

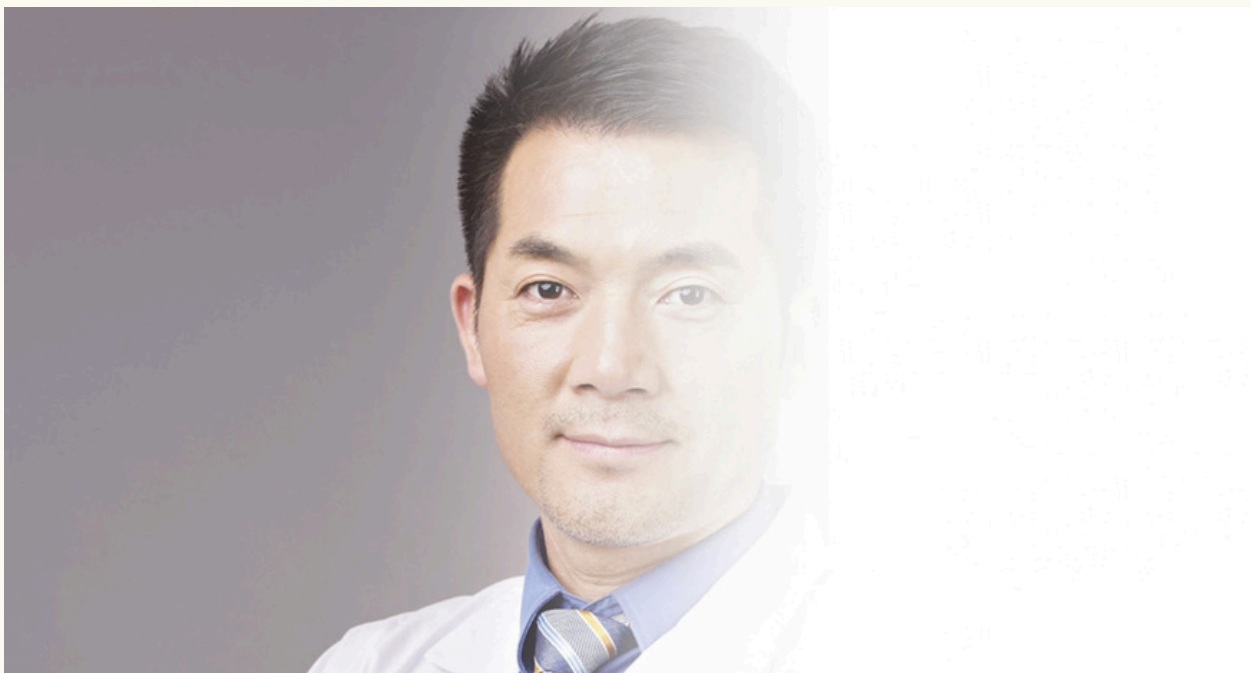
PODIATRY MANAGEMENT®

5 VISIBILITY TRAPS QUIETLY HURTING YOUR PRACTICE

You might unfortunately accelerate the problem you were trying to solve.



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Running a podiatry practice in 2026 means managing more complexity than ever: staffing, reimbursements, patient expectations, and a search landscape that seems to change every six months. When something has to give, marketing is often the first thing practices reach for. It feels discretionary. The results aren't always immediate. And the line between what's working and what isn't can be genuinely hard to see.

The problem is that pulling back on visibility at the wrong moment doesn't just slow growth. It often accelerates the problem you were trying to solve.

In working with podiatry practices, I've watched the same patterns repeat themselves. Practices that are clinically strong, well-run, and genuinely valuable to their patients are quietly losing ground, not because of anything dramatic, but because of a handful of common, fixable mistakes. Here are five of them to look out for, and what to do about each one.

TRAP 1: DEATH BY A THOUSAND REASONABLE DECISIONS

Most practices don't make a single dramatic decision to cut marketing. They make a series of smaller ones, each of which sounds completely reasonable on the surface. The review solicitation service gets cancelled because the practice already has a solid rating and a decent number of reviews. Or Google Business Profile management gets dropped because someone on staff is going to handle it. The email marketing program gets replaced by a feature inside the EHR because it seems redundant to pay for something the system already offers. On the surface, each of these decisions makes complete sense. The problem isn't the logic. It's what gets lost in the math. Reviews have a shelf life. A practice with 80 reviews and nothing recent looks less active than one with 40 reviews and a steady stream of new ones. When solicitation stops, that signal fades quietly and quickly. Google Business Profile management rarely gets picked up internally. Instead, it gets added to someone's list and stays there. Months pass. The profile goes stale and becomes background noise. And EHR email tools are genuinely useful for clinical communication. But they are almost never used for consistent, educational patient marketing. The switch feels like a lateral move, but it usually isn't. None of these cuts feel like going dark. But the cumulative effect often is.

Pro Tip: *Not everything in marketing is easy to attribute, and anyone who tells you otherwise isn't being straight with you. But before cutting a service, ask yourself what you do know. Are new reviews still coming in? How do you compare to your competition? If the practice down the road has 50 more reviews than six months ago, that gap will only get harder to close.*

TRAP 2: MISTAKING SYNDICATED CONTENT FOR A CONTENT STRATEGY

This one is more widespread than many practices realize, and the consequences are getting harder to ignore. Using templated blog content, or articles distributed across dozens of practice websites simultaneously, may have made sense in an earlier era of search, but it doesn't today. The problem is that search engines, and now AI platforms, have gotten significantly better at identifying content that adds no original value. A plantar fasciitis article with a fill-in-the-blank practice name and city that exists on other podiatry websites isn't helping anyone find your practice. In many cases, it may actually be working against you. AI-assisted search rewards demonstrable expertise and original perspective. A blog written specifically for your practice and the conditions you want to be known for will always outperform a syndicated post that went live on dozens of other websites the same day. Original doesn't have to mean complicated; just specific. A well-crafted article built around your practice and your community is well within reach, whether you're writing it yourself or partnering with someone who knows how to do it right. What it shouldn't be is identical to content circulating under different practice names.

Pro Tip: *Not sure if your blog content is templated? Paste the full post into ChatGPT or Gemini and ask it to search the web for near-identical content. You may be surprised by what it finds.*



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TRAP 3: OFFERING HIGH-VALUE SERVICES PATIENTS CAN'T FIND

Remember, patients don't typically search for solutions. They search for problems.

Custom orthotics are a meaningful revenue driver for many practices today. They're also a service that patients don't necessarily think to search for directly. Instead, they search for knee pain. Heel pain. Why their feet hurt after walking. What they're feeling, not what might fix it.

If your website and content aren't connecting those searches to what you offer, you're likely invisible to the patients who need you most.



The solution isn't complicated. It starts with thinking like a patient rather than a podiatrist. Consider what your orthotic patients actually complain about when they call, what activities they've given up, and what they've already tried. Build your content around those questions and you'll start showing up in the searches that drive new patients through the door.

The same principle applies to any specialized service your practice offers. If you've invested in laser therapy, regenerative medicine, or biomechanical evaluation, your website content should help patients connect their symptoms to your solutions. If it doesn't, that investment is tougher to recoup.

Pro Tip: Pull up your orthotics page and read the first paragraph. If it leads with how the orthotics are made or what materials are used, rewrite it to lead with how the patient benefits: less pain, better function, getting back to the activities they've been avoiding. Adding a FAQ section to popular service pages will help too, both for patients and for AI platforms interpreting your content.

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TRAP 4: TREATING AI SEARCH AS A FUTURE PROBLEM

A version of this conversation happens regularly. Practices acknowledge that AI search is changing how patients find providers, agree it will probably matter eventually, but then decide it isn't urgent enough to address today. The problem is, it's already here.

AI-generated answers are appearing at the top of search results with increasing frequency. Patients are asking AI tools which podiatrist they should see and whether their symptoms warrant a visit. These tools are pulling from available content to generate recommendations, and practices without sufficient original, authoritative content online are simply not part of that conversation.

Fortunately, plenty of practices haven't addressed this yet, and the window is still open. Original content, an optimized Google Business Profile, and a website that clearly communicates expertise and location are the foundation. Build it now and you'll have a meaningful head start.

Pro Tip: Open your favorite AI platform and type, "Who is the best podiatrist in [your city]?" If your practice doesn't appear, that's a visibility gap worth addressing. It's time to consider how AI platforms will recognize your digital footprint as credible.

TRAP 5: ASSUMING YOUR EXISTING PATIENTS ARE FULLY ACTIVATED

Most practices have a more valuable asset sitting in their EMR than they realize. Patients who have already visited your practice know you, trust you, and have firsthand experience with your care. They are significantly easier to bring back than new patients are to acquire. And yet most practices treat their existing patient database as largely dormant once someone stops scheduling on their own, thinking, "They'll call when they need me." The gap between a lapsed patient and an active one is often just a single well-timed communication, such as a postcard, a short email sequence, or a seasonal reminder. Response rates on targeted outreach are consistently higher than cold acquisition, at a fraction of the cost.

Pull a report of patients who haven't been seen in 12-to-18 months, make a plan to reach them, and track what works.

Pro Tip: When building a reactivation list, start with patients treated for conditions your practice wants to see more of, like orthotics, heel pain, or diabetic wound care. A short, personalized letter followed by two or three emails referencing their previous visit and a clear reason to return is often enough to generate a meaningful response. If your team doesn't have the bandwidth, find a partner who does.



Visibility isn't something you build once. It's something you maintain, and maintaining it is far less expensive than rebuilding it after it's gone.

THE GOOD NEWS

None of these traps are inevitable, but they are common. And the practices that catch them early, before a quiet month becomes a quiet year, tend to find the fixes are far simpler than they expected. Visibility isn't something you build once. It's something you maintain, and maintaining it is far less expensive than rebuilding it after it's gone.

Take a hard look at these five areas. Fix what needs fixing. Then don't stop showing up.