

BROWN BEAR DIGITAL

SEO for Plastic Surgeons

Why cosmetic patients search differently, and
what to build for them.

A practice owner's guide | 2026 edition

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The short answer

01

Plastic surgery SEO is a different job from SEO for other medical practices. Cosmetic patients pick their own surgeon, pay out of pocket, and research for weeks. They shop the way people shop for luxury goods. An SEO plan built for insurance-covered, referral-driven care aims at the wrong behavior. It shows up as traffic that never turns into consults.

What to do about it:

1

Build for three kinds of searches, not one.

Candidacy, surgeon comparison, and final due diligence.

2

Write procedure pages like product pages.

Lead with goals, pricing, and financing, then a clear next step.

3

Cover the whole region patients will drive.

For many practices that is one to three hours.

4

Make every fact about your practice clear and consistent.

Google and AI tools repeat what they can verify.

RESULTS FROM BROWN BEAR CASE STUDIES

One facelift content hub took a deep plane facelift surgeon from 16 to 168 AI Overview citations and grew organic traffic 520%. A before-and-after gallery rebuild took gallery queries from 13 to 52 top-3 rankings and earned 19 new AI Overview citations. Results vary by practice, market, and starting point.

Who this guide is for

Surgeons and practice owners, marketing managers at aesthetic groups, and anyone reading an SEO proposal and wondering if it fits a cosmetic practice.

How cosmetic patients actually search

02

In most medical care, the path runs from symptom to primary care to specialist referral. Search is urgent and problem-focused. Plastic surgery flips that. Five traits shape everything that follows.

1

They self-refer

No doctor sends her to you. She decides she wants the procedure, researches it, and chooses a surgeon on her own.

2

It is a want, not a need

She treats it like other big discretionary buys, such as a car, jewelry, or a home renovation. She compares options and weighs value along with clinical details.

3

She pays out of pocket

With insurance out of the picture, she studies pricing, financing, and value the way she would for any major purchase.

4

It is private

Many patients do not post about their surgery. They read forums and social media quietly. That changes how reviews, referrals, and social proof build up.

5

The timeline is long

Research can run weeks or months. She bookmarks sites, comes back often, and looks at several procedures before she decides.

Her search looks more like shopping for luxury goods than looking for medical care. Your site has to work for that shopper.

Where standard medical SEO breaks

03

Most medical SEO assumes an insurance-covered, referral-driven patient with a problem to solve. Apply it to cosmetic surgery and you optimize for the wrong behavior. Here is the gap, area by area.

Area	Generic medical SEO	Built for plastic surgery
Keywords	Symptom terms and "specialist + city"	→ Procedure names, result-based phrases ("natural breast augmentation"), surgeon evaluation, and comparisons ("tummy tuck vs liposuction")
Content	Conditions, symptoms, insurance	→ Aesthetic goals, outcomes, recovery, cost, and how to choose a surgeon
Conversion	"Insurance accepted" and book now	→ Consult requests, gallery engagement, financing questions, procedure-page leads
Local reach	The closest provider	→ The preferred surgeon in the region, often a one to three hour drive
Authority	Credentials, hospital ties, publications	→ Credentials plus aesthetic eye, consistent results, and procedure-specific experience
Reviews	Ask every patient for a public review	→ Respect privacy, ask with care, and favor specific stories over generic praise

Red flags in a proposal

- ◆ Reports lead with traffic and rankings and never mention consult requests.
- ◆ The keyword list is built from conditions and "near me" terms, with no procedure or comparison terms.
- ◆ One city page, and no plan for patients who travel.
- ◆ No plan for galleries, pricing pages, or recovery content.
- ◆ The review plan is a blast to every patient.

The three searches that bring in patients

04

Most qualified cosmetic traffic comes from three search patterns. Each one needs different content.

STAGE 1

"Am I a candidate?"

EXAMPLE SEARCHES

- good candidate for breast augmentation
- rhinoplasty before and after ethnic
- tummy tuck after pregnancy
- facelift age recommendations

WHAT TO PUBLISH

Consultative guides. Candidacy criteria. Relevant before-and-after examples. Less promo, more help.

Largest pool. Slowest to convert.

STAGE 2

"Who's the best?"

EXAMPLE SEARCHES

- best rhinoplasty surgeon [city]
- plastic surgeon reviews
- [surgeon name] before and after
- plastic surgery consultation questions

WHAT TO PUBLISH

Credibility, outcomes, and what sets your approach apart from the surgeon down the road.

Mid volume. Converts better.

STAGE 3

"What's the real story?"

EXAMPLE SEARCHES

- [surgeon name] reviews
- [procedure] recovery timeline
- plastic surgery complications
- questions to ask a plastic surgeon

WHAT TO PUBLISH

Honest risks, realistic recovery, and clear next steps. Transparent and detailed.

Smallest volume. Highest conversion.

WHERE MOST PLANS STOP

Most plastic surgery SEO plans chase only stage 2. Practices that cover all three reach a much larger share of their potential patients, including the biggest pool and the best-converting one.

What to build

05

Content

- ◆ **Procedure pages that read like product pages.** Open with aesthetic goals and patient concerns. Use headers like "What breast augmentation achieves," not "Breast augmentation overview." Include pricing, financing, and a clear consult call to action.
- ◆ **Galleries that work as conversion tools.** Organize by age, body type, and goals, not procedure alone. Add context on why an approach was chosen. Make them easy to browse and compare.
- ◆ **An about-the-surgeon page with a point of view.** Board certification and training matter. So does your aesthetic philosophy and your view on natural-looking results.
- ◆ **Recovery content that feels supportive.** Timelines, day-by-day guides, and plain talk on pain, bruising, and when results show.
- ◆ **Open cost and financing information.** Ranges, payment options, and insurance notes where they apply. Many patients research cost long before they call.
- ◆ **Specific testimonials.** A story about results and recovery beats "great experience." Add video when patients are comfortable.

Technical

- ◆ **Schema** for procedures, the surgeon, and reviews. Add pricing to structured data where it fits.
- ◆ **Site structure that follows the decision:** procedure pages, surgeon info, galleries, patient resources, and consult scheduling.
- ◆ **Internal links** between related procedures, from procedure pages to galleries, and to surgeon credentials.
- ◆ **Wider local reach.** Target broader geography. Add content on travel, lodging, and follow-up care for out-of-town patients.
- ◆ **Image care.** Descriptive file names, alt text, and fast loading, especially on phones.
- ◆ **Mobile first.** Much of this research happens on a phone, in private. Browsing galleries, reading reviews, and reaching the practice should be easy.

WHAT CARRIES OVER FROM MEDICAL SEO

E-E-A-T, Google Business Profile and citation consistency, page speed, content depth, and reviews all still matter. The evidence mix changes. Before-and-after galleries and a consistent aesthetic eye become authority signals next to board certification. Local work shifts from "nearest provider" to "preferred provider in the region."

AI search: same patient, new front door

06

Many patients now ask ChatGPT, Perplexity, or Google's AI answers for surgeon advice before they click a single result. The fundamentals above do not change. AI tools pull from pages and sources that state facts clearly. Here is what helps.

- ◆ **Answer first.** Put the direct answer at the top of every page, then the detail.
- ◆ **Stay consistent.** Your name, credentials, practice details, and procedure list should match everywhere they appear.
- ◆ **Show proof.** Board certification, training, galleries, and specific reviews give AI tools something to cite.
- ◆ **Check third-party profiles.** AI tools often cite review and directory sites such as RealSelf. Keep yours complete and current.
- ◆ **Test it.** Ask the AI tools the questions your patients ask. See who gets named, and why.

16 to 168

AI Overview citations for a deep plane facelift surgeon, plus 520% organic traffic growth, from one middle-of-funnel content hub with almost no link building.

13 to 52

top-3 gallery rankings after a structured rebuild of before-and-after galleries, plus 19 new AI Overview citations and 18 first-place positions.

Source: Brown Bear case studies at brownbear.digital/case-studies. Each result comes from one practice. Results vary.

Is your SEO built for plastic surgery?

07

Answer for your current strategy, whether you run it in-house or through an agency. Each "no" is a gap. Fix the ones closest to the consult request first.

Question	Yes	Partly	No
KEYWORD TARGETING			
Do your target keywords center on procedure and evaluation terms ("rhinoplasty," "best rhinoplasty surgeon") instead of condition terms?	☐	☐	☐
Do you target all three stages: candidacy, comparison, and late-stage validation?	☐	☐	☐
CONTENT POSITIONING			
Do procedure pages lead with aesthetic goals and outcomes instead of clinical definitions?	☐	☐	☐
Do you cover cost, financing, and recovery in the depth a five-figure purchase calls for?	☐	☐	☐
CONVERSION PATH			
Are your calls to action built for a weeks-long research timeline, not only "book now"?	☐	☐	☐
Can a returning visitor pick up where they left off, with clear paths between procedures, galleries, and credentials?	☐	☐	☐
COMPETITIVE POSITIONING			
Does your online presence match the investment level patients are making?	☐	☐	☐
Does your content show a clear aesthetic philosophy that sets you apart in your market?	☐	☐	☐
GEOGRAPHIC REACH			
Do you know how far your patients travel, and does your SEO target that full radius?	☐	☐	☐
Do you have content for out-of-town patients: travel, lodging, follow-up care?	☐	☐	☐
TECHNICAL PERFORMANCE			
Do your galleries load fast and browse easily on a phone?	☐	☐	☐
Is your schema built around procedures, surgeon credentials, and reviews, not a generic business profile?	☐	☐	☐

YES

PARTLY

NO

Frequently asked questions

08

Q What makes plastic surgery SEO different from other medical SEO?

The patient. Cosmetic patients self-refer, pay out of pocket, and research for weeks or months. They search by procedure and result, compare surgeons, and check reviews before booking. Standard medical SEO is built for insurance-covered, referral-driven care, so it misses how they decide.

Q How far will cosmetic patients travel?

Many will drive one to three hours for the right surgeon. If your SEO only targets your city, most of your real market goes unclaimed.

Q What should a procedure page include?

Start with aesthetic goals and patient concerns, not a clinical definition. Add pricing ranges, financing options, recovery timelines, relevant before-and-after examples, your approach, and a clear consult call to action.

Q Should I show prices on my site?

Yes, ranges and financing options help. Patients research cost heavily before they call, and open information builds confidence. Frame it around the value of the outcome.

Q How do before-and-after galleries help SEO?

They prove results and keep visitors engaged. Organize them by patient traits such as age, body type, and goals. Add context on why you chose an approach. Use descriptive file names, alt text, and fast loading.

Q How do I get reviews when patients want privacy?

Ask with care, not in a blast to every patient. Make it easy, respect a no, and favor specific stories about results and recovery over generic praise. Check your state board and advertising rules on testimonials first.

Q Does AI search change the strategy?

The fundamentals stay the same, with higher stakes on clarity. Put answers first, keep your facts consistent everywhere, show proof, and keep third-party profiles such as RealSelf current. Then test the questions your patients ask in AI tools.

Next steps

09

- 1 **Run the self-audit** on the previous pages. Be honest.
- 2 **Pick the one gap** closest to the consult request and fix that first.
- 3 **Talk to someone who does this for plastic surgery.** No pitch deck. A real conversation about where your current approach leaves consults behind.

WORK WITH BROWN BEAR

Brown Bear Digital builds SEO and AI search programs for plastic surgery practices and aesthetic medical groups. Senior-level work, no hand-offs. 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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Check your state medical board and advertising rules before you publish testimonials, prices, or before-and-after galleries.