Everborn Productions

CLIENT INTAKE PACKET · FILLABLE

Tell us how your business runs.

Clinics

Everything we need to build the system to how you actually sell. Fill in what you know; leave blank what you don't. Anything left blank is a question for the intake call, not an assumption we'll invent.

About two hours in week one. The builder reads every line, and the fields feed the variable sheet the build runs from.

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September 2026

BEFORE WE START

Which package, and who we are dealing with.

☐ **Launch**
$3,500 + $697/mo
Every lead answered fast

☐ **Growth**
$6,500 + $1,197/mo
Plus The Full-Chair Engine

☐ **Full Engine**
$9,500 + $1,697/mo
Plus partners and the think-tank

Your name

Title

Email

Cell

Business name

Website

Date

Referred by (rep or partner, if any)

☐ We already own our own HighLevel account

☐ Regulated industry: book the week-one compliance review

☐ Domain, business email and phone already exist

☐ Starting from zero: set up domain, email and phone

How to use this packet

Type directly into the boxes and save, or print and write. Checkboxes mark what is true today. The last page is the sign-off that confirms what we'll build. Nothing in this packet asks for passwords, account numbers, or anyone's personal identifiers — we never collect those by form or email.

SECTION 1 OF 12

The practice

The basics about the practice so we set up the account and the ad footers correctly. Some states require the licensee's name in ads, and if you take Medicare, anti-kickback rules apply to any referral program.

Legal name and DBA

Specialty: dental, med spa, chiro, PT, derm

Providers and license numbers

Payer mix: PPO, FFS, cash, Medicare

Rough percentage of revenue from each. Fee-for-service means insurance pays, but you are out of network.

Active patient count and chart base

Patients seen in the last 18 months, and the total number of charts on file.

Owner, office manager, treatment coordinator

- [ ] Licensee name requirement for this state's ads known
- [ ] Medicare involvement noted (anti-kickback applies)

SECTION 2 OF 12

Providers

Every provider who sees patients. Each one gets a page and a QR code you can place in the room or at the front desk, and each provider approves their own page copy before it goes live.

Providers — name, license number and credential, one per line

Booking rules per provider

Per-provider page and QR placement (room, front desk)

Where the QR card for each provider should sit: operatory, treatment room, front desk.

- [ ] Each provider approves their page copy
- [ ] Testimonial consent form on file

SECTION 3 OF 12

Systems and BAA chain

Your practice software holds patient health information, so every tool that touches it needs a Business Associate Agreement or has to stay PHI-free. We sign ours and confirm the rest before importing anything.

PMS or EHR (Dentrix, Open Dental, Eaglesoft, Nextech, other)

Existing comms tool (Weave, Solutionreach, NexHealth)

Whatever you use today for reminders and texting. We check for overlap so patients do not get double messages.

Form and e-sign tools

Call recording

- [ ] CRM HIPAA plan and BAA in place before any import
- [ ] Agency BAA signed
- [ ] Every connected tool under a BAA or PHI-free
- [ ] Nightly export path for unscheduled, recall-due and inactive reports agreed

SECTION 4 OF 12

Website and tracking

Ad tracking pixels on booking, intake or consent pages can leak patient information to Meta or Google. Tell us what is on the site today so we can strip it from those pages.

Booking, intake and consent page URLs

Analytics and pixels currently installed

GA4, Meta Pixel, TikTok, Google Ads tag. Your web person can list these in a minute.

- [ ] No Meta Pixel, GA4 or TikTok pixel on booking, intake or consent pages
- [ ] Server-side conversion events stripped of PHI

SECTION 5 OF 12

Lead sources

Where new patients come from and what each source costs a month. Every new patient gets tagged by source so the report can show cost per new patient.

Google Ads and Meta spend

Insurance directory listings

Referring providers

Zocdoc or marketplace accounts

- [ ] Source tag list confirmed
- [ ] Cost per new patient by source wanted

SECTION 6 OF 12

Pipeline and consult flow

We ship a standard set of stages you can rename, plus a follow-up path for high-ticket consults. Automated messages never name a procedure, so tell us which services get the consult treatment and where financing lives.

Confirm or rename each stage

High-ticket services and their consult flow
Implants, aligners, injectables and the like, and what happens after the consult today.

Financing provider and link

Treatment coordinator booking link

- [ ] No procedure names in any automated message

SECTION 7 OF 12

Recall, reactivation and no-shows

How the system decides who is due, who has lapsed and who to stop contacting. Reminder messages are exempt from marketing consent but capped at three a week; promotional sequences need written consent first.

Recall interval by patient type
For example: hygiene every 6 months, ortho checks every 8 weeks.

Overdue, lapsed, inactive and archive cut-offs
Defaults: overdue at recall plus 30 days, lapsed at 12 months, inactive at 18, archived at 24. Change if yours differ.

ASAP list source
Where the short-call list of patients who want an earlier slot lives today: PMS, a sticky note, a spreadsheet.

No-show and same-day-cancel policy

- [ ] Written marketing consent captured before any promotional sequence
- [ ] Three-per-week cap enforced on exempt messages

SECTION 8 OF 12 Memberships and series

In-house plans and multi-visit packages have renewal and expiry dates the system can chase. Give us the terms so reminders go out before, not after, they lapse.

In-house plan terms and renewal dates

Package and series expiry rules

Tox cadence, if med spa

How often you recommend a neurotoxin touch-up, usually 12 to 16 weeks. Skip if not a med spa.

- [ ] Payment link provider confirmed

SECTION 9 OF 12 Intake and insurance

How patients complete forms and how you verify insurance before the visit. If a visit is 48 hours out and still unverified, the system flags it to whoever you name here.

Forms, health history, NPP versions

Which versions of your intake forms and Notice of Privacy Practices are current. Attach them if you can.

Insurance card capture method

Verification owner or eligibility tool

- [ ] 48-hour unverified-visit flag recipient named

SECTION 10 OF 12 Partners

Referring providers and local businesses that send patients. Partner reports show aggregate counts only, and nobody is paid per patient. Any per-referral cash is off by default and goes to counsel first.

Referring providers

Adjacent businesses, employers, schools

Sponsorship or co-marketing budget

- [ ] Statements carry aggregate counts only
- [ ] No per-patient payment; per-referral cash defaulted off and reviewed by counsel
- [ ] Referring-provider clinical information stays in the clinical channel

SECTION 11 OF 12

Compliance

Who reviews templates and how you handle testimonials and before-and-after photos. Nothing goes live before the week-one compliance review, and copy avoids superlatives, guarantees and off-label claims.

State board advertising rule
Your state's dental or medical board rule on advertising. If you do not know it, write 'look up' and we will.

Testimonial and before/after consent process

Template reviewer

- [ ] Compliance review booked in week one
- [ ] Reviews ungated
- [ ] No superlatives, guarantees or comparisons
- [ ] No off-label indications

SECTION 12 OF 12

Phone, texting and reporting

What we need to set up the tracked new-patient number and register it for texting. Appointment texts and promotional texts are registered as two separate campaigns, so tell us which messages fall into each.

Tracked new-patient number

Informational vs. promotional campaign split
Reminders and confirmations are informational; offers and specials are promotional. List any messages you are unsure about.

Huddle time and report recipients
For example: 7:45am daily huddle, weekly report to the owner and office manager on Monday.

- [ ] Two 10DLC campaigns registered
- [ ] Calls answered/missed, booked, showed, presented, accepted by provider and source wanted

THE NEVER-LIST FOR APPOINTMENT-BASED CLINICS

What our automations will never say.

Tick each line to confirm you've read it. These are the rules every template is checked against before it goes live.

- [ ] Diagnosis, condition, symptoms, test names or results, medication names, procedure names or treatment-plan detail in an SMS or unencrypted email. Send a secure link instead.
- [ ] Any PHI to a referral partner, employer, gym, school or other third party: no names, no your-member-Jane-came-in, no treatment or spend.
- [ ] Promotional content inside a message sent under the TCPA healthcare exemption or to a contact without written marketing consent; any billing or collections content in an exempt message.
- [ ] Guarantees, painless, best, number one, superlatives, comparisons to other practices, unsubstantiated health or weight-loss claims, off-label drug indications.
- [ ] Testimonials or before-and-after images without written consent for marketing use and a results-may-vary line.
- [ ] Any review incentive conditioned on positive sentiment, any review gating, any staff-written review.
- [ ] A third-party-paid product promotion sent to patients without a signed HIPAA marketing authorization that discloses the remuneration.
- [ ] Ads or outreach that omit the licensee's name where the state board requires it, or a trade name alone in Texas medical advertising.
- [ ] A message to a number that texted STOP, outside quiet hours, or beyond three per week under the exemption.
- [ ] HIPAA certified. No such certification exists.

ANYTHING ELSE

What we didn't ask.

The three tasks eating the most time each week

What a great first 90 days looks like

Tools we already pay for (and which ones we actually use)

Anything else we should know

SIGN-OFF

This is what we'll build.

By signing you confirm the package chosen on page 1, that the information in this packet is accurate to the best of your knowledge, and that every automated template will be reviewed by your compliance contact before it goes live.

Signature

Date

Printed name

Title

What happens next

Within two business days you get a one-page brief and a fixed quote. Week one is intake and foundation; week four is handoff. everbornproductions@gmail.com · (916) 541-3415.