

BROWN BEAR DIGITAL

Plastic Surgery PPC: Keywords That Book

Why most campaigns pay for research clicks,
and how to buy consultations instead.

A practice owner's guide | 2026 edition

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The short answer

01

Most plastic surgery PPC campaigns do not fail for lack of budget. They fail because the keyword list was built for a patient who books today, and a plastic surgery patient almost never does. Practices spend \$3,000 to \$8,000 a month on keywords that earn clicks but never turn into consultations.

What to do about it:

1

Bid on consultation intent, not procedure names.

Budget belongs on the searches at the end of an 8 to 18 month research journey.

2

Treat the negative list as half the strategy.

Every match type now matches on meaning, so what you block shapes traffic as much as what you bid on.

3

Flip the budget split.

50% branded and consultation, 30% location plus surgeon, 20% high-intent procedure variations.

4

Judge every keyword by consultations booked.

Not clicks, not form fills. Import booked consults so Google optimizes toward them.

WHAT ONE WORD IS WORTH

"Rhinoplasty" converts at 1.2%. "Rhinoplasty consultation" converts at 12.8%. In one Beverly Hills practice, "[Dr. Martinez] rhinoplasty" converted at 3.1% and "[Dr. Martinez] consultation" at 18.7%. You get fewer clicks at a higher cost per click, and far more consultations per dollar.

Who this guide is for

Owners watching spend climb while the consultation calendar stays flat. Anyone who inherited an account from an agency and is not sure what it buys. And surgeons who run their own campaigns between clinic days.

Where the budget leaks

02

Emergency search is short: "urgent care near me," click, book today. Plastic surgery search is long. A patient searches "best rhinoplasty surgeon," researches for weeks, then "rhinoplasty before and after," then "Dr. Smith rhinoplasty reviews," and only then "rhinoplasty consultation Dr. Smith." The consultation request happens at stage four or five. That is where the budget belongs.

Agencies that target the broad first stage see cost per consultation of \$800 to \$1,200. Those early clicks also cost more than they look. Google treats cosmetic surgery as a sensitive health category, so you mostly cannot retarget a research visitor later. Each click has to earn its cost on its own.

1

Generic procedure keywords

"Breast augmentation" or "liposuction." Big click volume, terrible conversion. These searchers are in month one and will browse 47 other surgeon sites.

2

Informational keywords

"How much does rhinoplasty cost?" "Tummy tuck recovery time?" Useful content, but searchers want information, not a surgeon. Great for SEO, budget killers in PPC.

3

Competitor plus procedure

"Dr. Johnson breast augmentation" when you are not Dr. Johnson. These patients have already chosen someone else.

2,400

clicks from "breast augmentation" keywords, tracked across 12 practices last year.

31

consultation bookings from those clicks, at a cost per consultation of \$1,847.

Source: Brown Bear Digital client account data. Early-stage demand is a content job, not a PPC job.

The keywords that book

03

High-converting keywords signal consultation readiness, not information gathering. Load them as phrase and exact match, not broad.

Instead of	Target
rhinoplasty	→ rhinoplasty consultation [city], schedule rhinoplasty consultation
breast augmentation surgeon	→ breast augmentation consultation near me, book breast augmentation consultation
facelift	→ facelift surgeon [city], [Dr. Name] facelift consultation
[procedure] + [city]	→ [procedure] + [region] such as "facelift Dallas Fort Worth," or an affluent suburb such as "rhinoplasty Westchester County"
[Dr. Name] + [procedure]	→ [Dr. Name] + consultation and [Dr. Name] + reviews, the final decision phase

Think in regions, not cities

Patients drive 2 to 3 hours for the right surgeon. A Manhattan practice draws from Connecticut, New Jersey, and Long Island. Affluent suburbs carry higher household incomes and patients willing to invest in premium care.

Before-and-after searches sit in the middle

"[Procedure] before after" converts better than broad procedure terms and worse than consultation searches. Send it to a dedicated gallery page, never the homepage. Gallery pages convert to consultation requests at 3 to 5x the rate of general procedure pages. Our 50-procedure study found localized photo searches have no measurable volume, so bid on the plain phrase and let location targeting do the local work. Also target "[Dr. Name] [procedure] before and after."

The negative list nobody audits

04

A consultation keyword list only works with a negative list behind it. A negative list built once at launch and never reopened is how research traffic creeps back in.

THE SINGLE MOST USEFUL MOVE

Add the bare procedure name as an exact-match negative. Block [mommy makeover] and [rhinoplasty] while you bid on phrase keywords such as "mommy makeover surgeon" and "rhinoplasty consultation." Google can then only match the longer, more specific searches, where booking intent lives.

The Search Term Triage

Sort every term in the search terms report into one of four buckets.

Book

Consultation, schedule, appointment, near me, or a surgeon's name. Keep these and protect their budget.

Evaluate

Best, reviews, before and after, results. Keep at a lower bid and send to a gallery or surgeon page.

Research

Cost, recovery, risks, how long, what is. Add as exact negatives and answer them with content instead.

Block

Free, cheap, jobs, salary, school, gone wrong, botched. Add the trigger word as a phrase negative across the account.

One rule overrides the buckets: never block a search term that has booked consultations, whatever its words suggest.

A Tampa practice manager finds most tummy tuck spend went to the bare phrase and to cost and recovery questions, none of which booked. She adds [tummy tuck] as an exact negative, blocks those queries, and keeps phrase keywords with a city or "surgeon." Next month: fewer clicks, and consults from the searches she kept.

Budget allocation that fits the patient

05

Most plastic surgery budgets are split like medical emergency campaigns. Flip it so spend follows how patients actually decide: long research, then surgeon-specific searches, then a booked consultation.

Bucket	Typical split	Flipped split
Branded + consultation: surgeon name variations, consultation terms, review searches	10%	→ 50%
Location + surgeon: "best rhinoplasty surgeon [region]," "[procedure] specialist [affluent area]"	30%	→ 30%
Procedure keywords: typically high volume; flipped, only specific consultation-ready variations	60%	→ 20%

When to expand and when to focus

Expand into broader research-phase keywords only once consultation keywords hit a 10%+ conversion rate and cost per consultation under \$600. Fund the expansion with new budget, not reallocation. Research keywords support long-term brand building, but they do not belong in the same campaigns or budgets as consultation terms.

THE COMMON MISTAKE

Most practices try to do both at once with too little budget for either to work. Choose consultation-ready optimization first, then expand into research-phase support.

AI Max, policy, and device settings

06

In September 2026 Google began upgrading Search campaigns that use the campaign-level broad match setting, or automatically created assets, to AI Max for Search. Dynamic Search Ads follow from February 2027. AI Max matches on your keywords, landing pages, and assets, so it can find traffic no keyword on your list describes. It is a setting to choose on purpose, not inherit.

If you used campaign-level broad match

You are being upgraded, with search term matching on. Check whether AI Max matches book consults. If they look like research traffic, switch matching off in your consultation ad groups.

If you built on phrase and exact

Nothing was switched. Keep it until you have booked-consult data, then test one ad group at a time. Keep exact-match copies of key terms, since broad keywords in AI Max are not treated as exact.

Four controls that keep AI Max inside the strategy:

- ◆ **Negative keywords**, which Google says are respected with AI Max on.
- ◆ **Brand exclusions** at the campaign level, so ads stop chasing other surgeons and practices.
- ◆ **URL exclusions**, so a consultation-ready click never lands on a blog post.
- ◆ **The search terms report**, which now labels matches that came from AI Max.

Two policy lines

Google's Health in personalized advertising policy treats cosmetic surgery and injections as sensitive, so ads cannot use your data segments, Customer Match, or lookalikes. The search itself has to carry the intent. In the US, prescription drug terms such as Botox need Google's healthcare certification, so keep injectables in their own campaign.

Device adjustments

Under Maximize Conversions, Maximize Conversion Value, or Target ROAS, the only device adjustment Google applies is minus 100%. A leftover plus 40% mobile boost does nothing. If you bid manually, check consultation rate by device before you move a dollar.

Measurement and landing pages

07

Most practices track clicks and maybe form fills. They do not track the final step, consultations booked, so they optimize for activity that does not produce patients.

- 1 **Segment the search terms report** by stage: clicks to visits, visits to form fills, form fills to booked consultations.
- 2 **Import booked consultations** through offline conversion import or enhanced conversions for leads. Capture the click ID with each lead and send the booking back as a conversion. Route it through a HIPAA-compliant setup.
- 3 **No import yet?** Export the report monthly and match booked consults to keywords by hand.
- 4 **Pause or cut bids** on keywords with 50+ clicks and zero bookings over 60 days. **Add budget** to keywords with 10+ clicks and 2+ bookings.
- 5 **Add the AI Max match type column** to see whether expanded matches book at the rate of your own keywords.

Send ready searchers to a ready page

Even perfect keywords fail on a generic procedure page. A consultation-ready searcher should land on a "schedule your rhinoplasty consultation with Dr. Smith" page that makes booking the next step.

6.2% to 19.4%

conversion of consultation-ready searches when a Dallas practice A/B tested an information page against a consultation-focused page.

32 to 40

consultations is what shifting to consultation-ready keywords often produces for a practice that got 18 from \$4,000 a month.

Source: Brown Bear Digital client data. A consultation-focused strategy typically cuts total clicks 40 to 60% while lifting bookings 100 to 200%.

Is your PPC built to book consultations?

08

Answer for your account as it runs today, in-house or through an agency. Each "no" is budget going to research clicks. Fix the ones closest to the booked consultation first.

Question	Yes	Partly	No
KEYWORD TARGETING			
Is most spend on consultation-intent terms rather than bare procedure names?	☐	☐	☐
Are your keywords loaded as phrase and exact match rather than broad?	☐	☐	☐
Do you bid on "[Dr. Name] consultation" and "[Dr. Name] reviews"?	☐	☐	☐
Do location keywords target regions and affluent suburbs, not one city?	☐	☐	☐
NEGATIVE KEYWORDS			
Are bare procedure names set as exact-match negatives?	☐	☐	☐
Do you sort search terms into Book, Evaluate, Research, and Block at least monthly?	☐	☐	☐
BUDGET AND AUTOMATION			
Does at least half the budget go to branded and consultation keywords?	☐	☐	☐
Have you checked whether the September 2026 AI Max upgrade switched on search term matching?	☐	☐	☐
Do you use brand exclusions and URL exclusions?	☐	☐	☐
MEASUREMENT AND LANDING PAGES			
Do you track booked consultations, not just clicks and form fills?	☐	☐	☐
Do you pause keywords with 50+ clicks and zero bookings over 60 days?	☐	☐	☐
Do consultation keywords land on a consultation-focused page?	☐	☐	☐

YES

PARTLY

NO

Frequently asked questions

09

Q Why do our Google Ads get clicks but no consultations?

The keyword list is built for a patient who books today. Broad procedure and informational keywords pull in people at the start of an 8 to 18 month research process. They click, browse, and leave.

Q Should we bid on competitor surgeon names?

No. Someone searching for a specific surgeon is past the comparison phase. You pay for clicks from people who have already chosen someone else.

Q Are consultation keywords worth the higher cost per click?

Yes. "Rhinoplasty consultation" converts at 12.8% against 1.2% for "rhinoplasty." Fewer, pricier clicks still book significantly more consultations per dollar.

Q Should we turn on AI Max?

Choose it on purpose. If you are on phrase and exact match, wait until you have booked-consultation data, then test one ad group at a time with exact-match copies of your key terms.

Q Can we retarget people who visited our procedure pages?

Mostly no. Google treats cosmetic surgery as sensitive, so advertiser-curated audiences such as Customer Match and lookalikes are off the table. Predefined Google audiences, demographics, and location targeting remain.

Q When should we add research-phase keywords?

Once consultation keywords convert at 10%+ with cost per consultation under \$600. Fund the expansion with new budget, not money taken from what already books.

Next steps

10

- 1 **Run the self-audit** on the previous pages. Be honest.
- 2 **Pull this month's search terms report** and triage it into the four buckets.
- 3 **Talk to someone who does this for plastic surgery.** A real look at where your budget goes to waste.

WORK WITH BROWN BEAR

Brown Bear Digital rebuilds plastic surgery paid search around the signals that book consultations. brownbear.digital/contact | bryan@brownbear.digital



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ABOUT THE AUTHOR

Bryan Passanisi is the founder of Brown Bear Digital. He has 15 years of experience across SEO, paid search, and AI search strategy, and won a 2025 Semrush AI/GEO award. He started Brown Bear to give businesses direct access to senior search expertise without the agency overhead.

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For informational purposes only. This guide is not legal, medical, or professional advice, and results are not guaranteed.

Check Google Ads policies, HIPAA rules, and your state medical board before you launch or track.