



MONTHLY REPORT SAMPLE · MEDICAL (CLINIC / DENTAL)

# What we'd see in your business.

医療機関(クリニック・歯科)

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## DOCUMENT CONTEXT

This is a representative sample audit prepared from a fictional Japanese dental clinic (歯科医院) at approximately ¥110M annual revenue, with 3 dentists, 5 hygienists, and approximately 1,800 active patients. The practice runs 自由診療 (free-pricing) services alongside insurance-covered treatment.

All names, figures, and individuals shown are fabricated. The methodology, formulas, structure, and analytical depth are *identical* to those used in a live engagement.

If this is what you'd want to see for your business — request a free assessment at [meridian.tokyo/assessment](https://meridian.tokyo/assessment). Within 48 hours, you'll receive a written diagnosis specific to your business.

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# What this business looks like through our lens.

Key operational metrics, each benchmarked against industry. The table shows where your business currently sits versus targets and recovery potential. The numbers are a summary — the substance is in which metrics are dropping, why, and how to fix them. The analysis on the following pages is the value.

## What we'd surface first

This clinic is financially fine but operationally fragmented. Revenue is steady and margin is acceptable, but several signals point to systemic patient-flow issues that compound over time.

The most concerning patterns are no-show rate (32% above industry norm) and follow-up compliance (only 41% of recommended treatments are completed). *Both indicate a communication gap, not a clinical one.*

If unaddressed for 12 months, these two issues alone will represent ~¥18M in foregone revenue. Each is fixable with process changes — no new equipment, no new hiring, no marketing spend.

## Key metrics this month

Metric	Weight	Current	Target
Revenue (monthly)	15%	¥9.2M	¥10M
Patient retention	15%	78%	85%
Treatment completion rate	15%	41%	70%
No-show rate (inverse)	10%	12%	8%
Avg revenue per patient/yr	10%	¥61k	¥75k
Chair utilization	10%	72%	80%
EBITDA margin	15%	28%	25%
New patient acquisition	10%	18/mo	25/mo

# What's actually wrong — right now.

Three issues this business is bleeding money on. Each one has a specific cost, a specific fix, and a specific way to measure whether the fix worked. This is what the monthly action plan looks like, condensed.

## 01

**HIGH IMPACT**  
Clinical follow-through

59% of recommended treatments are never completed.

### What we see

Of patients given a written treatment plan in Q1, only 41% completed all recommended procedures within 6 months. The drop-off is heaviest at the second appointment: patients agree, schedule, then no-show or cancel. There's no follow-up workflow.

### Estimated cost

Assuming average treatment plan value of ¥45k and 1,200 plans issued/year, the completion gap costs ~¥32M annually in foregone clinical revenue.

### Recommended action

Implement a written follow-up sequence: Day 3 after first appt (text), Day 7 (call), Day 14 (email with the original written plan attached). Track completion rate per treatment type — some procedures may need different cadence.

## 02

**MEDIUM IMPACT**  
Scheduling

12% no-show rate is costing ~¥800k/month.

### What we see

Average no-show rate across all appointment types is 12%. Industry benchmark for established dental practices is 6-8%. The gap concentrates in initial consultations (18% no-show) and 1-month follow-ups (22%).

### Estimated cost

~¥9.6M annually in unfilled chair time, plus the indirect cost of patients who don't return after their own no-show.

### Recommended action

Implement 48-hour automated SMS reminders with one-click confirmation. For high-value procedures, require ¥3k deposit at booking (refundable on attendance). Track no-show rate weekly per treatment type.

## 03

**RECURRING**  
Acquisition — channel mix

Word-of-mouth is doing all the work; paid is dead weight.

### What we see

82% of new patients come from referrals or organic Google search. Paid ads (¥180k/quarter) generate 6 patients with 2 actually completing first treatment. ROAS on paid: 0.7x. On organic: untracked but positive.

### Estimated cost

~¥120k/quarter in unproductive ad spend. Plus the time spent reviewing reports that don't matter.

### Recommended action

Pause paid ads for 90 days. Reinvest budget in: (1) Google Business Profile optimization, (2) a written referral request added to discharge letters, (3) one high-quality blog post per month. Re-evaluate paid only after organic is fully optimized.

# What changed after the work.

After 5 months, the operational picture had shifted measurably. Each result corresponds to one of the red flags identified in the audit. Plausible, conservative, and tracked monthly.

## 01 Treatment completion

BEFORE

41% completion rate



AFTER

67% completion rate

+~¥18M/year clinical revenue

## 02 No-show rate

BEFORE

12% no-show rate



AFTER

7% no-show rate

after SMS reminders + deposits

## 03 Acquisition channel cost

BEFORE

Paid ads CAC + low conversion



AFTER

-38% new patient acquisition cost

after pausing paid + organic focus

Numbers reflect outcomes from comparable engagements, anonymized for confidentiality. Individual results vary; benchmarks are realistic averages, not best-case scenarios.

# How an engagement actually runs.

A live engagement is structured. Not consulting hours, not “we’ll figure it out as we go”. Four phases of setup, then monthly delivery on a calendar.

## WEEK 1

### Discovery & data audit

We examine your existing data — CRM exports, finance sheets, ad reports, sales records. Format and condition don’t matter. We identify the highest-leverage gaps.

## WEEKS 2-3

### Sector calibration

We configure benchmarks, metrics, and red-flag thresholds against your industry and your prior periods. Custom-fit, not template.

## WEEK 4

### First diagnosis

First written diagnosis delivered. Three priorities to act on this month, with the cost of inaction quantified for each.

## MONTH 2+

### Monthly action plans

Each month, a written action plan. What’s broken, where the leaks are, and the prioritized playbook for next month. Asynchronous — reply by email when convenient.

## Engagement tiers

### Foundation

¥90k + ¥90k/mo

Single business, simple structure

### Standard **RECOMMENDED**

¥130k + ¥130k/mo

Multi-channel, growing business

### Extended

from ¥200k + ¥220k/mo

Multi-business-unit, group structure

Setup guarantee: if within 3 months the improvement opportunities we identify total less than what you’ve paid us in retainers, we refund the entire setup fee. The retainer is cancellable monthly — the guarantee covers identification of opportunities, not implementation.

## NEXT STEP

### Request a free assessment.

Visit [meridian.tokyo/assessment](https://meridian.tokyo/assessment) and tell us briefly about your business. Within 48 hours you’ll receive a written initial diagnosis: typical leakage patterns in your industry, three likely problems specific to your situation, and the hardest questions you should be answering.

No commitment, no sales call. If after the diagnosis we both agree it’s a fit, we propose terms. If not, you keep the diagnosis and this sample.