ENQUIRY CHANNELS

WhatsApp vs web forms for hospital enquiries

WhatsApp usually converts better in India, but only when staffed. Offer both, route both into one CRM.

Swipe →

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AT A GLANCE

How the two channels compare

EFFORT	Tap and type vs fields, validation, waiting for a call back
FIRST REPLY	Minutes if staffed vs a call back, often hours later
DATA	Needs agents or a bot vs built-in structure
ATTRIBUTION	Needs tagged entry points vs straightforward with parameters
OFF-HOURS	Messages wait visibly vs forms wait silently

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WHY WHATSAPP WINS

Patients already live in the app

- They trust it for personal conversations
- Families forward the chat to whoever decides
- A quick human reply builds confidence before the visit
- Reminders and directions land in the same thread

The catch is staffing. An unanswered chat is worse than an unanswered form; the patient can see they were ignored.

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WHERE FORMS WIN

Four cases that need structure

- Second opinions where reports and history must be shared
- Corporate, insurer and international enquiries from desktops
- Patients who will not share their number on a chat app
- Campaigns where precise attribution beats speed

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RUN BOTH

Six rules so nobody falls through

1. WhatsApp Business API into the CRM, never staff phones
2. Tag each entry point: website button, ad, Business Profile
3. Short forms: name, mobile, service line, unit, consent
4. Response-time targets for both, reported by unit and shift
5. Measure both on cost per treated patient, not enquiry counts

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AVOID

The four common mistakes

- A WhatsApp button with nobody staffing it
- Long forms that ask for medical history up front
- No auto-acknowledgement on either channel
- Counting chats as leads without checking who became patients

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TEST IT

A side-by-side test by service line

PAGES	Two or three high-traffic service pages, one service line
OFFER	WhatsApp button and short form with equal prominence
TAG	Each entry point gets its own CRM source
MATCH	Answer both within the same target time
COMPARE	Share booked, arrived and treated per channel, over several weeks

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THE FIRST REPLY

Design the first message on both channels

- Confirm the enquiry was received
- Say when a person will respond if outside hours
- Ask one useful question
- Offer the emergency route

No long automated menus as the first message. Patients want to feel heard.

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READ THE FULL GUIDE

WhatsApp vs web forms, in full

- What each channel needs: people, systems, content, consent
- Handling evening and weekend enquiries
- Moving patients between channels without repeating themselves
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