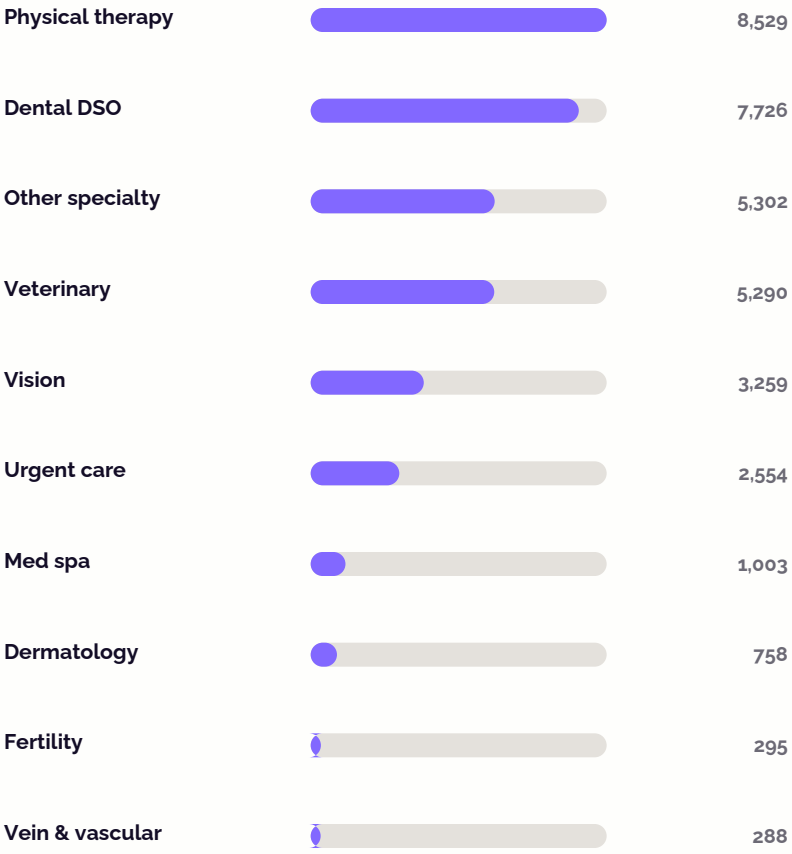
402
SOURCE LINKS

Paid demand intensity x operations centralization

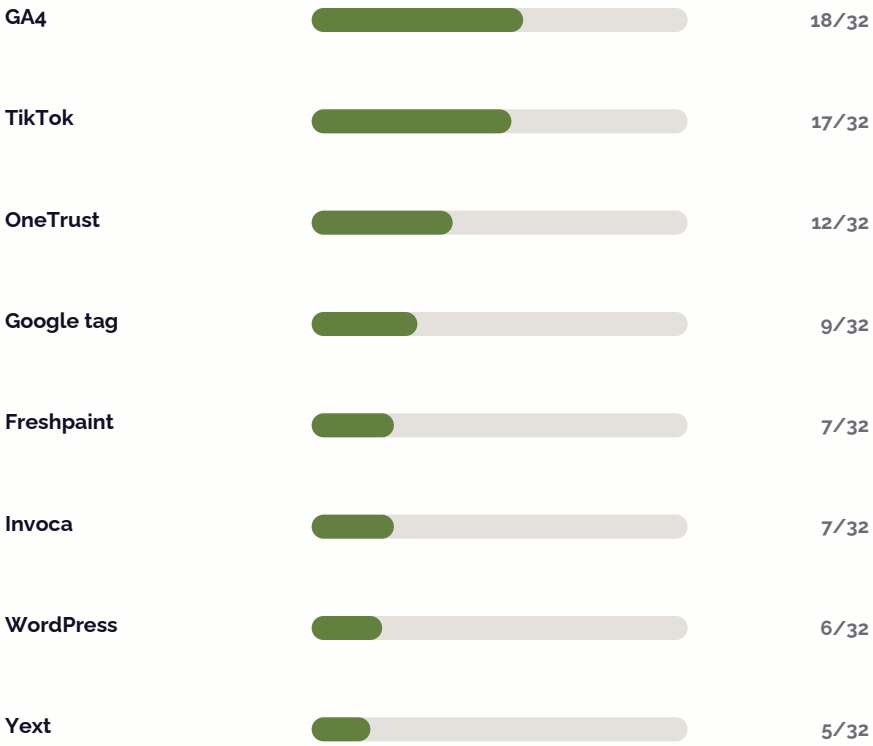
Directional public-evidence synthesis. These are not spend, revenue, or vendor-performance scores.

Footprint, research coverage, and public signals

KNOWN LOCATIONS BY SUB-INDUSTRY



DETECTED IN COMPLETED REPORTS



Technology counts mean a public signal was detected on a reviewed surface. They do not prove enterprise-wide adoption.

Dental service organizations

Dental is the clearest roll-up laboratory: local practice brands survive acquisitions while media, booking, and reporting centralize at different speeds.

18	7,726	7	6
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

The visible operating tension is not simply local versus national. A single DSO can support hundreds of practice identities, shared paid-media buying, multiple booking paths, and inherited call-tracking or analytics accounts at the same time.

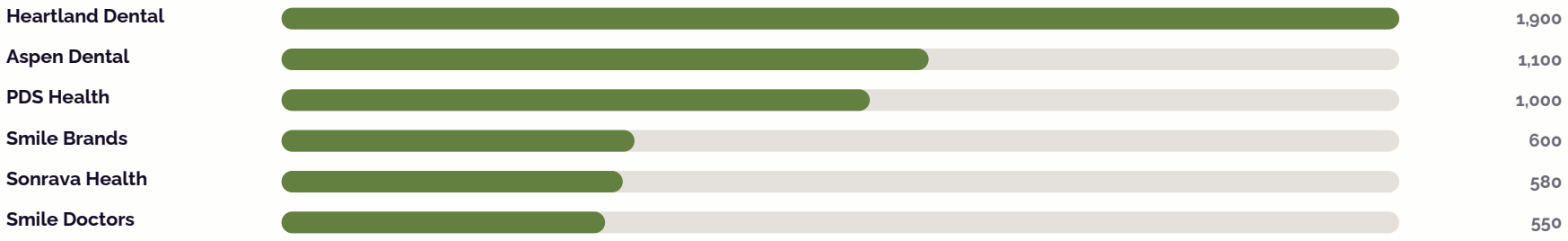
Three trends to watch

01 **Local brand architecture often survives long after ownership consolidates.**

02 **Media buying centralizes faster than location-level measurement and governance.**

03 **Booking, calls, reviews, and local search create separate conversion records for the same patient journey.**

SELECTED OPERATOR FOOTPRINT



Veterinary groups

Veterinary groups show the same multi-brand reporting mathematics as human healthcare, without HIPAA becoming the default explanation for every integration gap.

10	5,290	4	8
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

Hospital brands, reviews, local search, wellness plans, and emergency care all shape acquisition. Consolidators need national operating visibility without erasing the neighborhood identity that creates trust.

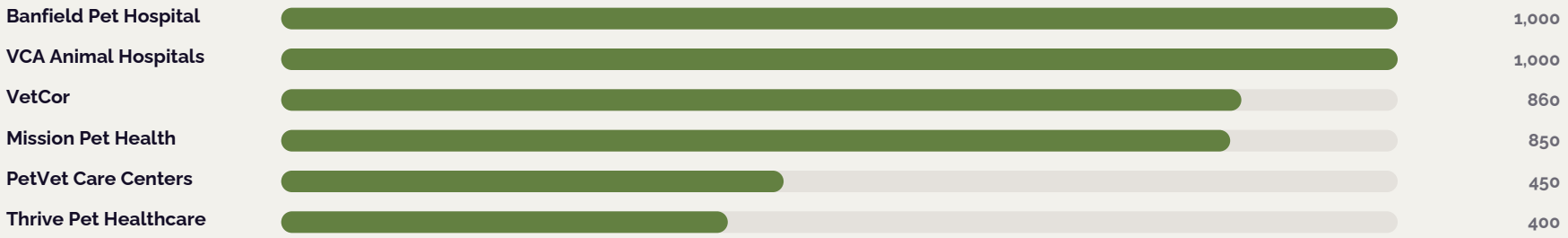
Three trends to watch

01 **Local reputation and map visibility remain primary demand assets.**

02 **Acquired hospital brands persist inside increasingly centralized groups.**

03 **Per-hospital economics make a governed location dimension more useful than a national blended average.**

SELECTED OPERATOR FOOTPRINT



Urgent care

Urgent care turns marketing measurement into an operating system: local intent, wait-time promises, seasonality, and same-day visits compress the feedback loop.

11	2,554	3	2
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

A national campaign can create demand, but the patient converts against a specific clinic with a specific wait time and capacity. The useful unit of analysis is therefore the location-day, not only the campaign.

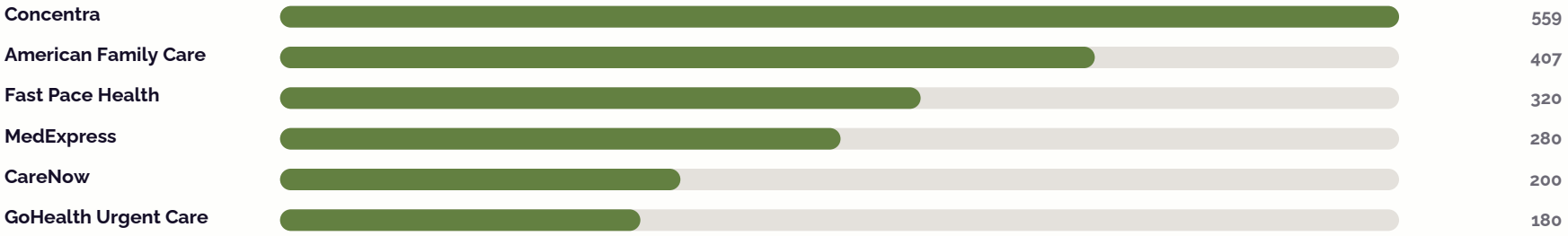
Three trends to watch

01 **Maps and near-me intent connect media performance directly to clinic capacity.**

02 **Same-day conversion makes broken tracking expensive before a weekly report catches it.**

03 **Franchise and corporate advertisers can coexist against the same brand and web estate.**

SELECTED OPERATOR FOOTPRINT



Dermatology platforms

Dermatology is a dual-economics market: insurance-led medical care and cash-pay cosmetic services can share a brand, a clinic, and a media account while requiring different measurement.

9	758	2	7
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

Acquisition platforms grow geographically while expanding service mix. Without separating medical and cosmetic journeys, location-level CAC and revenue comparisons become misleading.

Three trends to watch

01 **Medical and cosmetic demand require different conversion and revenue models.**

02 **PE-backed platform growth increases the number of inherited brands and systems.**

03 **Service-line tagging becomes as important as location tagging.**

SELECTED OPERATOR FOOTPRINT

Physical therapy networks

Physical therapy combines very large clinic networks with two acquisition systems: physician referrals and direct-access consumer marketing.

10	8,529	5	0
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

Marketing performance has to connect local media and search with referral relationships, appointments, visits, payer mix, and clinic capacity. Lead volume alone is a weak proxy for business value.

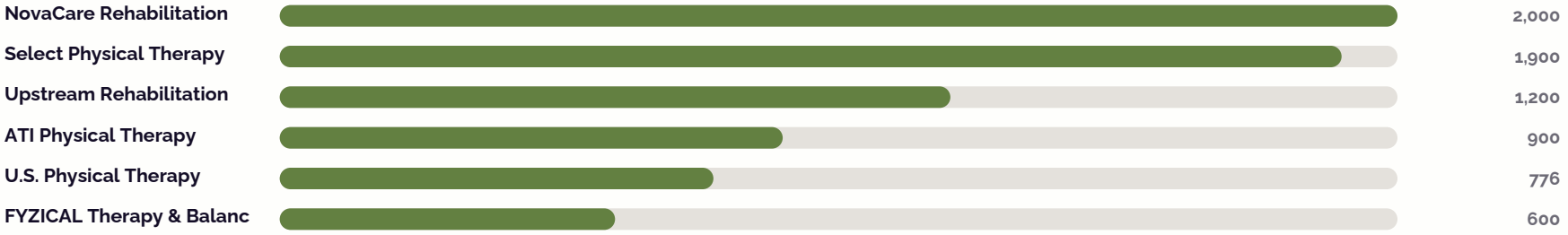
Three trends to watch

01 **Referral and direct-to-consumer journeys need one location taxonomy.**

02 **Payer mix changes the value of apparently identical booked visits.**

03 **Large footprints amplify small tracking and naming inconsistencies.**

SELECTED OPERATOR FOOTPRINT



Med spa and aesthetics

Med spa is the most direct consumer-acquisition model in the cohort: high media intensity, cash-pay economics, sensitive-category ad constraints, and fast local expansion.

8	1,003	3	2
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

National creative and offer systems meet local inventory, practitioner schedules, and franchise economics. The gap is rarely a lack of activity; it is knowing which combination creates profitable booked treatment by market.

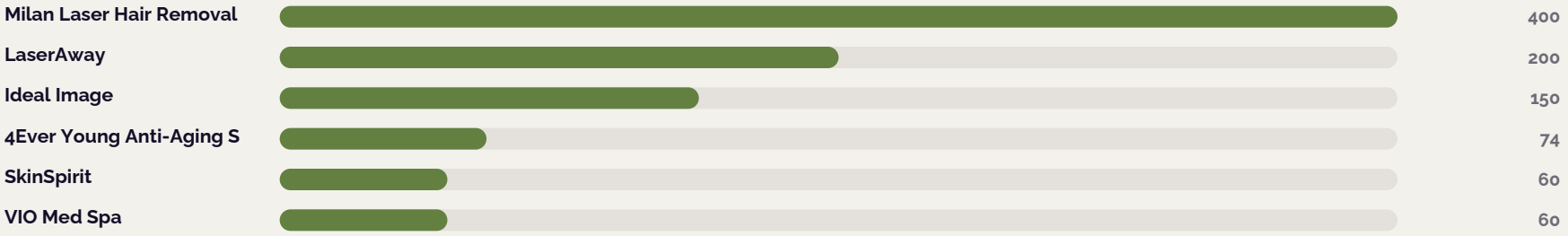
Three trends to watch

01 **Paid social and promotion cadence shape category demand.**

02 **Cash-pay economics make per-location CAC a board-level operating metric.**

03 **Sensitive-category policy constraints increase the value of systematic creative measurement.**

SELECTED OPERATOR FOOTPRINT



Vision and optical retail

Vision is a retail-health hybrid: the same market can include exams, insurance eligibility, eyewear promotion, e-commerce, and store-level appointment capacity.

8	3,259	2	2
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

The operating model has to reconcile retail sales and clinical appointments without losing the location, product, payer, and promotional context that explains performance.

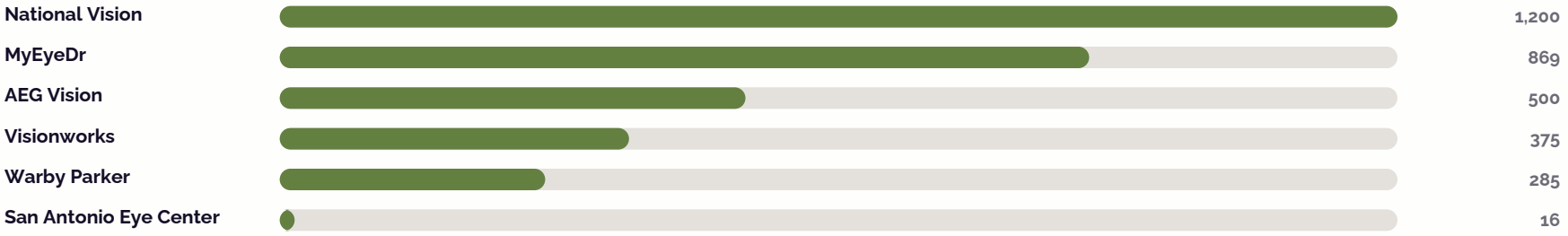
Three trends to watch

01 **E-commerce and physical exam journeys increasingly overlap.**

02 **Insurance and retail promotion create different attribution clocks.**

03 **Store-level comparisons require consistent location and product taxonomies.**

SELECTED OPERATOR FOOTPRINT



Fertility networks

Fertility has long decision windows, high potential lifetime value, physician and partner referrals, and a patient journey where privacy expectations are unusually high.

6	295	1	1
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

A lead can move through education, insurance or benefits, physician selection, financing, and multiple clinical steps. Channel-level last-click reporting cannot describe that sequence.

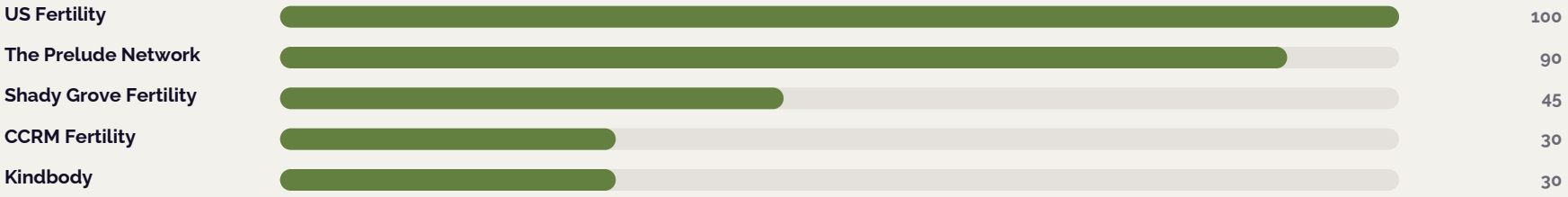
Three trends to watch

01 **Long consideration windows increase the need for durable journey stitching.**

02 **Privacy and sensitive-category controls shape both media and measurement.**

03 **Referral, employer-benefit, and consumer channels can touch the same patient journey.**

SELECTED OPERATOR FOOTPRINT



Vein and vascular clinics

Vein and vascular groups combine direct-response marketing, insurance eligibility, local expansion, and call-led conversion.

4	288	1	1
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

The journey frequently moves from ad or broadcast exposure to a call, eligibility check, consultation, and procedure.
Each handoff creates a new data owner and a new opportunity to lose the location context.

Three trends to watch

01 **Call tracking remains a primary conversion bridge.**

02 **Insurance qualification separates inquiries from commercially useful demand.**

03 **Broadcast, search, and paid social require a shared market-level view.**

SELECTED OPERATOR FOOTPRINT

Other specialty networks

Hearing, chiropractic, treatment, weight-loss, and other specialty networks vary clinically but converge operationally around local lead routing and brand-versus-franchise governance.

16	5,302	4	0
OPERATORS	KNOWN LOCATIONS	DEEP DIVES	KNOWN PE-BACKED

The marketing pattern

The shared problem is visibility across a network where corporate marketing, franchisee activity, call centers, local websites, and appointment systems do not always use the same identifiers.

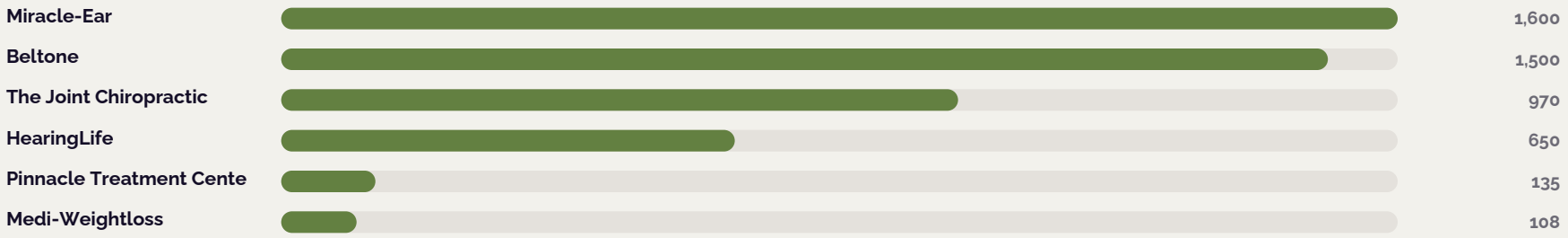
Three trends to watch

01 **Franchise models split control of spend, media, and lead follow-up.**

02 **Calls and local search dominate categories with high offline conversion.**

03 **National reporting can hide the markets where routing or tracking is failing.**

SELECTED OPERATOR FOOTPRINT



Public evidence, explicit limits

The public edition covers 100 active operators after 29 candidate rows were excluded through public-source triage. Completed company reviews record public location, website, advertising, technology, ownership, and operating-model evidence.

32 complete reviews

Company-level footprint, public stack, demand, and operating model.

402 source links

An average of 12.6 recorded public links per completed report.

Dated observations

Location and ad-library counts can change after publication.

Private context excluded

No CRM, calls, contacts, customer data, scoring, or sales advice.

SELECTED PUBLIC SOURCES

HHS online tracking guidance	https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/hipaa-online-tr
FTC Health Breach Notification Rule	https://www.ftc.gov/legal-library/browse/rules/health-breach-notification-ru
Google Ads Transparency Center	https://adstransparency.google.com/
Meta Ad Library	https://www.facebook.com/ads/library/
Operator websites and location directories	https://www.myeyedr.com/locations