DOCTOR PAGES

# Anatomy of a doctor profile that converts

The most visited, least designed pages on a hospital site. What goes on them, in what order, and who owns them.

Swipe →

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THE JOB



# Four questions, in this order

1. Does this doctor treat what I have?
2. Can I trust them?
3. Can I see them soon, somewhere I can reach?
4. What happens when I press book?

Every element answers one of these or gets out of the way.

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FIRST SCREEN



# Six things on the first screen, nothing else

- Name and specialty in plain words: heart specialist
- A real, recent photograph, same framing across the group
- Units and days, both if the doctor sits at two
- Languages spoken: a conversion factor in India, not a courtesy
- Next available slot, and one primary action: book

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FOCUS AREAS



# Clinical scope in the patient's words

| | |
|---|---|
| WRONG | Missing, or every procedure the department ever performed |
| RIGHT | A short list the doctor genuinely focuses on and signs off |
| BOTH TERMS | Knee pain and arthroplasty; thyroid doctor and endocrinologist |
| DISTINCT | Four orthopaedic surgeons with four different focus areas |

Publishing a procedure a doctor does not perform is the fastest way to lose their trust.

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TRUST SIGNALS



# What patients actually read

- Qualifications and memberships: lower down, scannable, reassurance
- Two or three sentences on how the doctor approaches a consultation
  The doctor's own view, corrected by them, never invented
- Reviews live at unit level on the Google profile
- No testimonials for promotion under the 2026 NMC guidelines

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BOOKING



# The booking step is part of the page

- Opens with doctor and unit already selected
- Real slots where the scheduling system exposes them
- Fewest fields: name, mobile, slot, first visit or not
- Instant confirmation on screen and on the phone
- Doctor and source page carried into the CRM

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SEARCH AND AI



# Search, Maps and AI assistants read the same page

- One canonical page per doctor, every unit listed on it
- Physician structured data: specialty, hospital, languages, booking link
- Spell the name identically everywhere
- Write a quotable summary: who she sees, where, when, in which languages

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GOVERNANCE



# Keeping hundreds of pages honest

| | |
|---|---|
| **SOURCE** | Doctor master data from medical admin, not the website |
| **MARKETING OWNS** | Introduction, focus areas, photograph, video |
| **LEAVERS** | Live briefly with a note, route to colleagues, then redirect |
| **JOINERS** | Page live before the first OPD, on the joining checklist |
| **FALLBACK** | On leave: say so and offer a colleague with similar focus |

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# Fix the twenty profiles that matter most

1. Month one: first screen, pre-filled booking, source tagging
2. Month two: focus areas with each doctor, structured data
3. Month three: compare bookings per visitor against the rest
4. Check clinic availability before blaming the page

Take the comparison to the medical director and unit heads to fund the rollout.

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READ THE FULL GUIDE



# Doctor profile pages that convert, in full

- The consultation fee question
- Working with doctors on their own pages
- Governing joiners, leavers and timings
- gauravphogat.com/doctor-profile-pages-that-convert

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