A CHIROBASIX GUIDE · 2026

PATIENT REACTIVATION AND RETENTION TEMPLATE KIT

35+ copy-paste texts, emails, call scripts and mail pieces, a 35-day sequence, a segmentation table, a 12-month calendar and a tracking checklist for chiropractic practices.

From CHIROBASIX. Last reviewed November 2026. General information, not legal advice.

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01 · PART 1

START HERE: WHAT REACTIVATION IS AND THE RULES

Read this page once before you send anything. Every template in this kit was written to fit these rules.

Patient reactivation is a planned, repeatable way to invite past patients back into care after they've gone a set time without a visit and have nothing booked. Retention is the other half: keeping current patients from drifting off in the first place. This kit gives you both, ready to load into your texting tool, email platform and front desk binder.

THE REACTIVATION RULES, IN ONE BOX

General information, not legal advice. Have your healthcare attorney review your texting setup and any offer before you launch.

- No health details. Ever. No condition, treatment, body part, visit reason or progress in any message, subject line or voicemail.
- Text only patients who agreed to texts. Marketing texts (anything with an offer) need prior express written consent.
- Every text says how to opt out, and you honor opt-outs fast.
- Every marketing email has your postal address and a working unsubscribe link.
- No free or discounted "come back" offers to Medicare or Medicaid patients without legal review.
- Send during daytime hours in the patient's time zone. A safe house rule is 9 a.m. to 7 p.m., Monday through Saturday, never more than one text a day.
- Never upload your patient list to an ad platform without your compliance advisor's sign-off.

The merge fields used in these templates

Merge field	What it fills in
{{first_name}}	The patient's first name
{{practice_name}}	Your practice name
{{doctor_name}}	The doctor's name, for example Dr. Lee
{{staff_name}}	The team member sending or calling

Merge field	What it fills in
{{phone}}	Your office phone number
{{booking_link}}	Your online booking link
{{address}}	Your office address
{{town}}	Your town or neighborhood
{{review_link}}	Your direct Google review link

NEVER USE THESE FIELDS

Appointment type, diagnosis, visit reason, provider notes or the date of a specific visit.
"We haven't seen you since your March 3 visit" confirms care details in writing.

02 · PART 2

THE MATH: WHY REACTIVATION IS YOUR CHEAPEST NEW PATIENT

Use your own conversion rates. The ad costs are medians from CHIROBASIX's State of Chiropractic Marketing report (Nov 2025 to Oct 2026); everything labeled Example is illustrative.

What a new patient from ads costs

	Meta lead	Google Ads conversion
Median cost per lead (CHIROBASIX report)	$33.11	$23.55
Example: share of leads that become a patient who shows	1 in 3	1 in 2
Example: ad cost per new patient	about $99	about $47

Example: a reactivation campaign to 300 inactive patients

Cost	Amount
Texting and email platform you already pay for	$0 extra
Postcards to 300 patients (example: $0.90 each; check current USPS rates)	$270
Front desk call time: 10 hours at $20 an hour	$200
Small retargeting ad budget for 30 days	$100
Total	$570

THE BREAK-EVEN RULE

Campaign cost ÷ your ad cost per new patient = patients you need back to tie. Example: $570 ÷ $99 = about 6 patients, or 2% of 300. If 8% came back (an assumption, not a benchmark), that's 24 patients at $23.75 each.

Your numbers

Line	Your number
Patients on the inactive list	
Total campaign cost	
Your ad cost per new patient	
Patients needed to break even (cost ÷ ad cost per patient)	
Patients reactivated	
Cost per reactivation	

03 · PART 3

DEFINITIONS AND FORMULAS

There's no official standard for any of these. Pick definitions and use them the same way every month.

The five buckets

Bucket	Last visit	Future appointment?	What it usually means
Active	Within 30 days	Yes, or on a regular schedule	In care
Recall	31 to 60 days	No	Slipping; a reminder is often enough
Inactive	61 to 90 days	No	Drifted; the main reactivation target
Lapsed	91 to 180 days	No	Needs a reason and a personal touch
Dormant	181 to 365+ days	No	May need a re-exam; reintroduce the office

THE ONE RULE THAT MATTERS MOST

A patient with something booked is never on the reactivation list, no matter how long ago their last visit was.

The formulas

Metric	Formula	Example
Reactivation rate	Reactivated patients ÷ patients contacted	24 ÷ 300 = 8%
Reactivated patient	Booked AND attended within 60 days of the first message	Your rule; keep it fixed
Cost per reactivation	Campaign cost ÷ reactivated patients	$570 ÷ 24 = $23.75
Patient visit average (PVA)	Total visits in a period ÷ new patients in the same period	3,600 ÷ 150 = 24

Metric	Formula	Example
Visit-N retention	New patients who reached visit N ÷ new patients who started	96 ÷ 150 = 64% at visit 6
Rebook rate	Visits that left with the next visit booked ÷ total visits	410 ÷ 500 = 82%
No-show rate	No-shows ÷ scheduled visits	30 ÷ 600 = 5%
Opt-out rate	Opt-outs ÷ messages delivered, per send	3 ÷ 300 = 1%

Find your drop-off points

1. Pull every new patient who started six months ago.
2. Count how many reached visit 2, 3, 6, 12 and 24.
3. Find the biggest drop between two steps.
4. Aim your retention touchpoints (Part 13) right before that drop.

04 · PART 4

PULL AND CLEAN YOUR INACTIVE LIST

The list you want: last completed visit before your cutoff date, and no future appointment. Report names below come from each company's public help docs as of November 2026. Menus change, so confirm in your version.

Where to find it

Software	Report to use	Watch out for
ChiroTouch	Recall Patient List (patients with no future appointments)	The date range must include the patient's last completed appointment, so start it far back and end it at your cutoff
Jane	Unscheduled Patient Report (Last Visit), Reports tab	Use Days Since Last Visit; cancelled visits can count as a last visit, so spot-check
ChiroFusion	Inactive Patients, under Run Reports, Scheduling Reports	Exports to Excel; check for future bookings before sending
ChiroHD	Patients Without Future Appointments (Health Check)	Lookback windows from 7 to 365 days; exports CSV
zHealth	Patient Recall Report, Batch Reports	Groups patients by 3, 6 and 12+ months since last visit
ECLIPSE, Genesis and others	Look for recall, inactive, last visit or unscheduled reports	Or export patients and appointments and compare them in a spreadsheet

Clean the list before anyone sends anything

- [ ] Remove anyone with a future appointment.
- [ ] Remove do-not-contact patients: opted out, deceased, discharged, or asked not to hear from you.
- [ ] Set aside open personal injury and workers' comp cases.
- [ ] Set aside patients with a balance in collections (billing and reactivation never share a message).
- [ ] Route minors to the parent or guardian on file.
- [ ] Check consent flags: texts only to patients with text consent; marketing texts need written consent.

- [ ] Dedupe, fix first names, flag bad numbers.
- [ ] Note today's date. Pull again on the same day next month.

05 · PART 5

SEGMENT THE LIST AND MATCH THE MESSAGE

Use whatever you know. When you don't know why someone is inactive, use time since last visit.

The segmentation table

Segment	What to say	Lead channel
Recall (31 to 60 days)	A friendly "time to get back on the schedule" reminder	Text
Inactive (61 to 90 days)	A check-in, then make booking easy	Text, then email
Lapsed (91 to 180 days)	"We'd love to see you," plus what's new	Email and call
Dormant (181 to 365+ days)	Reintroduce the office; offer a fresh start or re-exam	Letter or postcard, then email
Completed care plan	Congratulations, plus how to stay on track; no guilt	Email from the doctor
Dropped mid-plan	A personal call to ask what got in the way	Doctor or front desk call
Known reason: cost	Payment options or a membership plan if you offer one	Call
Known reason: schedule	New or extended hours, online booking	Text or email
Known reason: moved	Thank them; offer a referral to someone local	One text, then remove
Known reason: unhappy	Do not market. Owner or doctor calls to listen	Call only

Segment	What to say	Lead channel
Cash patients	Membership or package options, visit pricing up front	Email
Insurance patients	Benefits often reset in January; offer to check theirs	Email and call
Medicare patients	Scheduling only. No free or discounted offers without legal review	Call or email

ASSUME GOOD INTENT

In a UK national survey of chiropractic patients (MacPherson et al., 2015), the most common reason for stopping care was that the problem improved. Your message is a check-in, not a guilt trip.

THE 18-MONTH LINE FOR CALLS

Under FCC rules, an established business relationship lasts 18 months after a patient's last purchase or transaction (47 CFR 64.1200(f)(5)). For dormant patients past that window who are on the national Do Not Call list, don't make sales calls without consent. Use mail and email.

06 · PART 6

COMPLIANCE QUICK REFERENCE

General information, not legal advice. Current as of November 25, 2026. Rules vary by state and change often.

HIPAA

- Communications by a provider for treatment of the patient, or to recommend alternative treatments, are carved out of HIPAA's marketing definition (45 CFR 164.501), unless a third party pays you to send them.
- A vendor-sponsored message is marketing and needs written authorization (45 CFR 164.508(a)(3)).
- Your texting and email platform needs a business associate agreement (45 CFR 164.502(e)). Ad platforms generally won't sign one, so don't upload patient lists.
- HHS: limit the amount of information disclosed in messages (HHS HIPAA FAQ 198).

TCPA: what consent each text needs

Message type	Example	Consent for automated texts
Healthcare reminder	"It's time to schedule your next visit"	Prior express consent, plus the healthcare exemption limits
Marketing	"Come back this month and save $20"	Prior express written consent: signed (e-signatures count), clearly authorizes marketing texts, says consent isn't a condition of care

The FCC healthcare exemption (47 CFR 64.1200(a)(9)(iv)): all must be true

- [ ] Free to the patient, sent only to the number the patient provided
- [ ] States your practice name and contact information
- [ ] Strictly limited to purposes like appointment and exam confirmations and reminders and wellness checkups
- [ ] No telemarketing, solicitation or advertising, and no billing or debt-collection content
- [ ] 160 characters or less
- [ ] One message a day, three a week, maximum
- [ ] Tells the patient they can reply STOP, and honors opt-outs immediately

Opt-outs, hours and recent changes

- Honor revocations within 10 business days (FCC rules effective April 11, 2025). Our advice: honor them immediately, by any wording.
- FCC 26-67 (effective November 25, 2026) lets senders designate an exclusive opt-out method, lets an informational opt-out apply to that category only, and keeps the rule that a STOP to a marketing message ends all advertising messages. One confirmation text is allowed within five minutes.
- Federal telephone solicitations: only 8 a.m. to 9 p.m. in the recipient's local time (47 CFR 64.1200(c)(1)).
- The FCC one-to-one consent rule was vacated (Insurance Marketing Coalition v. FCC, 11th Cir., January 2025).

State mini-TCPAs (examples)

State	Hours for solicitations	Frequency
Florida (Fla. Stat. 501.616, 501.059)	8 a.m. to 8 p.m. local	Max 3 on the same subject in 24 hours; 15-day STOP cure for text solicitations
Oklahoma (15 O.S. 775C.4)	8 a.m. to 8 p.m.	Max 3 in 24 hours; existing business relationships exempt
Maryland (Com. Law 14-4502)	No calls 8 p.m. to 8 a.m.	Max 3 in 24 hours
Washington (RCW 80.36.390)	8 a.m. to 8 p.m.	

CAN-SPAM (FTC compliance guide)

- No misleading From names or subject lines
- Your valid physical postal address in every email
- A clear opt-out, honored within 10 business days
- Penalties of up to $53,088 per email, per the FTC

MEDICARE AND MEDICAID: THE OIG RULE

Federal law bars offering Medicare or Medicaid beneficiaries anything of value likely to influence them to choose a particular provider (42 U.S.C. 1320a-7a(a)(5)). OIG allows gifts of nominal value only: no more than $15 per item or $75 in total per patient per year, never cash or gift cards (OIG Policy Statement, December 2016). Routine copay waivers are a separate concern. Medicare Part B pays only for manual manipulation of the spine to correct a subluxation (42 CFR 410.21(b)). Florida also requires a capitalized disclaimer on ads for free or discounted services (Fla. Stat. 456.062).

07 · PART 7

THE 35-DAY REACTIVATION SEQUENCE

Built for inactive and lapsed patients (61 to 180 days). Shorten it for recall patients and slow it down for dormant ones. Numbers point to the templates in Parts 8 to 12.

Day by day

Day	Channel	Template	Job
0	Text	#1 The check-in	Friendly first touch
1	Email	#17 The doctor's check-in	A personal note with a booking link
3	Call	#25 call or #26 voicemail	A real voice; two specific times
7	Email	#18 What's new	A reason to come back
10	Text	#2 Reply YES	The lowest-effort yes
14	Postcard	#31	Lands around day 17
14 to 44	Ads	#33	Generic retargeting to website visitors and Page engagers
21	Email	#19 Make it easy	Booking link, hours, payment options
28	Text	#4 The last touch	Closes the loop without pressure
35	Email	#20 The last note	Asks how they'd like to hear from you

Stop rules (set these in your platform)

- [ ] Booked: exit the sequence and send a normal confirmation.
- [ ] Replied: pause automation; a human answers within one business day.
- [ ] Opted out: exit that channel right away.
- [ ] Moved, unhappy or "please stop": remove from reactivation and note why.

SPACING AND AFTER DAY 35

Three texts in 35 days, never more than one a day, nothing outside 9 a.m. to 7 p.m. local. Non-responders move into a quarterly recall text and your monthly email.

TEXT TEMPLATES

Keep texts under 160 characters where you can, put the link at the end, and keep your platform's opt-out wording. Templates with an offer are marketing and need written consent.

1. The check-in (day 0)

PRACTICE TEXT Hi {{first_name}}, it's {{practice_name}}. It's been a little while and we wanted to check in! Book anytime: {{booking_link}} Reply STOP to opt out.

2. The "Reply YES" (day 10)

PRACTICE TEXT Hi {{first_name}}, want us to find you a time this week? Reply YES and {{staff_name}} will text you a couple of options. {{practice_name}}

3. "We miss you" (lapsed and dormant patients)

PRACTICE TEXT Hi {{first_name}}, the team at {{practice_name}} was just talking about you. We'd love to see you again! Grab a time here: {{booking_link}}

4. The last touch (day 28)

PRACTICE TEXT Hi {{first_name}}, last note from us for now. Whenever you're ready, we're here: {{booking_link}} or {{phone}}. Take care! {{practice_name}}

5. Same-day no-show

PRACTICE TEXT Hi {{first_name}}, we missed you today at {{practice_name}}. No worries, life happens! Want to grab a new time? {{booking_link}}

6. Cancellation rebook

PRACTICE TEXT Hi {{first_name}}, thanks for letting us know. Let's get you back on the schedule. Here are open times: {{booking_link}} Or reply and we'll help.

7. Dropped off mid-plan (after two missed weeks)

No "care plan," no "treatment," nothing about why they came in. The doctor's call (#28) is where that conversation happens.

PRACTICE TEXT Hi {{first_name}}, {{doctor_name}} asked me to check in since we haven't seen you lately. Can we help find a time that works? {{booking_link}}

8. Birthday

No link, no ask. Birthday texts work because they aren't a pitch.

PRACTICE TEXT Happy birthday, {{first_name}}! Everyone at {{practice_name}} hopes you have a great day. 🎉

9. When they reply YES

FRONT DESK TEXT Great! I have Tuesday at 4:30 or Thursday at 9:00. Which works better? Or pick any time here: {{booking_link}} {{staff_name}}

10. When they reply "not now"

Then tag them, pause the sequence and move them to quarterly recall.

FRONT DESK TEXT Totally understand, {{first_name}}. We'll be here when you're ready. Thanks for letting us know! {{staff_name}}

SEASONAL TIMING

In CHIROBASIX's report (Nov 2025 to Oct 2026), new leads ran 2% to 9% above the yearly average from January through April and 20% to 26% below it from August through October. Use reactivation to fill the schedule when new leads dip.

11. January (new year)

PRACTICE TEXT Hi {{first_name}}, happy new year from {{practice_name}}! Our January schedule is open. Want to start the year with a visit? {{booking_link}}

12. Slow season (August to October)

PRACTICE TEXT Hi {{first_name}}, fall schedules are filling up at {{practice_name}}. Want to grab a spot before it gets busy? {{booking_link}}

13. Year-end benefits (November and December)

Only promise to check. Never tell a patient a visit will be covered before you've verified it.

PRACTICE TEXT Hi {{first_name}}, a heads-up from {{practice_name}}: many insurance plans reset in January. Want us to check what yours covers? Reply YES.

09 · PART 9

SPANISH TEMPLATES

Spanish versions of the three texts that do the most work. Have a native speaker on your team review them before you send; wording varies by region.

14. Español: el primer mensaje (template 1)

PRACTICE TEXT Hola {{first_name}}, le saluda {{practice_name}}. ¡Hace tiempo que no le vemos y queremos saber cómo está! Haga su cita: {{booking_link}} Responda STOP para salir.

15. Español: lo extrañamos (template 3)

PRACTICE TEXT Hola {{first_name}}, todo el equipo de {{practice_name}} le extraña. ¡Nos encantaría verle de nuevo! Elija un horario aquí: {{booking_link}}

16. Español: cita perdida (template 5)

PRACTICE TEXT Hola {{first_name}}, le extrañamos hoy en {{practice_name}}. ¡No se preocupe! ¿Quiere programar otra cita? {{booking_link}}

CHECK THE CHARACTER COUNT

Accented letters change how phones count characters, so Spanish texts can run long. Check the count in your platform, especially for messages sent under the healthcare exemption.

EMAIL TEMPLATES

Short, human subject lines, signed by the doctor, with your postal address and unsubscribe link in the footer.

17. The doctor's check-in (day 1)

PRACTICE EMAIL SUBJECT LINE	Checking in, {{first_name}}
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	I was going through our schedule this week and noticed it's been a while since we've seen you. No agenda here. I just wanted to say hi and see how you're doing.
PRACTICE EMAIL	If you'd like to come in, you can pick a time here: {{booking_link}}. If you'd rather just reply and tell me how life's going, I read these.
PRACTICE EMAIL	{{doctor_name}} {{practice_name}} · {{phone}}

18. What's new (day 7)

PRACTICE EMAIL SUBJECT LINE	A few things have changed around here
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	Since your last visit, a few things are new at {{practice_name}}:
PRACTICE EMAIL	[New hours, for example early mornings on Tuesdays and Thursdays] • [New team member or doctor] • [Online booking, a new service or a new membership option]
PRACTICE EMAIL	We'd love to show you. Book a time here: {{booking_link}}
PRACTICE EMAIL	The {{practice_name}} team

19. Make it easy (day 21)

PRACTICE EMAIL SUBJECT LINE	Two minutes to book
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	We know getting back on the schedule is the hardest part, so here's everything in one place:
PRACTICE EMAIL	Book online: {{booking_link}} • Call or text: {{phone}} • Hours: [your hours] • Payment: [your payment options, for example cash pricing, HSA and FSA cards, membership]
PRACTICE EMAIL	Questions first? Just hit reply.
PRACTICE EMAIL	{{doctor_name}}

20. The last note (day 35)

PRACTICE EMAIL SUBJECT LINE	Should we keep in touch?
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	This is my last reactivation note, I promise. We'd love to keep you in the loop with our monthly email (tips, office news, nothing pushy). If you'd rather not hear from us, use the unsubscribe link below and we'll respect that.
PRACTICE EMAIL	And if you're ready to come back in, here's the link: {{booking_link}}
PRACTICE EMAIL	Thanks for being part of {{practice_name}}.
PRACTICE EMAIL	{{doctor_name}}

21. Dropped off mid-plan

PRACTICE EMAIL SUBJECT LINE	Can we help?
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	We haven't seen you in a few weeks and I wanted to reach out personally. Sometimes schedules get crazy, money gets tight or something just isn't working. Whatever it is, I'd rather hear it than guess.
PRACTICE EMAIL	Reply to this email or call us at {{phone}}, and we'll figure out what makes sense for you. If you'd like to get back on the schedule, you can book here: {{booking_link}}
PRACTICE EMAIL	{{doctor_name}}

22. Birthday

PRACTICE EMAIL SUBJECT LINE	Happy birthday, {{first_name}}!
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	Everyone at {{practice_name}} wanted to wish you a happy birthday. We hope this year is a great one.
PRACTICE EMAIL	{{doctor_name}} and the team

23. January

PRACTICE EMAIL SUBJECT LINE	New year, open schedule
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	Happy new year! January is one of our busiest months, so I wanted you to hear first that we've opened extra times this month.
PRACTICE EMAIL	Grab one here before they fill up: {{booking_link}}

PRACTICE EMAIL	{{doctor_name}}

24. Slow season (August to October)

PRACTICE EMAIL SUBJECT LINE	Back-to-routine season
PRACTICE EMAIL	Hi {{first_name}},
PRACTICE EMAIL	Summer's winding down and routines are coming back: school, work, sports. It's a good time to put yourself back on the calendar too.
PRACTICE EMAIL	We've got openings this month: {{booking_link}}
PRACTICE EMAIL	{{doctor_name}}

KEEP IT TRUE

Only list real, current changes in #18. Only use the "extra times" line in #23 if you really added appointments. Don't manufacture urgency.

CALL SCRIPTS AND VOICEMAIL

Learn the idea, not the exact words. Quiet hours and Do Not Call rules still apply to sales calls made by a person.

25. Front desk reactivation call (day 3)

Always offer two specific times instead of "when works for you?"

FRONT DESK	Hi, is this {{first_name}}? This is {{staff_name}} from {{practice_name}}. How are you?
PATIENT	Good, thanks.
FRONT DESK	I'm glad to hear it. I'm calling because it's been a little while since we've seen you, and {{doctor_name}} asked us to check in with everyone. Would you like to get back on the schedule?
FRONT DESK (IF YES)	Great. I have Tuesday at 4:30 or Thursday at 9:00. Which is better?
FRONT DESK (IF NOT SURE)	No pressure at all. Is there anything that got in the way, like timing, cost or anything else? I might be able to help.
FRONT DESK (CLOSE)	Thanks so much, {{first_name}}. If anything changes, you can always book online or text us at this number.

26. Voicemail (under 20 seconds)

Under 20 seconds. No health details, no visit details.

FRONT DESK VOICEMAIL	Hi {{first_name}}, it's {{staff_name}} from {{practice_name}}. Just checking in, we'd love to see you. Give us a call or text at {{phone}}, or book online anytime. Have a great day!

27. Objection responses

Patient says	Say this	Then
"I'm feeling fine now."	"That's great to hear. A lot of our patients come in now and then to stay on track. Want me to put a check-in on the calendar?"	Offer one visit, not a plan
"It's too expensive."	"I understand. Can I walk you through the options we have now? There may be something that fits better."	Payment options or membership
"I'm too busy."	"Totally fair. We have [early or late] times now. Would [time] work?"	Offer the edge-of-day slot
"It didn't really help."	"I'm sorry to hear that, and thank you for telling me. Would you be open to a quick call with {{doctor_name}}?"	Doctor calls; stop marketing
"I moved."	"Oh, congratulations! Thanks for letting us know. Would you like a recommendation for someone near you?"	Remove from list
"Please stop calling."	"Of course. I'll take you off our list right now. Sorry to bother you."	Mark do-not-call immediately

28. The doctor's personal call (dropped mid-plan)

The one call where health details are fine, because you're talking directly to the patient. Never leave them in a voicemail.

DOCTOR Hi {{first_name}}, it's {{doctor_name}}. I noticed we haven't seen you in a few weeks and I wanted to check in myself. How are you doing?

PATIENT [answers]

DOCTOR Thanks for telling me. I want to make sure the plan still makes sense for your life. Was it the schedule, the cost, how you were feeling, or something else?

PATIENT [answers]

DOCTOR That's helpful. Here's what I'd suggest... [adjust the plan, timing or options]. Want me to have the front desk call you with a couple of times?

29. No-show call (same day)

FRONT DESK	Hi {{first_name}}, it's {{staff_name}} from {{practice_name}}. We missed you today and just wanted to make sure everything's okay.
FRONT DESK (IF FINE)	Glad to hear it. Let's get you rescheduled. I have [time] or [time].
FRONT DESK (IF SOMETHING HAPPENED)	I'm sorry. No rush at all. Want me to call you back later this week?

30. Cancellation save

PATIENT	I need to cancel tomorrow.
FRONT DESK	No problem, thanks for letting us know. Rather than lose your spot entirely, let's move it. Is later in the day better, or later in the week?
FRONT DESK (IF THEY WON'T RESCHEDULE)	Okay. I'll send you a text with the booking link so you can pick a time when you know your schedule.

12 · PART 12

POSTCARD, LETTER AND AD COPY

Mail reaches people who ignore screens, and it's the safest channel for dormant patients past the 18-month mark.

31. Reactivation postcard

Keep the outside of the card free of health details. A postcard is the most public message you'll ever send.

PRACTICE POSTCARD, FRONT	"We miss you, {{first_name}}!" [Photo of your real team, smiling, in your real office]
PRACTICE POSTCARD, BACK	It's been a while, and we'd love to see you again. A lot has changed at {{practice_name}}: [one true, current change]. Book online at {{booking_link}} or call {{phone}}. {{doctor_name}} and the team · {{address}}

32. Letter from the doctor (dormant patients)

Send in a sealed envelope with only your practice name and return address outside.

PRACTICE LETTER	Dear {{first_name}},
PRACTICE LETTER	It's been a while since we've seen you at {{practice_name}}, and I wanted to write personally.
PRACTICE LETTER	Over the past year, we've [one or two true changes: new hours, new team members, online booking]. If it's been a long time, we'll usually start with a fresh visit to see where things stand, so there's no catching up to do.
PRACTICE LETTER	If you'd like to come back, call us at {{phone}} or book at {{booking_link}}. And if you've found care closer to home, I'm genuinely glad. I hope you're doing well.
PRACTICE LETTER	Warmly, {{doctor_name}}

33. Retargeting ad copy

Run to website visitors and Facebook or Instagram Page engagers, not an uploaded patient list. Avoid "Are you in pain?" or anything that implies you know the viewer's health.

PRACTICE AD, VERSION A	It's been a while? We'd love to see you. {{practice_name}} has new hours and online booking. Pick a time in two taps.
PRACTICE AD, VERSION B	Your neighbors in {{town}} trust {{practice_name}}. Evening and Saturday times are open this month. Book online.

13 · PART 13

THE RETENTION SYSTEM

Reactivation fixes the leak after the fact. Retention plugs it.

Touchpoints, visit by visit

When	Touchpoint	Who	Template
Visit 1 to 2	Clear report of findings and care plan, cost explained up front	Doctor	Talking points below
Every checkout	Book the next visit before they leave	Front desk	#34
24 to 48 hours before every visit	Automated reminder	Platform	Your reminder text
Visit 3	"How's it going?" check-in	Front desk	#35
Visit 6 or progress exam	Progress conversation and what's next	Doctor	#36
A good moment	Review request, same day	Front desk, then text	Review request templates
After a win or compliment	Referral ask	Doctor	#37
Missed or cancelled visit	Same-day text and call	Front desk	#5, #6, #29, #30
Plan complete	Graduation and next-step plan	Doctor	#17 variant

Report of findings checklist

- [ ] What you found, in words a patient could repeat to their spouse
- [ ] What you recommend: how many visits, over what time, what each phase is for
- [ ] What it costs, all of it, with payment options
- [ ] What happens when they feel better (say it now)
- [ ] What you need from them, including home exercises, in writing

WHY POINT 4 MATTERS

The most common reason patients stop is feeling better. If you've already explained what happens then, "I feel better" becomes a milestone instead of an exit.

34. Rebooking at checkout

Never ask "Do you want to schedule your next visit?" Assume the next visit and offer two times.

FRONT DESK {{doctor_name}} wants to see you [Thursday] next. I have 8:30 or 5:15. Which is better?

FRONT DESK (IF THEY'RE UNSURE OF THEIR SCHEDULE) Let's hold 5:15 for now. If it doesn't work, just text us and we'll move it.

35. Visit 3 check-in (front desk, in person or text)

An operations question, not a clinical one: parking, wait times, billing confusion.

FRONT DESK Hi {{first_name}}, you're three visits in! How's everything going so far with the scheduling and the office? Anything we can make easier?

36. Visit 6 or progress exam (doctor)

DOCTOR Let's look at where you started and where you are now. [Review the progress.] Here's what the next phase looks like and why. What questions do you have?

37. Referral ask (doctor, after a win)

Check your state's rules before giving any gift for a referral, and never tie a gift to a Medicare or Medicaid patient's referral without legal review.

DOCTOR I'm really glad you're doing well. If you know anyone who's dealing with something similar, we'd be glad to help them too. The front desk has cards, or they can book online.

REMINDERS ARE THE CHEAPEST RETENTION TOOL

A Cochrane review of eight trials found appointment attendance of 78.6% with text reminders vs 67.8% with none (Gurol-Urganci et al., 2013). Automate a reminder for every visit.

12-MONTH REACTIVATION CALENDAR

Lead index from CHIROBASIX's State of Chiropractic Marketing report (Nov 2025 to Oct 2026), where 100 is each practice's yearly average.

The calendar

Month	Lead index	Reactivation focus	Templates
January	107.9	Catch the new-year rush; benefits reset	#11, #23, #13 follow-ups
February	105.5	Monthly sequence; clean up December no-shows	Core sequence
March	102.3	Monthly sequence; spring schedule	Core sequence
April	109.0	Busiest lead month: retention and rebooking	#34, #35, #36
May	81.7	Leads dip: larger reactivation pull	Core sequence + #31
June	90.8	Summer hours; schedule-based segment	#18, #3
July	94.9	Dormant patients: letters	#32
August	80.1	Slow season: biggest reactivation push of the year	#12, #24, #31
September	76.4	Back-to-routine; keep the push going	#12, #24, #25
October	73.9	Lowest lead month: reactivation plus year-end benefits	#13, #25, #31
November	100.7	Year-end benefits; gratitude; referrals	#13, #37
December	97.1	Holiday hours; book January before the break	#34, #11 prep

Every month, automatically

- [ ] Pull the inactive list on the same day

- [ ] Run the core sequence for new inactives
- [ ] Send birthday messages (#8, #22)
- [ ] Run no-show and cancellation follow-ups (#5, #6, #29, #30)

15 · PART 15

TRACKING CHECKLIST AND KPI DASHBOARD

We couldn't find trustworthy published benchmarks for chiropractic reactivation or retention. Baseline your own numbers for three months, then try to beat them.

KPI dashboard

KPI	Formula	Check	Baseline	This month
Inactive list size	Past cutoff, nothing booked	Monthly		
New inactive this month	Crossed cutoff in last 30 days	Monthly		
Reactivation rate	Reactivated ÷ contacted	Monthly		
Reply rate	Replied ÷ contacted	Monthly		
Cost per reactivation	Campaign cost ÷ reactivated	Monthly		
Visits per reactivated patient (90 days)	Visits ÷ reactivated patients	Quarterly		
Opt-out rate	Opt-outs ÷ delivered	Every send		
Rebook rate	Visits leaving booked ÷ visits	Weekly		
No-show rate	No-shows ÷ scheduled	Weekly		
Cancellation rate	Cancellations ÷ scheduled	Weekly		
Visit-3, 6, 12 retention	Reached visit N ÷ new patients	Monthly		
PVA	Visits ÷ new patients	Quarterly		

KPI	Formula	Check	Baseline	This month
New reviews per week	New Google reviews ÷ weeks	Weekly		

Monthly tracking checklist

- [ ] Inactive list pulled and cleaned on the scheduled day
- [ ] Consent flags checked before any text
- [ ] Sequence running with stop rules on
- [ ] Every reply answered within one business day
- [ ] Opt-outs processed the same day
- [ ] Reactivated patients tagged with the date and segment
- [ ] Campaign costs logged (postage, staff time, ads)
- [ ] KPI dashboard updated
- [ ] One thing chosen to test next month
- [ ] Opt-out spikes reviewed message by message

YOUR 30-DAY LAUNCH PLAN

- [ ] Week 1: Write your definitions (Part 3) and add a separate text-consent checkbox to your intake form.
- [ ] Week 1: Pull and clean your first inactive list (Part 4).
- [ ] Week 2: Load templates #1 to #10 and #17 to #20 into your texting and email platform with the stop rules.
- [ ] Week 2: Train the front desk on #25, #26, #27 and #34.
- [ ] Week 3: Launch the 35-day sequence for your inactive and lapsed segments.
- [ ] Week 3: Order postcards (#31) to land around day 17.
- [ ] Week 4: Log replies, bookings and costs; fill in your KPI baseline.
- [ ] Week 4: Put next month's pull date on the calendar.

WANT IT DONE FOR YOU?

CHIROBASIX builds the monthly pull, the sequence, reminders and reply handling into ENGAGE, our chiropractic CRM. Book a call at chirobasix.com/book-a-call/.

SOURCES

Checked November 25, 2026. General information, not legal advice.

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- OIG Policy Statement on Gifts of Nominal Value (Dec 2016): https://oig.hhs.gov/documents/special-advisory-bulletins/887/OIG-Policy-Statement-Gifts-of-Nominal-Value.pdf
- 42 CFR 1003.110: https://www.ecfr.gov/current/title-42/chapter-V/subchapter-B/part-1003/subpart-A/section-1003.110
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- 42 CFR 410.21: https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-410/subpart-B/section-410.21
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WANT THIS RUNNING ON AUTOPILOT?

TEMPLATES BRING PATIENTS BACK. A SYSTEM KEEPS THEM COMING.

CHIROBASIX builds the monthly inactive-list pull, the 35-day sequence, appointment reminders and reply handling into ENGAGE, our chiropractic CRM, so your front desk only handles the patients who say yes. Book a free call and we will show you what your inactive list is worth.

Book A Free Strategy Call

This guide is general education for practice owners, not legal, billing or tax advice. Insurance, Medicare, Medicaid and state rules vary and change. Confirm anything you rely on with a healthcare attorney, a billing specialist or your state board.

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