

Transcript 1:

Impromptu Zoom Meeting - September 04

VIEW RECORDING - 53 mins (No highlights):

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq>

0:01 - Oriel Mor (oriel.mor2001@gmail.com)

This meeting is being recorded. Hi there, Debra. How's it going? I hope you can hear me.

0:19 - Mark Debra Meehl

Let's see if I can. How's that?

0:21 - Oriel Mor (oriel.mor2001@gmail.com)

Is that better? Yes, I can hear you.

0:23 - Mark Debra Meehl

How's it going? Good. How about you?

0:26 - Oriel Mor (oriel.mor2001@gmail.com)

Great, great. So, again, I'm extremely excited to talk to you because of psilocybin itself. It's very, very rare that I get psilocybin clinic owners or practitioners. And I believe that, you know, psilocybin is the revolution of mental health. It is the revolution. So, I'm extremely excited to see if I can help you get this revolution going because that's my goal here. I'm in Israel. It's not legal yet, but it isn't trials because of PTSD and everything going on with the war. So they're really testing that out now.

1:08 - Mark Debra Meehl

So it's interesting because Israel was far ahead of us because, you know, in regards to marijuana also. So, you know, I thought that's interesting coincidence that that's where you're at. And of course, you know, and now we're talking about psilocybin. And so my guess is that, you know, you guys will do a bunch of research and it'll come back really positive and you'll still be way ahead of the United States in regards to, you know, legalizing it there in an effective way.

1:37 - Oriel Mor (oriel.mor2001@gmail.com)

So, yeah, I'm extremely surprised that when I saw it because I saw an article the other day and I was extremely surprised because like even marijuana is not legal here. So it's a psychedelic that Schedule 1 in the U.S. is going to be legal. I was like, that's unbelievable.

1:56 - Mark Debra Meehl

So, well, we'll see what happens. I, you know, I have a whole. You know, in regards to, you know, the government suppression of all of the entheogens, not just psilocybin, but, you know, to date, between the 60s and, you know, through everything that's been, you know, recorded up, you know, for the last, you know, 40 years, there have been zero deaths, zero overdoses. I mean, you can't possibly make it a Schedule 1 drug because there's nothing. I mean, it is truly one of the, if not the safest entheogen. And so I'm just, you know, like I said, I'm somewhat perplexed that the campaign in regards to, you know, what's happened. And, you know, we have little pockets here, obviously, in Colorado and in Seattle, Washington. And all of Oregon Oregon has. I don't know, I've been doing this for eight years, really underground. And so, and so but now, and it used to be that you could use the word entheogen, or you could say plant medicine, you could do a variety of things. As of last year, you can't, Google won't allow you to use any of those words. Now, big companies, if you're dropping \$100,000 a month into Google, apparently, they take a, it's a real blind eye at that point. So. I you advertise because I have a list of those that are sponsored pages that are on Google, and it's very interesting, you know, they talk about psilocybin and psilocybin retreats and psilocybin in clinical, and I just think, oh, my God, how do you get away with that? Because I can't seem to run a single ad that even hints at what it is that we do, so it's perplexing, and that's why I reached out to you when I saw your ad in regards to marijuana and, you know, helping dispensaries, you know, get a leverage, get a foothold in that.

4:43 - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. So I didn't have an ad about marijuana. I'm wondering which ad you came from because there was two ads that's running right now. One is there's a video ad of me going over the belief bridge method, which is that one ad, and there's another. Which is showing the brain scans, like to not use the brain scan ad.

5:05 - Mark Debra Meehl

Maybe it was the brain scan ad.

5:07 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it was probably the brain scan ad because I'm not talking about Myrana. Anyways, so yeah, Google is problematic. Google are very problematic. Honestly, do not advertise on Google because of the problems that they do. Also, they have unbelievable click fraud. And besides that, this type of product needs education. And because it needs education, it means it needs to get to more people that don't understand what it does and how it works. There's a lot of misconceptions and limiting beliefs and things that people do not know. In which we can basically break these limiting beliefs and show them that there is a way to heal and it's possible.

Because it is possible. Okay, so would you want to tell me a bit like you tried advertising on Google? Did you try anything? Did you try Facebook? I saw your landing page as well. Did you try anything else besides that?

6:06 - Mark Debra Meehl

Yeah, I have an ad now on Google where it's a woman that's winking and she said, it just says healing retreat up at the top and then at the bottom because it says, because Google won't let us tell you what we really do. And they approved that ad. So I had to make sure that I had a landing page that was completely vanilla. So that landing page is conscious expansion. That's that landing page is. Because my plant medicine page, because it says plant medicine on it, I can't get anything through Facebook either.

6:46 - Oriel Mor (oriel.mor2001@gmail.com)

Wow.

6:48 - Mark Debra Meehl

conscious expansion allows me to at least get that ad out. We're going to create another ad that basically says it'll be. It'll be a little different. Instead of a wink, it'll be a whisper. You know, it'll be one of these that says, Google won't let us use the P word. And we're going to see if we can get some traction with that, too.

7:14 - Oriel Mor (oriel.mor2001@gmail.com)

That's interesting. So, so, okay, so basically people search up, you think people search up psilocybin retreats and then they understand?

7:22 - Mark Debra Meehl

Okay. Psilocybin and the word microdosing, microdosing from last year to this year, just the word microdosing is up 1,250%. Yeah. And we have, there's, there's a handful of companies. One is called Mama Dose that actually does microdosing well. Uh, and they have a product that they're selling all over the United States and still haven't been shut down. Um, they're unable to run ads on Facebook. I know them, um, you know, because I've talked to them a couple of times. They're unable to. They ads on Facebook at all, and what they do is they just change their landing page every two weeks, and then they run another ad until they're caught, and then they run another landing page. But they have a lot of money behind them, and they're making a lot of money, and so they can afford to do that as a nonprofit. Yeah, I can't match that.

8:24 - Oriel Mor (oriel.mor2001@gmail.com)

I understand. So what are the results up until now? Do you have any data from the past month, two months?

8:33 - Mark Debra Meehl

I don't yet. My call to you, I have a SEO guy that I've worked with out of the UK for the last 10 years, and he's compiling a bunch of stuff for me, and we're trying something a little different in regards to keywords and some blogging, long tail keywords, to see if we can get any headway. Last year we did okay. I consider we moved. We've moved. We've We Texas to Washington State, so we're back in the Pacific Northwest, which is nice, for all the right reasons, and we were all born and raised in the Pacific Northwest, and Texas is, it's a different atmosphere, we'll just put it that way, and so we moved back, last year was, you know, what I considered to be, we've been here four years, last year is what I considered my start year, and we did \$49,000. This year, it was like the rug was pulled out, we don't know if it's the economy, and tariffs, and people are scared here in regards to what's going to happen, or, or exactly what, but I can tell you, yeah, it's been brutal. So, again, that's why. So, why. You know, we're trying to sort it out, according to the data, to see where we're at.

10:06 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so this year has been as good as last year?

10:10 - Mark Debra Meehl

Yeah, brutal. Brutal. We were on track last year, I thought, to double the money. I really did. You would have never, in a hundred years, I mean, like I said, I've been doing this for a long time. You'd have never convinced me with the strong, again, proponent here in the United States for psilocybin to become legalized and for the search results and all of that. And yeah, you know, we've ran, we've done comparisons to all of our, you know, what I would say, you know, competitors per se. And I'm, I'm still just, yeah, we've done geo marketing for targeting for micro dosing and for psilocybin for, you know, psychedelic. Quote, unquote, retreats to 300 of the top cities. And, you know, I get about 25 or 30 email signups a day, or I'm sorry, a week, about 30 a week. And yeah, we're just, they're just absolutely not converting. And I know it's not because of lack of, you know, we have great reviews. I mean, we're literally five star reviews. And I'm just, I don't know, I'm perplexed. Again, that's why I reached out.

11:40 - Oriel Mor (oriel.mor2001@gmail.com)

What are the patterns that you notice when people not convert? Is there something specific that they say something they repeat again and again on the calls?

11:49 - Mark Debra Meehl

They don't. You know, we put on a, you know, on the bottom of my welcoming email. I actually have a link to Mama Doe. So for to microdose psilocybin, because I really do believe in microdosing. I really believe it changes brain structure. In the last six months, I've sent them \$13,000 worth of business.

12:18 - Oriel Mor (oriel.mor2001@gmail.com)

Oh, okay. And how does it affect you, though?

12:22 - Mark Debra Meehl

That's the question. Exactly. And, you know, there's, I have some dilemma about that. Morally, I think it's the right thing to do. But again, you know, I don't know if it's because it's a smaller, I mean, we're only charging \$1,500 for three days, and we're all inclusive. So you get lodging and food. And I mean, and it's great. I mean, it's, it's great food. So we're not serving peanut butter and jelly sandwiches at lunch. Michael is a trained chef. And I'm not too bad in the kitchen, either. mean, are other the I We're what we do here, but the interesting thing is, obviously, if you're microdosing psilocybin, it's a small ticket item. People are spending \$150 to \$250, and of course, three days here is \$1,500. So there's a big gap between the two.

13:24 - Oriel Mor (oriel.mor2001@gmail.com)

I think it all comes down to a need. And a question of, when you hop with people on the call, do you identify their need? Analyze what they need? What's the situation that they're at right now? And understanding, okay, what do you deal with? What are your struggles? Based on that, knowing how to direct them. The thing that you do morally, that's great for people that are not, for example, dealing with depression or have trauma or PTSD. Yeah, they can use microdosing. I'm also going to start microdosing myself. anxiety threat. I'm from you an

14:00 - Mark Debra Meehl

Good for you. Yeah, I'm going to start with it. Can I ask you, how do you get it from, I mean, is there somebody, you have somebody privately.

14:09 - Oriel Mor (oriel.mor2001@gmail.com)

Excellent.

14:10 - Mark Debra Meehl

Exactly. And I will tell you, can I ask you what strain that you're thinking about?

14:16 - Oriel Mor (oriel.mor2001@gmail.com)

I'm not sure whether it's a golden teacher or there's a, there's a one that's, there was a non, one that's even like weaker or gentler, white, something white.

14:28 - Mark Debra Meehl

White buffalo. Yeah, I think, yeah, I think that's the one. will, I will tell you, of the two strains, golden teacher, it produces a lot of amazing brain chemistry and gives you that direct connection to the God divine of your understanding, as does envy. The other ones, unless you're very careful, the write up can cause a lot of anxiety. If you have PTSD, those crebenzas. Yes. Yes. Yes. Produce a lot of that anxiety, and you're going to want to avoid that if you have

any kind of anxiousness at all, because I'm talking about, I'm talking about, yeah, teeth clenching, shaking kind of sweat kind of thing. You don't want that for people with PTSD and trauma, and so just know that this is my speech about throwing all psilocybin into a pill is that you don't know what you're taking, and each psilocybin mushroom has a different effect, and a different effect in regards to that structure in your brain, but also a different effect in regards to the write-up, is what we call it, the write-up to get to there. I don't know how experienced you are, but some of those strains can produce a lot of anxiety before you have any kind of visual or any kind

16:02 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I only did it once. It was actually a month ago on my girlfriend's birthday, which was a day before mine in Amsterdam. And we took truffles because it's not legal in Amsterdam. And it was unbelievable. But then I made a mistake in which I knew to not sorry for saying that not the mushrooms. And I did with the mushrooms because we took we took an equivalent of 1.5 grams and truffles. And it was unbelievable.

16:32 - Mark Debra Meehl

We're in the park on like amazing.

16:34 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I got to I got extremely emotional as well. My dad and everything. He passed and it was like, yeah, so it was unbelievable. And at night, we're like, let's take some more at night. Big mistake.

16:51 - Mark Debra Meehl

Big, big mistake.

16:54 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it I got an unbelievable amount of anxiety out of nowhere. I was completely fine. Then I shut Boom. I don't know where it happened. So, and that was like, I was like, wow, that's, yeah, I should, I knew I shouldn't have done that, but I still did that. But I'm glad I experienced that on my flesh, to know to not to do that anymore.

17:13 - Mark Debra Meehl

So to be able to counsel other people. And it's yeah. So, you know, we do things like that. And you're right. There's a certain honoring the plant and the consciousness of the mushroom itself, and the spirit. And when we step over that boundary, again, we're taught a lesson, sometimes it's a very uncomfortable lesson. And yeah, but that experience for you. Then shows you what that anxiety is like. So that when you go to talk to other people about the types of psilocybin and

the types of mushrooms, you now have it down, you know, exactly what I'm talking about. Mm hmm.

17:58 - Oriel Mor (oriel.mor2001@gmail.com)

It reminded me of. Of my little kid anxiety. Because when I was a kid, I had this uncontrollable wave type anxiety where it would be extremely anxious, and then it would go down and then would just come back up. It was exactly like that for like two hours, two hours. And was like, right when it switched to my birthday. Just it was not nice at all. But yeah, I'm glad I'm glad I experienced that. And I'm glad I also experienced a very bright side of it because I was like, so nervous. And it was unbelievable. And I just cannot wait to see what's going to happen when I'm going to do it with a therapist in a controlled environment and take a hero dose and you know, really tackle some trauma that I probably have inside me. So yeah, just just wanted to share about that. Anyways, so you're currently only running on Google, we get 30 people a week, which is, it's a nice number. It's a nice number. It's really. Nice number. And none of them convert?

19:02 - Mark Debra Meehl

Not even a single one a week? Nope.

19:09 - Oriel Mor (oriel.mor2001@gmail.com)

Do you direct most of them into Mama Dose?

19:15 - Mark Debra Meehl

There's a thing on the bottom of the page. So basically, it goes through what our schedule is going to be. And there's a little intro about who I am. The one, the welcome page, the welcome email that I did before talked about the legalities. And, you know, basically, you didn't have to worry about that, you know, being rated because we only take five people at a time on a weekend. It's this is not a party atmosphere at all. And we didn't convert with any of that change the email up. Thought, oh, we'll try something different and see if we can convert with that. So I, I'm, like I said, I'm perplexed. I'm, I'm there.

20:00 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so you're trying, so you're trying to get people to pay for their retreat via the email.

20:07 - Mark Debra Meehl

Well, they have the ability to call me, my number is literally on every page. You can call me, you can text me. And there's not a lot of that going on, I might get one or two, what I call looky-loos over the course of a week or two. But we're not getting a lot.

20:31 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so I understand the bottleneck. I answered way better now. The main challenge that you have right now is trying to sell a \$1,500 product before people even got on the phone with you and understood who you are.

ACTION ITEM: Implement SMS follow-up system for leads; integrate w/ existing funnel

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1239.9999>

ACTION ITEM: Add calendar booking option for consultations on website/funnel page

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1239.9999> That is extremely hard, especially for something that needs education. Okay, if I were to be you, what I would do is remove the price, send people an SMS message as well.

ACTION ITEM: Remove \$1555 price from landing page; prep for price increase

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1239.9999> Give them a calendar to book with you and also call them after they leave their details, and your whole point is to get them to either have a Zoom call with them and have a presentation, like a whole presentation that goes through everything that you guys do there, explains how psilocybin works, what's the purpose of it, who is it for, who is it not for.

ACTION ITEM: Create comprehensive presentation on psilocybin retreats; include success stories, process, benefits

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1249.9999> Have a call in which you identify their needs. Really go in and understand what's going on, just like I'm doing with you now. I'm really trying to understand what's going on, see if I can help you. Do the same thing out of a genuine place, because I can see that you're very authentic. And I think people will actually get connected to you on this call. And if you can show them how it can help them better their lives or solve any sort of trauma, depression, anxiety, something bad that they're dealing with, I don't see a reason why they won't join.

ACTION ITEM: Set up 4-installment payment option for retreats

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1305.9999> On top of that, you can give people the option if... It's possible for you, cash flow-wise, to split it to payments, to be easier. That's another thing, to reduce friction. But I think the key things that you need to focus on, because you have a good conversion when it comes to the landing page, what you need to do is just dial in the follow-up process and dial in the whole identification phase and the closing phase. Because selling a \$1,500 product from an email, that's basically

impossible in today's world. Especially for something that's very... Imagine that people that sign up, there's probably 70-80% of them people that have never been into something like that before. It's completely new to them. So they cannot see the value in paying \$1,500 for something that they don't understand what it even does. And on top of that, they're scared, they have uncertainty, and we need to create all of that for them. We need to create belief, hope, and certainty inside them to make them understand that it's for them, and it can help them. And also create... .. The most minimum friction possible, and you create that by talking to them on the phone, or Zoom, or if they're in your city, or in your area, get them to come to you, to your house. Sit down and talk to them.

23:14 - Mark Debra Meehl

Believe it or not, most of my people that I get fly from the East Coast here. So it's four or five hours. I get a lot of people from New York, which is, I find fascinating. I don't know why.

23:29 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, think, and yeah, New York is really interesting. I mean, I can understand why, because New York is, I've been there once, and it's a hectic place, unbelievably hectic place. So I can understand why people would look for solutions. They're also, they have an interesting vibe there, I guess you could say. So I can understand why it happens. But in general, like, talking practical-wise, this is like, definitely the number one thing that you need to... So another thing that I would do instead of you, because you get so many signups from Google, I think you should continue with Google. don't know if, is it organic or in Google, like an ads or is it just, okay, so it's both of them. Oh, it's organic.

24:14 - Mark Debra Meehl

It's not even ads.

24:16 - Oriel Mor (oriel.mor2001@gmail.com)

No. Okay.

24:17 - Mark Debra Meehl

That's amazing. No, we're going to try ads this next week. Again, with the, you know, Google won't let us tell you what we really do. And we're going to see what we can get.

24:30 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, that's creative. I like that. And another thing that you can do is with Facebook, actually. Okay. Facebook is a song tool when you use it in the right way. And what do I mean the right way? Facebook. I have a theory about Facebook that they have less tools to actually scan video ads. Okay. And that gives you all the advantages possible because you can talk more freely. People can see you and get to connect to you more. Okay. Thank you. You have more real

estate because you show up in Reels and in Stories and all these places, and you can test way more things because with videos, I don't know if you looked at my YouTube channel, in I explain how we work with our ads, how we create our ads, we have a specific format in which we test things. We have two body copies, then we have hooks to test the start of the video to see which angles work, and we basically see what works with many creatives to get them to not burn out and also see what works best because something isn't going to catch. And then we just do it again and again and again. just reiterate and change things. And it's an endless testing process. So we got the best of all worlds. You get more real estate, you can get more testing, Facebook is less likely to scan things as well, because you're not going to write anything in the ad copy in the text, you're just going to write, watch this video or something like that, if you're dealing with X, Y, Z, and you can direct people to a landing page, they can leave their details and it's the exact same. Also, believe that Facebook is a way stronger vehicle because of the simple fact that it's educative. It's interrupt marketing, whereas there's people that actively search for psilocybin treatments or psilocybin microdosing or any of that stuff, and there's people that don't even know about that. And this is like the 90% of the market in which we can really help because I've talked about that in my videos as well. Most people that we're going to help are labeled as treatment-resistant depression patients.

26:37 - Mark Debra Meehl

Right.

26:38 - Oriel Mor (oriel.mor2001@gmail.com)

And when you're being labeled like that, it's not just a label. It's a part of your identity. And when that's a part of your identity, you have no hope anymore. Right, I we need to rebuild that hope. Yeah, and we need to rebuild that hope. And that's what we do in the marketing. And there's a lot lot of. A lot of agencies in which we're going to see that provide, like provide ketamine and all that stuff, they talk about FDA approvals and insurances. And while it's true and nice, it doesn't change anything because SSRIs are also FDA approved and they didn't work, did they?

27:16 - Mark Debra Meehl

Well, and the other thing is, again, I find this so interesting. You can take psilocybin and there's zero death rate and then you look up the death rate for SSRIs and it's a staggering number.

27:29 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. Also, I got, I saw this graph on Big Think, this YouTube channel in which the, they had a whole list of drugs and their harm to society. Alcohol and heroin were in the top two spots.

27:44 - Mark Debra Meehl

Yeah.

27:44 - Oriel Mor (oriel.mor2001@gmail.com)

It's just, it's mind boggling. Honestly, I just don't understand how a drug like alcohol is just, and also like smoking like cigarettes. It's only because they make so much money. They make so much money and they get. They get what the government wants and it controls people more like it's unfortunate, but we and this is exactly what we want to do. We want to take the tools that we have and that we're discovering that are making a revolution and change. It's basically changing society. It sounds like dramatic and insane, but that's what we do. That's what we do. That's the goal here. So, yeah, practical wise, everything that I told you right now, I think that if you implement these things, you're going to see an immense improvement in your results, an immense improvement, because usually there's only three, four, five actions that you need to take when it comes to your sales funnel that will dramatically improve your results. You have the organic part cracked, which is great. People are showing intent, which is good. The only thing that needs to be improved upon is your selling process and showing how it works can actually communicate in that to people. 2 When you do that better, it's going to work. It's undeniable going to work because there are companies that offer treats and they sell, right? People pay thousands of dollars.

29:12 - Mark Debra Meehl

Yeah, was going to say, yeah, we're the cheapest place in the United States right now.

29:17 - Oriel Mor (oriel.mor2001@gmail.com)

Exactly that. Yeah, that's also what I thought. was like \$1,500, that sounds cheap. And I was not sure whether to say that or not, because I have this treatment, yeah, I have this company, I don't remember their name, but I'm subscribed to their email list. They do it in the Valley in Peru, the Sacred Valley in Peru. Yeah. Yeah, they cost like \$4,000. Yeah.

ACTION ITEM: Film post-retreat participant testimonials; prep for marketing use

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=1780.9999> Or, and I'm intrigued, I want to go there, you know? So, I mean, \$1,500 is nothing when you communicate the value and the results that they get out of it. You know, I think that the most important thing, like the most crucial needle mover is having a Zoom call or a physical, like a physical call with them. that do, In your house, and showing them the presentation, showing them the stats, and if you can get also a thing that you should implement, you haven't had many retreats, I'm assuming, in the past couple of months, but in the retreats themselves, film people after the retreat and tell them to talk about their experience. I have a whole layout of testimonials gathering, which explains what questions to ask, how to fit it like in a story format that it's going to get, because people love journeys, they love stories, and if people, and if they see other people that got to the result that they want to get, there's a higher chance that they're also going to believe that they can get to there as well. So, yeah, these are the biggest needle movers, like movers, in my opinion. You implement these with me, without me, you're going to improve your results unbelievably. So, yeah, I'm trying to think if there's anything else that I can...

30:56 - Mark Debra Meehl

Well, I appreciate your time and your willingness to talk to me. And, you know, and I haven't looked into, so apparently you specialize in Facebook and getting videos on, is that correct?

31:11 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I'm more a creative side person. And I love copywriting and psychology, marketing and all that stuff. I'm less of a Google side person. Honestly, I don't like working with Google. I know how to work with them. I just, I just, I don't like them at all. I just don't like their platform, their, their policies, their click fraud.

31:29 - Mark Debra Meehl

I don't like that. I'm not, I'm not fond of any of that. And then, and yet I'm, I'm somewhat bound because of course, you know, I, you know, it's about doing what works so people can actually find you. And it's interesting because there's a lot of people that have gone off of Facebook and it's like, well, I don't like Facebook anymore. And so this is my last post. And it's really interesting because about three months later, they come back on and they go, okay, well, we've changed our minds. And I think to myself. Yeah, I know why you changed your mind. It's because, you know, nobody could find you, you know, which is what we went through eight years ago. It was having people find us. And, you know, yeah, it's sad because, you know, the medical community holds people hostage, as far as I'm concerned. And I came out of Western medicine. So I know a little bit about what I speak about here. And, you know, they hold them hostage. And, of course, it's difficult to break out of that into, you know, allopathic natural medicine. People couldn't find, you know, places to go until, you know, Facebook and Google and, you know, other platforms became available. It really was difficult. So, yeah, I get it.

33:00 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. I'm glad that organics is working for you. Just dial on what I told you. If Facebook is not your piece of cake, that's completely fine.

33:08 - Mark Debra Meehl

I think I'd like it to be my piece of cake. My last video that I did got 735 views. So I don't think that's too awful bad. I mean, I'm not going to be a rock star next week. But 730 wasn't too bad. But, but my problem is, you know, again, I realize it takes a while for people to get to know you. And as like you said, and it's usually that question of authenticity. And, you know, I just, I just shoot from the hip. I just tell it like it is. I don't sugarcoat it. So that's, that's what works. If, well, some people don't like that very well.

ACTION ITEM: Send detailed email to Mark re: marketing services, pricing, process

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9tppqtzZD3rGq?timestamp=2031.9999>

33:54 - Oriel Mor (oriel.mor2001@gmail.com)

And so then I just say, Oh, well, you're not for me. So, you know, Exactly that. That's exactly that. You summarize.

34:02 - Mark Debra Meehl

So can you send me a little bit more information about what you do and how you do it? And of course, the cost would be really nice. And then we could see, I can see if I'd like to work with you in regards to those Facebook ads.

34:19 - Oriel Mor (oriel.mor2001@gmail.com)

100%. Yeah, I'm going to send you an email.

34:20 - Mark Debra Meehl

It's to be a long email. So get ready for that.

34:23 - Oriel Mor (oriel.mor2001@gmail.com)

And when it comes to our offer, I'm going to tell the president right now just to know if it's right for you. Okay. So what we do is very simple. The first month we do not charge a retainer. We only charge for creating the ads. That's \$4.97. Okay. So having all the process, connecting, having all the integrations are in the script, all these things.

34:44 - Mark Debra Meehl

And why is it not \$4.95 and instead it's \$4.97?

34:48 - Oriel Mor (oriel.mor2001@gmail.com)

Psychology.

34:50 - Mark Debra Meehl

Tell me about that.

34:51 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it's actually...

34:52 - Mark Debra Meehl

I love numbers.

34:54 - Oriel Mor (oriel.mor2001@gmail.com)

So please, I'm interested. I also am very obsessed with numbers. I have a, I have an unbelievable story to tell, but that's like in... ..that And Two seconds. 497, from reading all the marketing books that I have on my shelf, there's this study that has been made that the number 97, for some reason, sounds more appealing than 499 or 495. Okay. And so that's the only reason why I'm using that.

35:21 - Mark Debra Meehl

Only reason. So, I want to ask your opinion about something. So, we were 1295 before we were 1555, and kind of like you, I like the numbers and the psychology of things. And I had somebody else tell me, a marketing person tell me that, first of all, they thought 1555 was too low, and that people get weird if the price is too low for something, because then they think that there's no value. So she said, I'm going to encourage you, come the first of the year, to increase your price. I realize you're I'm not filling the beds and doing what you want to do, but please, please consider increasing your price, and I went, okay, I'll consider that, and my question to you is, is there a number that stands out to you that would be better than \$1,555?

36:19 - Oriel Mor (oriel.mor2001@gmail.com)

It would be either \$19.95?

36:28 - Mark Debra Meehl

\$19.97.

36:29 - Oriel Mor (oriel.mor2001@gmail.com)

\$19.97. For some reason, I don't like \$19.97 because it's \$9.97. There's a lot of, because in my, I'm going to tell you where it comes from, because when I started studying marketing, there's been all these gurus that sell \$9.97 courses.

36:43 - Mark Debra Meehl

That's a whole thing.

36:44 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. And I have a thing with \$9.97 specifically. So \$19.95, it's obviously unbiased and it's subjective. That's okay.

36:54 - Mark Debra Meehl

I'm just, I love your authenticity.

36:56 - Oriel Mor (oriel.mor2001@gmail.com)

So I just, from the gut, this is where I'm going. Thank you. Thank you so much. I'll we're fortunate. So, \$19.95 or \$24.95, that's what I would go with.

37:09 - Mark Debra Meehl

Can I run a number by you? See, because I was thinking, I mean, too much of a jump makes me a little nervous. Not that I'm not willing to do it, but it makes me a little nervous. But I wondered about \$18.80.

37:25 - Oriel Mor (oriel.mor2001@gmail.com)

\$18.80. I actually have no idea. I've never seen this number before, so I have no opinion about it.

37:35 - Mark Debra Meehl

I don't know how it's going to work. All right. All right. I don't mind thinking about \$19.95.

37:42 - Oriel Mor (oriel.mor2001@gmail.com)

I really don't. Yeah, and if you can split it to four payments, it comes down to being \$4.90 something.

37:56 - Mark Debra Meehl

Yeah, I don't have a calculator.

37:58 - Oriel Mor (oriel.mor2001@gmail.com)

I'll figure it out. I think it's \$4.99. I'm

38:01 - Mark Debra Meehl

I'm sure it's \$4.99.

38:02 - Oriel Mor (oriel.mor2001@gmail.com)

Okay.

38:03 - Mark Debra Meehl

Okay. All right. Yeah.

38:05 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So, yeah, so that's about that. I'm going to send you everything. Oh, and by the way, it's \$497 for creating the ads for the first month. We are going to set a specific KPI that we want to hit from the ads, okay? Whether that's consultations, calls booked, and everything. If we do not

hit that KPI, you're not going to pay us the retainer for the second month. The retainer for the second month is going to be two options. One, it's either a flat retainer of \$1,200, or it's a reduced retainer of \$9.95. And we take...

38:38 - Mark Debra Meehl

Yeah, of course it is.

38:40 - Oriel Mor (oriel.mor2001@gmail.com)

And we take...

38:41 - Mark Debra Meehl

Yeah, I'm only going to pay you \$9.97 though, so forget it. I mean, you know, I'm not paying you \$9.95, but go ahead.

38:48 - Oriel Mor (oriel.mor2001@gmail.com)

Oh, God. So, the second option is your \$9.97 plus a percentage of sales. So, what you make from, we're going to take a percentage of the sales, and then we... We got... Reward it for for the more money that you make. So these are the two options. And yeah, that's, that's basically it. It's extremely simple.

39:09 - Mark Debra Meehl

So yeah, and yeah, I, I would say I would be interested in that. I, you know, if I have to talk to one more person that wants \$10,000 up front, I'm going to chew my own wrist off.

39:24 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. I'm always wondering how, I don't know if it's because I don't have enough confidence to ask for that amount of money now, because I am building my reputation. Like I have, I have done a lot of things in the Israeli market, but not in the U.S. market yet. And it's a completely.

39:40 - Mark Debra Meehl

Here's my, here's my moral dilemma. And, and I realize in sales, there's not supposed to ever be a moral dilemma. We in the past have given a lot of free services to people, to veterans, and to women with PTSD for a variety of reasons, whether it's trauma or childhood trauma. and, and, and, So women with children that have no money, let's just be a role player.

40:05 - Oriel Mor (oriel.mor2001@gmail.com)

They don't have any money.

40:06 - Mark Debra Meehl

So we've given a lot of or reduced cost because I'm a nonprofit 501c3. So I say, okay, well, it's \$10,000 over here. And yes, I can garner more business, but then I can't give away. I mean, I can't have a scholarship program because I've spent all my money on marketing over here. So there has to be a balance for me that I can sleep with at night. And when you want \$10,000 for something up front and zero guarantee that you're going to even get the people to me, I got a real problem with that. So, because I mean, I don't, I can't guarantee you something on psilocybin, but I can get real close to telling you that it's going to be a life changing, life altering experience. And I've only had four people in the last. It's eight years, walk away from having what I call a nothing experience. Two of those people lied to me, and they were actually taking an SSRI. And if you take an SSRI, you don't get any lift. You don't get anything. You get nothing because that SSRI basically kills the effect of the psilocybin. It doesn't harm you. It doesn't harm you, but you've now come to me and, you know, and basically, like I said, lied to me in regards to what it is that you're taking. Because I have had people that have said, you know, who have paid right away and then said, I'm going to come down off of this SSRI. I've had some issues doing that, and I just reschedule them for another retreat. I don't take their money and run. I don't say, well, you've paid for this retreat. And so, you know, now you're out the money. I don't, you know, I don't, you know, I don't. Screw people out of their money. That's the bottom line. And I give you and during COVID, when all of that nonsense was happening, and I scheduled people two years out. So I had people that couldn't come right away. We held their money, held their name, worked them in. I mean, that's the way I do business. I mean, I just I'm not into people here. I mean, I just I'm just not. And I so So, yeah, I just just integrity. You know, I just I, you know, I like I said, that's the only reason why the \$10,000 a month and the whatever, blah, blah, blah, I'm just going, yeah, there's just no integrity with that. I mean, I can't get on board with that. can't help other people with that. And again, we're not one of those companies that's, that's, you know, charging, you know, a god awful amount to do this. If I could do that, then I wouldn't care about I about Google because I Just drop 100K into a Google account, and I'd ran all the ads that I wanted because, like you said, there is a Google turns a blind eye to that. And my SEO guy that I have in the UK has told me that for 10 years. He said, you know, if you're dropping \$100,000, and he goes, and I got two or three clients that do that, that are dropping \$100,000 a month into Google, and they can advertise whatever they want. And he goes, and we've done it again and again. So he goes, I know that Google turns a blind eye. So, yeah, so I'm with you. Send me your information. I'm interested. I probably can't do anything until January, but I'm going to follow your instructions here because I took notes. And I'm going to see if I can get a, what did you say? It's an, yeah, it's an SMS message out to everybody. And we'll see if we can do that and link that to my funnel page. is внимание, but I'll Um, the, the page that I've had for the last eight years was, um, meal foundation backs base, um, or back up slash retreats. We changed the funnel page, hoping that would help. I haven't noticed any difference yet, but it's only been a couple of weeks. So we'll see.

44:19 - Oriel Mor (oriel.mor2001@gmail.com)

And then, yeah.

44:20 - Mark Debra Meehl

Um, and then, yeah. Um, what I like to own, um, Facebook in regards to psilocybin and videos. I think so. Um, think I'd like, I think I'd like to crush the competition.

44:34 - Oriel Mor (oriel.mor2001@gmail.com)

So, yeah. If there's any competition that is even doing any remote good, good job, because most people do not do good job at all on Facebook.

ACTION ITEM: Prep presentation for Cycon conference on Oct 17; focus on psilocybin therapy

- WATCH:

<https://fathom.video/share/zYqykrt9fCQhEysru1X9ttpqtzZD3rGq?timestamp=2687.9999>

44:43 - Mark Debra Meehl

I agree. I'm, I'm with you. So, yeah. Uh, and I'm, I'm, um, I'm open, uh, to your suggestions. I've tried to do it as naturally as I can.

44:55 - Oriel Mor (oriel.mor2001@gmail.com)

And sometimes that works. Sometimes it doesn't.

44:58 - Mark Debra Meehl

Um, and then, yeah, I speak. At the next conference, I'm going to actually be in Las Vegas. There's a psilocybin conference there. And yeah, I'm going to do a presentation there also.

45:14 - Oriel Mor (oriel.mor2001@gmail.com)

So that's cool. That's nice.

45:16 - Mark Debra Meehl

When is it? October 17th, maybe I'll have October 17th. And it's called Cycon P Y S C O N. It's the Cycon P S This reminds me of now what I wanted to tell you about the numbers.

45:35 - Oriel Mor (oriel.mor2001@gmail.com)

You said that you have a thing with numbers.

45:36 - Mark Debra Meehl

Do you have anything with the number 17 particularly? I do happen to have a thing. 17 converts to 8. 8's a power number for abundance.

45:48 - Oriel Mor (oriel.mor2001@gmail.com)

17 converts to 8?

45:49 - Mark Debra Meehl

Really? 1 plus 7 is 8.

45:53 - Oriel Mor (oriel.mor2001@gmail.com)

Holy . Okay, so listen to this.

45:55 - Mark Debra Meehl

You want to hear something the same?

45:57 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So, in April. I had the number 17 pop up everywhere for me, out of nowhere, really out of nowhere, and I was like, am I losing my mind? What is going on here? I don't understand what's going on here, and it's gotten to the point in which I was in the U.S. with my girlfriend, and one of the cars, the driving license was 17, 17, 17. That was the driving license, and I was like, what is this? What is going on? And I basically ignored it for a little while. was trying to look for patterns with this number, and I couldn't understand what the meaning of it was, and I still do not, but listen to this. When I came back home, I was in Prague for a month and a half with my girlfriend again, and I came back home, two days after I came home, my dad has passed. His funeral was on the 17th of August. What else was on the 17th of August. My parents' marriage was on the 17th of August. And also, you know, that there's this Jewish ceremony in which they basically cut your after you get born.

47:16 - Mark Debra Meehl

Yeah.

47:18 - Oriel Mor (oriel.mor2001@gmail.com)

It was also on the 17th. Mine was on the 17th. And it was just insane to me. And you know where my dad is buried in the graveyard? He's buried his, he's on the 8th, on the 8th spot on the graveyard. Like the name of the place, like the name of the number, it's the 8th place. And I was like, this is insane. I'm, I'm thinking, I'm just, I don't understand the meaning of it, or if it's connected or what's the purpose of it anyways. But it's just unbelievable to me, to, because I.

48:04 - Mark Debra Meehl

So when I tap into that kind of thing happening, whether it's numbers or seeing the same word over and over again or whatever the case may be, so Joe Dispenza, if you ever have a chance to see any of his videos, talks about, he says to the universe in the morning, show me in a way, show me something so miraculous. In a way that I know that it comes from you. And it's interesting because when I start seeing the same numbers over and over again, or the same words over and over again, that's what I call out to. So whether you believe it's an angel number

or just a number from the divine, I have two children born on the 17th. One of them is the 17th of April, and the other one was the 17th of July. And I was told by a Sikh woman 40 years ago that that was incredibly significant. So it's kind of interesting to me to have this conversation now with you about 17, and of course, I always know that 17 is a power number, because it makes eight. Eight is the number always of abundance. Always.

49:21 - Oriel Mor (oriel.mor2001@gmail.com)

That is unbelievable, actually.

49:24 - Mark Debra Meehl

So I would, if I were you, I'm not telling you how to run your stuff. What I would say is that you obviously travel. So you have some abundance coming to you. And I would just say to the universe, if this is an abundance number for me, show me, show me even more than I have now. Show me what else is possible. Help me step out of the box of whatever belief that I have, and make this happen.

50:00 - Oriel Mor (oriel.mor2001@gmail.com)

Mm hmm.

50:02 - Mark Debra Meehl

And then come sit in ceremony with me.

50:05 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, that's definitely the thing is with the U.S. Oh, my God, the U.S. has been giving me a hard time. Last time that I went there, the immigration, they were, oh, they were annoying, kind of traumatized the whole immigration process.

50:17 - Mark Debra Meehl

And I'm so sorry about that. And you're right. It's going to be like that for a while, I'm afraid. I'm outside of Spokane. I'm on the opposite side of the mountain of Seattle. Most people fly into Seattle because it's easier from other countries. But yes, I get it. So and I'm five hours from Seattle. Like I said, I'm on the other side of the mountain. So Seattle is very wet and rainy and on the on the beach. And we're we're in the mountains. I'm literally on 43 acres in the forest.

50:52 - Oriel Mor (oriel.mor2001@gmail.com)

Wow. Yes, that's that's that's unbelievable.

50:57 - Mark Debra Meehl

And the pictures that I have on my website, just so you know. None of those have been photoshopped. I don't photoshop my stuff at all. What you see is what you get. So, yeah, any time. Whether we work together or not, you're always welcome.

51:13 - Oriel Mor (oriel.mor2001@gmail.com)

Thank you so much. I appreciate that.

51:16 - Mark Debra Meehl

That shows that I've done something right on this call.

51:19 - Oriel Mor (oriel.mor2001@gmail.com)

I appreciate that so much. So, yeah, I had a great time talking to you. I'm going to send you everything. If you have any questions, if you want to help on a call with me as well, you're free to do so. Just let me know. And I really, I really hope that you implement these things that I tell you, it's going to, I believe, I really believe it's going to increase your conversion rate and it's going to get your retreats.

51:42 - Mark Debra Meehl

You know, I can't figure out, like I said, you know, because it says on the bottom of that page, you know, on that funnel page, I believe still, because like I said, we just changed it two weeks ago, you know, call me, reach out to me. But you may be right about the SMS message, messaging people. And also a calendar, a calendar.

52:01 - Oriel Mor (oriel.mor2001@gmail.com)

It would be good, too, to let people book a consultation with you, see if it's fit for them. Yeah. So, like, three main things. Having an SMS.

52:09 - Mark Debra Meehl

People are not going to call. People just don't call these days. They just don't do that anymore.

52:12 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah.

52:13 - Mark Debra Meehl

Yeah.

52:14 - Oriel Mor (oriel.mor2001@gmail.com)

So, yeah, pushing them, giving them, like, nudging them to book a consultation, showing them a presentation, explaining exactly what's going on. If you have success stories, show success stories. Do everything to create the hope and make them understand that there's immense value because you know there's immense value. And when you believe in that, it's going to be way easier for you to actually transfer that to the other side and communicate that the other side. Like, can see on me and I can see on you, yes, we are on the same wavelength when we talk. It's pretty easy to see. So, you need to do the same thing. That's it, you know? So, yeah, that's basically it. Awesome.

52:51 - Mark Debra Meehl

All So, I'm to send you. I look forward to looking at your email and, yeah. And then formulating a plan. Yeah. And To see what we can do. Because like I said, I wouldn't mind owning Facebook, so.

53:06 - Oriel Mor (oriel.mor2001@gmail.com)

A hundred percent, that's great. I'm gonna send you an email.

53:08 - Mark Debra Meehl

You can reach out if you have any questions again.

53:10 - Oriel Mor (oriel.mor2001@gmail.com)

Let me know everything, and I'm here.

53:12 - Mark Debra Meehl

Thank you so much, Debra. you much.

53:14 - Oriel Mor (oriel.mor2001@gmail.com)

All right.

53:14 - Mark Debra Meehl

Have a great day.

53:15 - Oriel Mor (oriel.mor2001@gmail.com)

See you later.

53:15 - Mark Debra Meehl

Bye-bye.

53:16 - Oriel Mor (oriel.mor2001@gmail.com)

Bye-bye.

Transcript 2:

Hannah - September 30

VIEW RECORDING - 34 mins (No highlights):

<https://fathom.video/share/6fFE24Bvxm7-q3gzaixQs7Ba7azFiKTW>

0:00 - Oriel Mor (oriel.mor2001@gmail.com)

Hi, so sorry about that. meeting is being recorded. How's it going?

0:04 - Hannah

Good, how are you?

0:06 - Oriel Mor (oriel.mor2001@gmail.com)

Great, great. So I'm going to dive deep in. I'm not going to ask you how your dog is today.

0:12 - Hannah

I want to be extremely... Oh, wait, I cannot hear you.

0:17 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, repeat myself.

0:18 - Hannah

Yes, sorry.

0:19 - Oriel Mor (oriel.mor2001@gmail.com)

Great. So I'm going to dive right in. I'm very direct. You're going to see. I'm not going to talk to you about how your dog is today or how your cat is, whatever you like. I'm going to be extremely direct to what you've done in the past. I took a look at your form. I want to actually go over it with you right now and see if I can help you. And that's the main purpose. And if I can, and we have a good fit and we have good energies together, then we can work together. So I can see Java between... You fill out the form twice, I saw. And you change it from 60 to 80 to 70 to 100 patients. You have TMS, medication management. You're running ads yourself. Biggest marketing challenge is that you're not sure if you're doing it right or dragging any patients. You're So let's tackle that like onwards right now. What makes you feel like that you're not doing it

right? Do not know what the stats are? What's your cost for lead, cost for booking, cost for acquiring a patient?

1:14 - Hannah

Yeah, it's honestly just like, I mean, the only ads that I'm running really are on Facebook ads that I like just recently put up and I have no like I just filled out the form that they gave me and I haven't honestly had time to even check if it's like I get likes on the ad every here and there. But like, that doesn't really mean anything. You know, they're not. I don't I don't think that we've gotten any patients from it so far.

1:37 - Oriel Mor (oriel.mor2001@gmail.com)

It's only been a couple of weeks. Okay, what's the budget that you're on on there?

1:42 - Hannah

You have an idea? Yeah, I think on Facebook, it's like \$50 a month, maybe, or a month, a week, maybe.

1:50 - Oriel Mor (oriel.mor2001@gmail.com)

Uh, no, no, it doesn't work per week on Facebook. It's a per day budget. So when you set up the campaign, do you remember, it might be like \$30, 30 to \$50.

2:01 - Hannah

Like I said, I have no time. So I set it up, and then it was like I set it and forget it, and I randomly get notifications, and I haven't even looked at it.

2:12 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So it's been running for a couple of weeks. Where did you get most of your patients up or tail down? Because you have a nice patient count, actually.

2:22 - Hannah

Word of mouth. We have lots of patients out of mouth.

2:25 - Oriel Mor (oriel.mor2001@gmail.com)

have a great reputation. Great. That's amazing. I love that. That's a huge green flag.

2:31 - Hannah

Do you have testimonials? Yes. I mean, we have over – we have 34 Google reviews, and I have lots of testimonials.

2:38 - Oriel Mor (oriel.mor2001@gmail.com)

That's awesome. Okay. So, yeah, I can see the problem. Basically, you don't have time to track the stats. don't know if it's working. It's a very important thing to know because if you're burning \$1,500 a month on Facebook, you need to know if it's bringing money. \$1,500 a month, it's kind of a big amount to spend without knowing what's going on. Have you had the chance to watch? Did any of my videos, the video of me reverse engineering the funnel of that ketamine clinic?

3:06 - Hannah

Yeah, yeah, I did.

3:07 - Oriel Mor (oriel.mor2001@gmail.com)

So did you get any value from that? That's the first thing?

3:11 - Hannah

Did you see? I did. I guess I don't really know how I would put that into play without guidance.

3:20 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, that makes sense. I'll be honest with you, the main purpose of these videos is to show that I know what I'm doing, we're knowing what we're doing, and that we have expertise and knowledge. So you come on a call, you trust me more, and in the end, it's easier for me to sell to you, that's the whole purpose of it, because we have the tools to help you. Okay, so you have the Facebook ads running, is it to a landing page, or is it to a Facebook lead form? Do you have any?

3:51 - Hannah

I have no idea.

3:52 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, you want to see a quick hack? So let's do something interesting here. I'm going to write your clinic's name.

SCREEN SHARING: Oriel started screen sharing - WATCH:

<https://fathom.video/share/6fFE24Bvxm7-q3gzaixQs7Ba7azFiKTW?timestamp=238.883768> And what's called the ads library of Facebook.

4:03 - Hannah

Have you heard of that before? I'm assuming.

4:04 - Oriel Mor (oriel.mor2001@gmail.com)

No. So I can basically see the ads that you're running and all that stuff, see where it leads people to, all that stuff.

4:11 - Hannah

By the way, I am from Israel, so I hope that you don't hate us or anything like that. Oh, no, Great.

4:17 - Oriel Mor (oriel.mor2001@gmail.com)

It's because I had a person that signed up and I told him, oh, I'm from Israel. He's like, do you support the genocide that your country is committing?

4:25 - Hannah

I was like, okay, thank you so much. We're not continuing this conversation.

4:28 - Oriel Mor (oriel.mor2001@gmail.com)

He's like, but I don't care. It's only your government. Can we, I don't care about you. I love Israelis. Can we still have a call? Like starting to beg me to have a call with them, which was actually kind of crazy how these people work, honestly. Yeah.

4:42 - Hannah

That is a little crazy.

4:43 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So let's go here, see if we can find the right page. Is that the right one? Yep. Yeah. So you have a lot of followers, which is good. That's good credibility. So let's see what's going on here. Okay. So you have, ah, that's not working. A hundred percent. That's not working because, uh, there's a, with ads, there needs to be a specific, first of all, I can just break this down to you. Um, break free from depression with Neurostar TMS. It's a, I don't like to start ads with these kinds of claims. I start with curiosity. It's called the hook. So as you see the video, I have a lot of hooks and I want to show you just to you, for you to understand, uh, what the hooks are. And I, we usually do videos. Okay. We love videos a lot. Videos is the strongest form of, of advertising that there is today, uh, in this age. So what we do is we, give clients the guidance to film, uh, videos. Okay. Authentic videos with your phone, not a crazy setup. You just need to prop up your phone, have a mic that costs like 40 bucks and you do what we tell you to do. We edit the videos, we do everything. And we have hooks. So, this hook here is like, for example, there's only one real way to solve. So what did I do here? Proposing. Okay. There's one way to solve depression from the root. It's an indirect call out. So I'm not saying like break free the impression. If you're struggling with depression, XYZ, I'm just approaching them indirectly. That also helps with helps with Facebook's policies. And also it makes the ad seem more authentic. Okay. And after that, we test out the hooks because the hook is the most important part of the

ad. And then we have the ad itself. And the purpose of the ad itself. We usually have two types of ads that we focus on the most. We do not reinvent the wheel. We do not recreate things. We have two parameters that make it easy for every clinic to have their unique type of ads, even though the template, the template and the process behind creating the ads is similar. So one is the education. We have the education ad explaining, talking about their pain points. This is why you've been going through this. This is why the system is wrong and all that stuff. This is the solution. Here's how the solution is different. Thank And here's testimonials and studies to back that up. That's the first type of ad, which is education. And the second type of ad is a testimonial-based ad. So a testimonial-based ad is basically having a story of your patient that has broken free. Is that the right way to say it?

7:17 - Hannah

Broken free?

7:18 - Oriel Mor (oriel.mor2001@gmail.com)

They are healed. Yeah, healed from depression. And we were basically writing the script based on their testimonial. And then we have a testimonial of them in the end. And these types of ads work the best across all industries because I worked with a lot of industries, not just mental health. Because of the simple fact that it makes people relate. People relate to these types of stories. And if they see a person that's been depressed, they solve this problem. They believe that they can solve the problem. Because in the end, when you talk to people that have treatment-resistant depression, they don't believe that they can break free from that because that's a part of their identity. The only thing that you can do is shift their belief. And I saw that you came from that ad in which I explained about the belief bridge method. to go I'm Thank Is that correct? Yeah. So I talked about that there. I just wanted to show you the process that we have. If you want, I can also show you scripts that I wrote for Greenbrook TMS. Do you know them by any chance? No. Yeah, so search them up. They're the largest TMS provider in the country. have 120 clinics across the country. I'm consulting for them for their ads and all that stuff.

8:22 - Hannah

So you can do a bit of research about them as well.

8:24 - Oriel Mor (oriel.mor2001@gmail.com)

And yeah, so the reason this doesn't work is because it, first of all, it calls out the problem very boldly. There's these two stars here that just, they don't match the vibe and the energy that's supposed to go here. The picture here doesn't really catch the eye. doesn't do anything. It's like a blank white screen with this arrow, which is basically blending in with the Facebook feed. And another thing is if you want people to take a call to action, for example, you cannot have text or call and also have a link to the website because that's like two different options that they can take. That can confuse people. That's like basic psychology. want to show you. As you can see here, welcome to Onward. It's not very conversion driven. There's a lot of psychological things

that need to happen. Also, there's call to actions here for social media, which is not very ideal. I want to show you a page that I created today for a new client, which is going to go on. If you want, I can just, you know, this.

9:28 - Hannah

Do you want me to go over this?

9:31 - Oriel Mor (oriel.mor2001@gmail.com)

Am I overwhelming you with information? Because I just want to dive into how we work. Okay. So this is a client in central Georgia. Okay. They're called Ketamine Center of Central Georgia. can search them up, all that stuff. And I've just recreated their landing page and they are offering ketamine microdosing from home. That's what they do. And I want to go over a couple of the things that we have here in this landing page that make it basically a psychological conversion monster. Okay, so first things first, just as they land on the page, we have this as feature then with all these news because ketamine has been featured on these, you know, on these newspapers. It's not a lie. So that builds authority right on the spot. Then after that, we have the hook. The hook here is treatment-resistant depression actually untreatable. So we basically break their belief from the start talking about how there's a groundbreaking treatment that has been studied on over 400 clinical studies that is proven otherwise. So if you've struggling, this is for you, have a little bit of, you know, FDA cleared, 70% success, and then we have a call to action here to take a free assessment. They take the assessment here and we just filter out people to make sure that we don't get people that are too far away or that they're not from the town because Facebook can actually give you people that just bypass in the town and don't actually live there. So you want to actually filter out these people. So if they say no, disqualify them, we go back here. Then we go down, we already have this Google review to build trust. And after that, we go and basically talk about the problem, okay, the problem that millions of people Talking about what they try to do, why it doesn't work, having a little bit of, you know, funnies here to make it, you know, easy, easygoing and not too dramatic. We have this call to action here in the bottom, which is glowing to make sure that if they want to sign the assessment, they can just press it and they don't need to find a call to action. So we're just removing as much friction as possible, making people go through an emotional journey, shifting their beliefs, and then giving them the call to action. Okay, talking about the solution, which is, you know, ketamine microdose in this sense, and having more testimonials, talking about the protocol, how it works, what it does. Again, FDA cleared, just hammering that thing again and again and again to create trust in people. And yeah, that's basically, that's how we built the pages. Only one call to action. There's no social media things. We do have the phone here, but they cannot directly call it. But that's basically it.

11:58 - Hannah

You know, that's basically it. This is the... This is the ad, or now you're talking about building a website?

12:03 - Oriel Mor (oriel.mor2001@gmail.com)

No, that's the landing page. So the difference between a website and a landing page is that a website is strictly for people to search you up and see what you're all about. A landing page has one simple goal, and that is to convert people to take a specific action. In this sense, we want people to take the free assessment and to evaluate whether they are a good fit to the ketamine microdose. And the way that we do that is, okay, so we press on yes here. They need to give the date of birth. If they're below 18, they cannot do that. We have this little disclaimer here that it's not covered by insurance and doing all that stuff. So let's fill this out real quick. That's my birthday, by the way. Press on next. We're talking about what they're struggling with. They can select all the things in here. So let's select other. Then we say, okay, what do you hope to get out of the treatment? So we also do that as well here. And then we have this little final filter in question. That is when, if they select one of these, okay, so let's do this, for example, they are just this. And the best thing about this is, is that based on the answers that they give on the form, we are then sending them a personalized message with the variable that they selected. So if they say, I am struggling with PTSD, we're going to send them a message that is specifically, hey, we saw that you're struggling with PTSD. Is that correct? And we get them to create a conversation with us, which then makes it easier for us to send them a booking link to book the thing themselves. Because they're like, oh, , they sent me a personalized message. That means it's not just an automation, even though it is an automation, but it feels more personalized to them. So there's a lot of psychological factors that come into place to make sure that we catch people in the right spot, you know? So, yeah, I know I'm over my leaning with a lot of information, but I just want to show you how we work, how my brain works, and all that stuff as well. And I think I want to ask you, have you had a chance to talk with any other marketing agency or anything of that sort?

13:59 - Hannah

You're the first!

14:00 - Oriel Mor (oriel.mor2001@gmail.com)

first. Okay, so I'm already going to tell you, and that's going to sound like I'm throwing stones at people, don't get close to Beyond Marketing, Patient Plus, Ketamine Media, and CycleHealth. I don't know what any of them are. These are four premium agencies that are burning people left and right, burning clinicians left and right. Okay. They also charge a ton of money, like \$5,000, \$6,000 a month for their retirement. So yeah, just watch out for them, whether you continue with me or not.

14:42 - Hannah

What were those?

14:43 - Oriel Mor (oriel.mor2001@gmail.com)

Can you say those again? Beyond Marketing, Ketamine Media, Patient Plus, and CycleHealth. Specifically with CycleHealth, they have this prioritization sequence. I just hopped on a call with their head of marketing, which wants to leave there because he just hates that he doesn't like The founders, and he told me that they have a priority kind of thing going on. If you're a smaller clinic, they don't give a . If you're a higher clinic that's paying like \$15,000 a month, they're going to put a lot of resources into you. So basically, there's like a ladder of value for each client, you know? Okay. So it's not doing it for the right reasons. So, yeah, I just wanted to tell you that, to know whether you continue with us or not. That's about that. Yeah, I dropped a lot of information on you. I know usually sales calls need to be like, oh, so what you're struggling with? What's your dream? What do you want to do in life? I'm not that type of person. I'm just telling you what we can do, how we work.

15:45 - Hannah

So walk me through, like, what this would look like if I chose to work with you. Like, what would it be that, like, what would that look like?

15:53 - Oriel Mor (oriel.mor2001@gmail.com)

What would you do for me? What would the cost be, et cetera, et cetera? Okay, so I'm going to just walk you step-by-step by how it's going. So once you start working with us, first of all, we have the onboarding form. We're going to send you an onboarding form. It's to take like 10 minutes to fill out with all the information that we need about your business. After you fill that out, there's seven steps that you need to do. If you're struggling with the steps, it's all good. We're going to have another call in which we're going to take care of everything. We are creating the foundations from a platform called Go High Level.

16:26 - Hannah

Are you familiar with this platform?

16:28 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, So it's basically a CRM. It's the strongest CRM on planet Earth. Honestly, it's unbelievable. And we're going to work from there. You're going to have automations. You're going to have a pipeline. You can manage the leads from there. We can create the website, like the landing pages from there, even though I'm probably not going to use it for that. And we're just going to basically manage everything through there. We're to have a whole training sent to you to go over how to use it. They have an app and all that stuff as well, okay? We are then going to also send you scripts for ads. Okay? Scripts for ads. The most important part, because we mostly love to work with videos. We can also start with static ads as the one that you have here. We usually don't want to do that unless the clinic has very good content. So for example, if you have pictures with patients or pictures of the team, and then we get pictures that are just authentic, things that are authentic and show your clinic's value and, you know, how you guys operate and all that stuff to be human, okay? But we mostly work with video. Then you film the videos, okay? If you have trouble or anything, you can just tell us. We hop on a call. We are

editing the videos, having captions, all that stuff. Then we upload the videos. The goal is to go live within seven days after you have the training, all the automation set up, all that stuff. And then we monitor the results every two weeks. We are working on the results like we're seeing the ads every single day. But every two weeks, we're going to have a call and analyze the data. Okay, how many leads did we get? What's our cost per lead? What's our cost for booking? How many people didn't show up? Why did they not show up? What can improve? We're going to see where our bottom... And see where we need to optimize to get the lowest cost per acquisition that we can. So the lowest cost per acquisition is basically getting the patient in-chair. We want to get the cost per patient in-chair to be the lowest as possible. That's what we optimize for. We do not care about leads, we do not care about likes, we do not care about people that comment, we do not care about shares, we don't care about any of that. The only thing that we care about is conversions, making sure that people come to your clinic, you treat them, you profit, we profit, we help people, and that's it. Very simple. Yeah, so does that make sense?

18:37 - Hannah

Yeah, it does. So this is all, it's all for ads, obviously, all Facebook ads.

18:42 - Oriel Mor (oriel.mor2001@gmail.com)

All Facebook ads. We, I'm thinking, I'm thinking about incorporating Google as well. I honestly hate Google. With Greenbrook specifically, they have a lawsuit with them right now, because a third of their clicks on their ads were fraud, bots. And they're spending hundreds of thousands of

19:01 - Hannah

Yeah.

19:02 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. stuff. So I'm not a fan of Google. We're mostly doing Facebook and Instagram ads. We also want to incorporate TikTok, but they have strong, like, horrible policies. And also YouTube for Google, that's like a different part of Google. But we mainly use Facebook ads because they're the most effective. When you educate people, you have the right funnel in place, right automations, and the right follow-up process. It makes it easier, you know, to just get results from there. Okay.

19:27 - Hannah

Yeah. And what is the cost?

19:28 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So the way that works is very simple. We have the first month, we have only a setup fee. There's a retainer and the setup fee. do not charge a retainer for the first month because you're

actually one of our first 10 clients if you are going to join. I'm to be completely transparent with you. And the setup fee is \$9.97. From the second month, then we have two options for a retainer. Option number one is a lower retainer of \$500 plus \$100 for every booked cost. If the consultation does not show up, it's half to 50, so that's a more performance-based model. And the second model that we have is just a flat retainer of \$1,500 if you want stability. Because if we're going to get you 30 consultations a month, you're going to pay us \$3,500. But if you want stability, you can also work with the retainer. And also, by the end of the second month, if you are not happy with the results, we are either going to work for free or we're going to give you your money back. Okay? There are no contracts. You can leave whenever you want. We do not lock people in chains. We do not believe in that. If you love working with us, then you love working with us because we provide you with value. We have a good relationship and all that stuff. So very, very simple.

20:46 - Hannah

Okay.

20:47 - Oriel Mor (oriel.mor2001@gmail.com)

All right.

20:48 - Hannah

Well? I don't think I have any other questions. I just need to do some thinking and some research.

20:57 - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. Okay. So is there anything specific? If you have hesitations, you're to be honest with me, right? You're going to be honest with me about this. Is there any hesitation, anything that does not align, anything that you have uncertainty about?

21:12 - Hannah

I don't think so, I guess. Yeah, I would just really have to figure out if it's worth it, but I guess there's not really any way to do that until seeing if it's worth it by setting it up and seeing if it gets patients into my clinic. But yeah, I just have to think about incorporating the costs and moving forward to that, because as you saw, we do have a pretty good patient flow right now. I would just like to get more patients in for TMS specifically, so I just need to kind of put it into my budget, see if it's something that is doable, and just think about moving forward.

21:54 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so what we can either set up a second call, or we can literally run a Simulation right now of what you're expected to get with the budget.

22:04 - Hannah

And if we hit KPIs, how many patients you're going to get, then you're going to see if it's going to be profitable to you, your choice. How are you able to do that?

22:12 - Oriel Mor (oriel.mor2001@gmail.com)

Basically, we're just going to have a simulation or just, I'm going to open up a Google doc, see, okay, this is how much we spend. I'm going to give you benchmarks from what we have for our clinics. Okay. And then you're going to understand like, what's the ideal situation? What's our cost per acquisition needing to be based on the price that you sell to people and based on what you get on reimbursed for insurance and all that stuff, then you're going to see if it's worth it or not to see. You're going to see, okay, how many patients do I need to get from working with you in order for this to be profitable for me? Okay. Do you want me to open up a Google doc real quick?

22:43 - Hannah

Sure. I mean, it's all hypothetical, obviously.

22:46 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, a hundred percent. It is. It is. So I'm going to start with the most easy stat. What is your profit per patient if they do sign up? Profit. Not like cost that they get you because we care about profit here.

23:00 - Hannah

I mean, it depends on if it's a patient of mine, if it's a patient of one of my other nurse practitioners.

23:08 - Oriel Mor (oriel.mor2001@gmail.com)

So what's the percentage of them?

23:13 - Hannah

Like, do you have an average? The business gets 35% of what the nurse practitioners make in my clinic. But for TMS, it's 100 because I'm the only one that does TMS.

23:26 - Oriel Mor (oriel.mor2001@gmail.com)

So do you want to assume to work on TMS only? No, because of your problem? Yeah. So what's your profit per patient with TMS, if they start a process?

23:38 - Hannah

Average daily treatment is paid about \$200 by insurance.

23:43 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. And do you know what's the average lifetime value? Like, how much a patient is worth to you and the whole span of your treatment?

23:51 - Hannah

A TMS span of treatment is 35 treatments plus a third. 35 treatments of \$200 and then a \$400 initial treatment.

24:00 - Oriel Mor (oriel.mor2001@gmail.com)

So 30... So that's your profit, right?

24:08 - Hannah

That's not your revenue.

24:09 - Oriel Mor (oriel.mor2001@gmail.com)

Correct. Okay. So the profit is 700 bucks per patient. So if we run ads, I'm going to tell you the benchmark that we have for a good cost per lead is 20 bucks. And by the way, we can also open up your ads manager and see what's going on there. You probably don't even track data because I saw the website and there's no conversion tracking there from what I've seen. So you don't even, you cannot even know that, but let's say our cost per lead is going to be, that's the, like the maximum that we can usually aim towards. That's going to be the highest approximately 25 bucks. Okay. So cost per lead is going to be 25 bucks. Okay. So if the cost per lead is 25 bucks, we don't care about cost per lead, obviously. Now we want to look at consultations. We want to look at people that showed up and we want to look at people that actually, you know, made it to the clinic. be 25 bucks. I'm gonna give you kind of worst case scenarios here. Let's say that 50% of the people that sign up book, okay? So that means that the cost per booking is going to be approximately 50 bucks, okay? And let's say that 50% of the people that booked are actually going to show up, okay? So that's gonna be cost per show, show of 100 bucks, okay? Now let's say that from the people that showed up, do you have any, do you know what your sales conversion is? Because that differs for every single clinic. You have no idea what's your, okay. So let's say that a third from each person a business person, I'm a physician. Yeah, yeah, okay, I got that, I got that. So let's say that a third of people that come to the clinic actually convert, okay? So that's one out of three people. So that means that our cost per acquisition is three. And what that means, basically, is that for every client that you're going to close, and this is like worst case scenario metrics, you're going to pay 300 bucks to acquire a patient. The only other thing that you need to incorporate here that is going to boost this up a little bit is the retainer that you're going to pay us, which depends on exactly which performance model you take. So if we take, for example, the 1500 bucks a month, let's say I want to, let's take a, let's say that we spend \$1,500 a month on ad. our cost per lead is 25 bucks, that means

that we are, that's 75 leads, is that correct? Right? Or my, my math is wrong. Let's do this. 25, 60 bucks per lead. Okay. So that's 60, 60 patients, 60 leads. So we have 60 leads from these 60 leads, have 30 bookings from these. of there Thank 30 bookings, have 15 shows and five closes, five closes, okay? So you're gonna pay \$1,500 a month for that and another \$1,500 for us. So what we need to do here is basically just double the metrics. So that means your cost per acquisition is going to be \$600 because we just, you have the \$1,500 for the ad budget and another \$1,500 that you pay us.

27:27 - Hannah

Does that make sense?

27:28 - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. So your cost per acquisition is going to be \$600. And we can even worsen these metrics, okay? But this is like worst case scenario metrics. But this is what we project to happen, okay? And yeah, you tell me if it's worth it or not to even test it out. Because you know, \$600 and you get \$7,500 back, I think it's worth it, let's be honest. So it's very simple, very, very simple. And also if you are not happy with the results, you have the money back guarantee, you know, so.

28:01 - Hannah

But that's if the patients do come. mean, 60 leads is a lot.

28:05 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. No, it's not that much. It's not that much, 60 leads. Not at all. What's the population in your area?

28:17 - Hannah

I have no idea. In Norwood, I have no idea.

28:21 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, so 60 leads is not that much, honestly. We are aiming for a cost of per lead of \$10. Just for you to understand. That's our ideal. And if we have the booking process set in place, we have the automations, we have the calling the patients, you know, reminders, booking them only three days ahead, having the whole process dialed in to make sure that these metrics are high, the cost per acquisition is going to be lower. Of course, everything's an if.

28:50 - Hannah

Everything's an if.

28:51 - Oriel Mor (oriel.mor2001@gmail.com)

Right. But this is exactly what we project to happen. And yeah, it could be worse, could be better. But the question that we need to ask here is It's like, you know what, let's take it into an even worse case scenario here, like the worst case that you can ever imagine. You tell me, what's the maximum cost per acquisition that you're willing to pay that's going to be profitable to you, to your clinic? Like when are you saying, okay, I'm going to pay this cost per acquisition, this is the maximum I'm willing to pay, anything beyond that is not worth the profit that I'm making.

29:21 - Hannah

Yeah, I mean, I don't know. That's something that I would have to figure out on my own, right?

29:25 - Oriel Mor (oriel.mor2001@gmail.com)

I can't really think of that right now on the spot. A hundred percent. So we can, like, you know, we can also simulate that, we can put it at \$2,500, \$3,000, like that's the maximum that you're willing to pay for us to even reach that, that means we need to get 10 leads a month or something like that. That's a 10 leads, if you're getting 10 leads a month, there's something very wrong with either your marketing or your area is just, and market is, is not, is not there. And there's never a problem with the market. Never. The. The treatments for depression are booming. People need you. People need TMS. You have the tools to help people. The market's there. The only thing that needs to be dialed in is the bridge between the product and the marketing itself. You need to bridge these two together. So, yeah, super simple. Super, super simple. So, yeah.

30:23 - Hannah

So what are, like, if I did want to move forward, what are next steps?

30:27 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. So, tomorrow is Yom Kippur in Israel, which means we are not going to work for Wednesday and also Thursday. So I would not want you to pay the full setup fee up front. The only thing that you need to do is put an I'm serious fee of \$100. After that, I'm going to send you a contract. You can go over the contract, tell me, I don't like this. I want to change this. I don't understand this. We're going to hop on another call, okay, to understand, okay, what do you want to change? We're going to change the things. After that, tell me, okay, Oriel, I'm good with that. Or either Oriel, I don't want this. If you don't want this, you're going to get the \$100 back. And if you do want it, we're going to pay the rest of the setup fee, and we're just going to start creating the ads. Our goal is to go live within seven days of us launching. And yeah, it's as simple as that. Nothing complicated.

31:17 - Hannah

Okay. Well, like I said, I'm going to think about it, and I'll contact you once I do. So you are out of office tomorrow and Thursday. Yeah, that's correct.

31:31 - Oriel Mor (oriel.mor2001@gmail.com)

Friday. Yeah. And also it gives you a time to think, know, 40 hours. That's a good time to think.

31:37 - Hannah

Yeah, definitely.

31:38 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. And by the way, if you, I think that I'll be honest with you. think that I hate is chasing potential clients. So if you do decide, if you do decide that, ah, I don't want to do this, this is too risky, or that you don't feel like ready to do any of that, just tell me, Oriel, I've decided to not move forward. But, ah, don't ghost me or anything because I just, I hate these things. I'm not a fan So do you want me to touch base with you on Friday?

32:05 - Hannah

Do you want to send me a message on Friday? How do you want to do this? Why don't you message me on Friday? That's probably the best way to go about it. Because I am very busy and I'll probably forget. But I will definitely give you a yes or no answer by Friday.

32:20 - Oriel Mor (oriel.mor2001@gmail.com)

100%. And I'm going to do a bit of research on your area. I truly do believe. Do you have a problem being on camera, by way? No. Okay, great. So yeah, I truly do believe that you can grow your clinic to the point in which you're going to tell me or you'll stop the ads. I don't tell that to people. But it does happen. It happens to me all the time with clinics, people in Israel specifically. But yeah. And also if you want, I can send you a video because you don't know me. We've been on this call for 30 minutes. I have a video that's going over all my clients in Israel. have people that run on \$600 a day budget, \$1,500 a day, like insane budgets. And ideally, I can just go through these results. You can go look. Take a look at them, also to build a bit of more, like, more trust inside you. Yeah, that would be great. So that's about that. This video was for a different clinic owner, so it's going to, he was a male, so I'm going to send that to you. It's going to be the same video, it's going to be for males, so just ignore that. Is that cool? Awesome. Yeah, I'd love to see that. Great, so I talked a lot, I hope I gave you, like, do you have any questions, anything that you want to go over, like, feel free, because I did overwhelm.

33:27 - Hannah

I don't think so, but if anything comes up, I'll definitely let you know.

33:31 - Oriel Mor (oriel.mor2001@gmail.com)

100%, so I'm going to send you the videos. If you have any questions, make sure to let me know, and I'm going to talk to you on Friday. Okay, sounds good. Awesome, Thank you so much. Have a good day. You too. Bye bye. Bye bye.

Transcript 3:

Oriel X Ayanna | Data analyzation - September 08

VIEW RECORDING - 65 mins (No highlights):

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y>

0:02 - Oriel Mor (oriel.mor2001@gmail.com)

This meeting is being recorded. How's it going?

0:08 - Dr. Ayanna Williams, DNP

I'm doing well, Oriel. How are you?

0:12 - Oriel Mor (oriel.mor2001@gmail.com)

I'm good. I don't know if I told you that my father has passed and stuff. You said he had cancer. Yeah. Not nice, but it is what it is. He did prepare us to do that. Anyways, no depresso. How are you doing? I'm going to be completely straight with you. As you know, that's how I am. Do you have any idea of your cost per lead, cost per booking, landing page conversion, all that stuff?

0:47 - Dr. Ayanna Williams, DNP

No idea. I have a meeting with them later on today. I mean, I'm getting some interest, but I haven't gotten any bookings yet. So I think we just went live. Maybe two and a half, maybe three weeks now.

1:03 - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. I was trying to look up for your ads. couldn't find them for some reason, even though it was supposed to be pretty simple.

1:10 - Dr. Ayanna Williams, DNP

You're on Facebook.

1:11 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, yeah. I was trying to look at from your page. Seems like it's probably not the same page. Okay, so let's do something very simple. I want to see exactly what's going on with the cost per lead and everything and see what's going on. Like, what's the trend? Because three weeks is a lot of time to get data. So you can share your screen if you want. We can go inside the ads manager and see what's going on there.

1:36 - Dr. Ayanna Williams, DNP

Okay, so the ads manager is in Facebook or is it the platform?

1:41 - Oriel Mor (oriel.mor2001@gmail.com)

Yes, that's in Facebook, correct. How is their communication and everything?

1:49 - Dr. Ayanna Williams, DNP

Are you happy with that? I think their communication is good. I mean, she's been checking in with me once weekly. So we were supposed to have a check-in. And last Thursday, and there was just a scheduling conflict, and we didn't do it.

2:06 - Oriel Mor (oriel.mor2001@gmail.com)

So we're doing it today. That's Ketamine Media, right? Or am I mistaken?

2:16 - Dr. Ayanna Williams, DNP

What's that?

2:17 - Oriel Mor (oriel.mor2001@gmail.com)

The name of the company is Ketamine Media, correct? No, no, no. It's Patient Plus, right?

2:22 - Dr. Ayanna Williams, DNP

Yeah. Okay. So how do I go into this?

2:28 - Oriel Mor (oriel.mor2001@gmail.com)

So you have, in the Zoom, have the Share button. Oh, I can also take control over your screen if you want.

SCREEN SHARING: Dr. started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=156.347113>

It's way easier, like that way. So you can share your screen, and we can just go over it. Cool.

Okay, awesome. So I am going to ask for remote control. Cool. I requested it. Did you see it on the screen? 逃遣 Cel해. If not, want to I Oh, it seems like I already have control. Okay. Yeah.

So you just need to leave your, how's it called? How's the thing called? The mouse. Forgot

completely the name of it. So I can press on things. Okay. Awesome. So it seems like it doesn't want to press. Okay. Anyways, we have the see more button on the left. Press on it.

3:29 - Dr. Ayanna Williams, DNP

Okay. me minimize this.

3:40 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. You have the see more.

3:43 - Dr. Ayanna Williams, DNP

Yes.

3:44 - Oriel Mor (oriel.mor2001@gmail.com)

That's right. Ads manager. Press on the ads manager. Okay. On the left, you have like this table. You have all these icons and you have like this table. over Let's on the left. left. Yep. Yes, the campaigns one. Cool. Okay. So, oh, yeah, you're on a webinar campaign?

4:13 - Dr. Ayanna Williams, DNP

I guess so.

4:17 - Oriel Mor (oriel.mor2001@gmail.com)

It's not I guess so. I don't mean I guess so.

4:21 - Dr. Ayanna Williams, DNP

Oriel, listen, this is not my forte.

4:26 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, I'm a doctor. No, yeah, a webinar is like a live event thing, which is very good if you run that, but I don't think you actually do. It's prerecorded. Oh, oh, so you have a recording. People just go, okay, that's cool. Okay, I understand. Okay, so can you drag, do you have this like grayish line? For some reason, it doesn't let me do anything.

4:49 - Dr. Ayanna Williams, DNP

Oh, like this.

4:50 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. Oh, wait. Oops, you need to reshare your screen. I accidentally stopped sharing it. I'm sorry. But don't I

SCREEN SHARING: Dr. started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=300.388779>

Yes, drag it, and, okay, so seven meta leads, go to the right, and see what's going on with the, okay, cost per lead, 56 bucks, you've been running for three weeks, okay, so we have the top right there, you have, you see this month, so click on that, on the this month one, yep, maximum, on the left, bottom left, okay, cool, now let's go see the, now, when you hover on results from five campaigns, hover over on that, and then it's gonna show you like, a view, a mini view results thingy. Where? Hover over the results from five campaigns, yep, press on view results. View results, what is that? on the left, you can see you have like this little eye icon, nope, nope, go down, scroll down, not scroll down, yes, results from five campaigns, right, yep, view results. Boom. Okay. So it seems like since you guys started, if I'm not mistaken, it seems like you have spent 1,400 bucks on ads. From that, you got 17 leads. These are not good results, Ayanna, especially for a webinar. It's not that people, like, is it a landing? It's not even, do people sign up on a Facebook form, it seems? It doesn't even seem like they sign up on a landing page. Is that correct? Oriel? You have no idea.

6:47 - Dr. Ayanna Williams, DNP

This is the formula they said they used. This is the people that the other doctor that I met, Dr. Hawkins, he said he used them, he had good results, so I gave them a try.

7:00 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. Can you give me the remote control again, see if it's going to work? Okay. That's annoying. Do you have AnyDesk? Any chance?

7:23 - Dr. Ayanna Williams, DNP

What is it?

7:24 - Oriel Mor (oriel.mor2001@gmail.com)

It's a platform to control remote screens. No, probably don't have it. Never mind that. Just trying to make this more efficient. Can you, you have this little checkbox. As you can see, we see this little checkbox. Can you checkbox the two campaigns? Like the Nirvana Webinar Campaign 1 and Nirvana Webinar Campaign 2.

7:44 - Dr. Ayanna Williams, DNP

Can you checkbox these two? Nirvana Webinar Campaign 1 and 2 and then unclick Instagram.

7:53 - Oriel Mor (oriel.mor2001@gmail.com)

That's correct. Exactly that. And then you see you have ad sets for two campaigns. You have this in the, like, in the the If you take your mouse up, it's going to be right there, like, yep.

8:08 - Dr. Ayanna Williams, DNP

Okay, ad sets for two campaigns? correct.

8:11 - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. And, okay, these are a lot of ad sets. Checkbox, everything. Like, you have this... Everything from... No, yes, you have the upper one. Next to the on and off, it's going to checkbox everything once you click on it. Yes, good. Now you see ads for 10 ad sets on the right.

8:35 - Dr. Ayanna Williams, DNP

Mm-hmm.

8:39 - Oriel Mor (oriel.mor2001@gmail.com)

So press on that. Okay. press on the ads for 10 ad sets. That's correct. Good. Now checkbox everything again. Press on this little image icon. It's, like, very small. It's next to the A-B test button to the right of it.

8:56 - Dr. Ayanna Williams, DNP

A-B test button.

8:58 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, and to the right of it, there's... Like an image icon.

9:03 - Dr. Ayanna Williams, DNP

Okay.

9:05 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. Good. Okay. So, okay. It doesn't let. Okay. So press on the share button. There's like this, uh, arrow. See the arrow on the, on the top, right? Yep. That's right. And Facebook posts with comments. Nope. Not that found that Facebook posts with comments. Okay. This is the line. Go back to the ads manager. Okay. Press on the X. Just exit it. Yeah. Go back to the asset level. That's that what? So the assets. That's it. Just like.

9:53 - Dr. Ayanna Williams, DNP

Yes.

9:54 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. Select it. Press on it. Just press on it. Cool. Now uncheck everything. Just check the first two that are turned on. Cool. Now go back to the ads.

10:09 - Dr. Ayanna Williams, DNP

Add selected one or add selected?

10:11 - Oriel Mor (oriel.mor2001@gmail.com)

Yes, add selected one.

10:13 - Dr. Ayanna Williams, DNP

That's right.

10:13 - Oriel Mor (oriel.mor2001@gmail.com)

This one. Yes. Now, okay, so it seems like these are the only two ads that they're running. For some reason, it doesn't even let me see the ad itself. Can you press on the preview again, like this little image icon again? No, that's so weird. Let's try the other one. Let's try the other ad. Because it's same one. Yes, that's right. And checkbox little icon. See if this is going to work. Okay, so weird. Press on the share button again. Go to Facebook desktop feed.

11:00 - Dr. Ayanna Williams, DNP

Let's for On Facebook, Facebook desktop feed. Facebook desktop feed.

11:07 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, doesn't let us even see it. Okay, go back to the ads manager, let's try something else. No, no, it's on the right, right where we were, to do all of that journey that we did. Go to the tab of the ads manager on your top right.

11:27 - Dr. Ayanna Williams, DNP

Oh, okay.

11:28 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. Cool, now press on the share again. And share a link. And now let's go to the preview, press on the link itself. What do you have in the preview for people logging in on Facebook? Yes, press on that. Okay, cool. preview. Got Yeah. Yeah. Yeah, Here So I understand why we cannot see or... Okay, they're using their Facebook page. I understand why this doesn't work. Yeah, these ads are just not doing the job that they're supposed to do. It's very simple. We talked about that in our first or second meeting. Like the way that we use the ads, like the video ads, the messaging. Like these caps, this AI image thing, it doesn't add value to anybody's life. It just doesn't because of the simple fact that if you say that there's a breakthrough depression

treatment, and people are labeled as treatment-resistant depression people, they don't care. They don't care whether, you know, all these things. You need to explain to them exactly what makes this a breakthrough treatment. Why it's better than other things. breakthrough routine Show them studies. Show them results. You have results. You literally have testimonials and all that stuff. And they probably didn't even leverage that. So, there's many, many things that can be done with the ads, the creative.

13:13 - Dr. Ayanna Williams, DNP

Also, you need to use your own page.

13:14 - Oriel Mor (oriel.mor2001@gmail.com)

I don't know why they don't use your own page.

13:16 - Dr. Ayanna Williams, DNP

Hold on one second. Oriel, hold on one second, please. Okay, I'm doing it right now. I forgot when you left. What's that? Okay, I'll send it right now. Thanks. Bye. Love you. Okay. So, they're using their page.

13:39 - Oriel Mor (oriel.mor2001@gmail.com)

They're not using my page. Mm-hmm. That's correct. And just for you to understand, I don't want this to come out like I'm shitting on them, okay? I don't want this to be anything like that. That's extremely important for me to note. I'm just telling you from experience, their ads, they're just not good. That's a fact, okay? I can show you another clinics ad.

13:59 - Dr. Ayanna Williams, DNP

I have... I gotten, you know, I haven't gotten any, you know, lead from them. I mean, I haven't gotten anything that translated into money, basically. So it's, you know, it's not hard to see. I think I'm coming up on, where do I see when it went live?

14:26 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, so go back to the ads manager. Press on the X, X, go to the campaigns, campaign level, press edit on the first webinar campaign. So you have the ability, when you hover over the name of it, hover over the name of the Nirvana webinar campaign. One or two. Over one, because that's the first campaign that they, yeah. Press on edit. You have edit? You have this, yeah, no, no, not name. You have just the edit button. Press on cancel. Yeah, edit. You have this like edit kind of pencil or yeah, or yeah. Hold on one second.

15:05 - Dr. Ayanna Williams, DNP

Let me try. My daughter called and asked for some money.

15:08 - Oriel Mor (oriel.mor2001@gmail.com)

It's all good.

15:08 - Dr. Ayanna Williams, DNP

It's all good. Let me transfer her money for her so she can. about her day? Thank you. Verify to 4 0 7 3 2 4 5 4 6. ? Thank you. Okay, all right, so here, and I go to, okay, edit right here.

16:29 - Oriel Mor (oriel.mor2001@gmail.com)

Yes. Yes, the little pencil, and now, press on the X, you see this little clock icon on the left with the little red, not red, black, black, yeah, press on it, see history, cool, activity types, press on activity types, activity types, all, oh, actually, we don't even need to look at it, no, it got published on the 15th of August. very much. On the 15th of August. So basically almost a month. You got in a month, you got 17 leads in a month, which is, honestly, Ayanna, have to be, you know, I'm honest, it's trash. Okay? Like, that's not, no. And there's also like systems that need to be implemented. Like I told you, like calling leads within five minutes, make sure the booking, the booking times is like three days ahead max, giving them value, you know, all these things using a landing page that you got. The thing is, it's not that you got 17 leads from a landing page. Okay. You got 17 leads from a form on Meta, which means people don't even leave Facebook. Okay. Just for you to get some context, I can share my screen and show you. We have a clinic in Arkansas that we started working with. In a month and a half, we got 140 leads from a landing page with filtering questions. Which means it's only people that are diagnosed with depression. We know how many medications they take. We know if they've had an adverse reaction to ketamine in the past. know all these things. The cost per lead is 10 bucks. 10 bucks. And it's not just leads. Okay, that's again the messaging. And also he's doing everything I'm telling you. I'm telling you to film videos as he's filming them. He has a front desk team. They're optimizing things. Like they're on top of . Which, you know, people need to be on top of . I don't know what they do in the check-in calls, but... That's what I was fearing the most. Okay, I didn't...

18:34 - Dr. Ayanna Williams, DNP

So what's been happening is I get a message and I try to basically respond to the message. I came up like with a text message. So if I'm with the patient, I can just respond. And then I send them an email and I try to reach out by phone. But a lot of times they're like, oh, if I call them by phone, they're not... They're like, oh, can you call me back? And I don't know, maybe I was wrong. I don't have... I Like, I don't have time to just run around and call people. So maybe that's just on me because, you know, I don't have the staff. I mean, to do that, but to me, like doctors don't chase down patients, you know, patients come in because they need help and they're, you know, my, I think my, I feel like my job is to make it easy for people to get help by having a system in place. Okay. Here's the first thing, fill out this. We can verify your insurance. Okay. You, if your insurance is verified, this is the next step. Let's get you scheduled. I feel like that's my job. Job of the clinic is to make the process easy, but calling people like I'm some telemarketer when I was 20.

ACTION ITEM: Attend 2:30 PM meeting with Patient Plus rep. Discuss low ad performance, consider contract cancellation. Use Oriel's talking points.

- WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=1180.9999>

Like, I don't know. I just, I'm just not really feeling it. Um, so I may just, I don't know. I have a meet, I have, I'm supposed to meet with her today. Um, so, you know, I'm, I definitely. I definitely planned on telling her I wasn't really, you know, all that enthusiastic about, you know, what has transpired, because it hasn't led to any money, it hasn't translated to any money. I've spent money and I'm not making any money. And so that's, that's not, that's not sustainable at all.

20:19 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I understand what you're saying. Now, the thing is with calling the leads, with calling the leads and all that stuff. First of all, there's two things that need to be in place. One thing is you need to send the personalized message right after they come in. You need to send them a calendar link to book with your calendar. That's the thing that we do. Like there's 40% of people book on their own. And if they don't book, okay, you want to have follow up, you know, messages in place. And also, I think you should have, didn't you say that you have like a, um, an intern that can call the leads herself?

20:53 - Dr. Ayanna Williams, DNP

Yeah, I do. But she's back in school now. That's my daughter, you know, call it like that. But I mean, she's high school. So now school is back in session.

21:03 - Oriel Mor (oriel.mor2001@gmail.com)

So she's not really as available.

21:06 - Dr. Ayanna Williams, DNP

But that's why I came up with like a text message, like that I could send right away. So that if I'm even if I'm with the patient, I've got a pinned text message. And it says, thank you for contacting Nirvana Mental Health Care. We offer both intramuscular ketamine and spravato, nasal ketamine treatments for depression and other mental health conditions. Each treatment option includes a consultation to determine the best fit for your needs. To learn more or schedule an initial evaluation, please call our office, da da da da da, or visit our website, da da da da da. We look forward to helping you start your journey to mental wellness. So I can just click this, and send it to them.

21:46 - Oriel Mor (oriel.mor2001@gmail.com)

Wait, it's not even automatic?

21:49 - Dr. Ayanna Williams, DNP

No, I have to do it.

21:51 - Oriel Mor (oriel.mor2001@gmail.com)

What? No, Ayanna, this is not. No.

21:54 - Dr. Ayanna Williams, DNP

No.

21:55 - Oriel Mor (oriel.mor2001@gmail.com)

No.

21:57 - Dr. Ayanna Williams, DNP

No. No. No.

21:58 - Oriel Mor (oriel.mor2001@gmail.com)

No. There's, there's platforms that we use for that. What do you mean? There's so many, we're 20, 25. And also for the, for the, um, for calling the leads, there's, you know, there's basically an AI agent that can call the leads and it sounds like a human. You can literally implement that as well. The fact that it doesn't even send the messages automatically, it's not, it's, it's, this isn't, this isn't something they created.

22:25 - Dr. Ayanna Williams, DNP

This is just a way I, this is what I created to be able to respond.

22:28 - Oriel Mor (oriel.mor2001@gmail.com)

So what did they do?

22:31 - Dr. Ayanna Williams, DNP

I mean, I guess they ran, they ran the ads. They, they ran the ads. I mean, they, they responded to the leads while I was on vacation, but there's like a platform. Do you want me to show you the little place where I go to check the leads out and everything?

22:48 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, sure. That would be very, that's extremely important. If I think, if it is what I think it is.

22:58 - Dr. Ayanna Williams, DNP

Thank you. So can I close out this ads manager stuff?

23:06 - Oriel Mor (oriel.mor2001@gmail.com)

No, yeah, yeah, you can close it. Yeah, I got what I saw what I need to see.

23:34 - Dr. Ayanna Williams, DNP

Let me share my screen again.

SCREEN SHARING: Dr. started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=1419.558994>

23:41 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, yeah, let's go high level. That's what I thought. Okay, so they need to be sending, like when people leave their details, they need to be sending the messages automatically. It's possible to do it with go high level. Also, yeah, you can manage leads from the opportunities. Yeah. Yeah. Pipeline, and they also, do you have the app? Do have the app? No. Yeah, so there's also an app in which you can use the app. You don't need to go on your computer all the time. I have like a training on the app itself. If you want, I can just send you that. You can basically do everything from the app. There's automations in which you can do when people are in specific pipeline stages. You can add tags. You can literally call people as well from the app itself. I don't know if you have a phone number on the app. You can call people from the app itself, which is also very important in order to, because you can record the calls. And then we can use these calls as data for the voice AI agent and just optimize it. So there's going to be a point in which you don't need to call leads anymore. The AI does all the work. It books people in your calendar and you just see it. And it sends them reminders and all that stuff as well. So the whole process can be way more automatic. And you're at least going to be way more qualified. I know. Like if you remember like our dynamic from when we talked like two, three months ago, you're supposed to know that when I say things, there's purpose to the things that I say, okay? And I'm genuinely, genuinely telling you these results are not good. You are burning money. You're burning money, okay? And I'm telling you with 100% confidence I can survive my mom's life, my brother's life, everybody's life, my girlfriend's life, and I love these people to death, okay? I would die for these people, that you would get so much better results if you literally started working with me without even paying me money. And the reason that I didn't even take money is because of my own like insecurity, not because I don't know what to do. That's the only reason. And because I wanted to prove to myself that what I've done with people in Israel, I can also do the same thing in the US. And now that I know that these are my competitors, well, first of all, it boosts my confidence like to different levels.

26:00 - Dr. Ayanna Williams, DNP

Listen. Listen. I figured one or two things was going to come out this call. I like you as a person, but I know in part you're gathering information about your competitors. And I don't mind that. I feel like we've had a, you know, I've enjoyed talking to you. I've enjoyed working with you. And, you know, just in general, I don't know you that well, but I like you. I don't mind sharing the information. I mean, I can get something out of it. You can get something out of it because I feel

like you're telling me the truth and you're learning something. But we were going to talk today and I was just going to ask her, like, okay, so when is this supposed to start working? Because, you know, I've already spent about \$3,000. So when is it going to work? Because that's not sustainable for me. That's not sustainable to spend \$3,000 for months on end and just to wait to see if this works.

26:51 - Oriel Mor (oriel.mor2001@gmail.com)

So it's not. Yeah, I agree with you. And I know the steps in order to fix all of this. I have a specific action plan in mind. And I know what to do. So, you know, I'm here.

27:05 - Dr. Ayanna Williams, DNP

So what is your proposal?

27:09 - Oriel Mor (oriel.mor2001@gmail.com)

So, first of all, go on the call with them today. See what they propose. Honestly, she's probably just going to you, okay? Saying, oh, we need more time to optimize or blah, blah, blah. But no, I've seen the ads. I've seen the copy. I understand. I know the, I know it's not, and you say I've, like, hopped on a call to gather information about my competitors and see if there's something I can do. I had a feeling something. I don't, like.

27:37 - Dr. Ayanna Williams, DNP

No, no, no. I'm not accusing you of doing anything malicious or underhanded.

27:42 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, that's important. That's important.

27:44 - Dr. Ayanna Williams, DNP

No, and that's not what I'm saying. I mean, you know, if I went to another clinic and they were doing something that I did, it's just common sense to say, oh, look how they're doing it. It's working or it's not working. So, I'm not accusing you of being, doing anything malicious. I'm not. That's not what I'm saying. I'm just saying, I understand, you know, when you said, oh, let me see. You want to see what they're doing. They're your competitor. You think if I went to another ketamine clinic, I wouldn't look and see, oh, how they did that. I mean, Spravato sent me for training down in Dallas. And, I mean, that was the whole purpose. They want us to see how other clinics are doing it. And I did. I took stuff from what they were doing, a very successful clinic. I can learn things from a successful clinic.

28:33 - Oriel Mor (oriel.mor2001@gmail.com)

You can learn things from an unsuccessful clinic, right?

28:35 - Dr. Ayanna Williams, DNP

So that's all I'm saying. I understand. Like, you can learn something from this. You, like, you get reinforcement. Okay. Yeah, I definitely see that's not what I want to do, right? So that's all I'm saying. I'm not accusing you of being, like, malicious or sneaky or anything like that.

28:51 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, 100%. So, basically, yeah, so I'm going to be extremely direct. My proposal is very simple. You can go on a call. Both of them, the check-in person, whoever, what she does, she's probably going to you because she has no, she, from what I see, they have no real knowledge on how to run ads and what goes through ads and what makes ads successful, which is very sad because that means they don't understand how business works, okay? Because if you run ads like these and you get these types of results and you don't implement insane changes when you see these types of results and the only thing they did was just duplicate the campaign, which is stupid, honestly, it's stupid. Then the results are not going to change because there's a fundamental problem with the way that they run the operation, okay? The thing is that most people focus on the campaign itself or the targeting because you saw they have, you saw they had like 10 adsets and all that stuff. I only use one. I use one ad set, okay? And if I have multiple ad sets, the multiple adsets are not to test targeting, they're not to test the area or the zip code, it's to test creative, okay? It tests different types of messaging to see what works. And if doesn't work, we need to create new and test new to see if the other is going to work. That's how it goes. And on top of that, you need to have automations in place. The fact that they didn't even place an automation for you to send information, to send an automated message to a new lead, and you need to send the message yourself, like you need to do a manual press on something, and even if it's a copy-paste, the fact that you need to do it is stupid. It's just stupid, honestly. So, my proposal is very simple. I believe that I can literally double, triple, or even quadruple the amount of leads that you can get if you start working with me. And that's the main challenge that I have here is, I have this thing which basically hurts me as a businessman, I guess you could say, because you spend so much money and you got basically from them, and they're probably not going to even send you your money back for all of that, then I have a difficult time charging you money. But the thing is, I just have to charge money, okay? So what I can do is very simple. We can have a contract set in place that we want to hit a specific KPI in the first month. We either want an amount of leads, an amount of book consultations, okay? Book consultations in your calendar. If we don't reach that amount, I work for free. It's very simple, okay? And we're going to see exactly, okay? Before we start, we're going to analyze exactly what are the numbers that we need to hit in order for you to be profitable. Because there's a specific type of number, okay? A specific type of threshold that you need to reach, okay? For example, I'm trying to think of an example. So let's say, okay, let's create a simulation here, okay? Let's say that you get 100 leads. let's let's let's From these 100 leads, you get 20 people booking. From these 20 people booking, there's 10 people that show up. Cost per lead is \$15, which means that you spend \$1,500 on the ads. Let's do this in a doc, so it's going to be very simpler.

SCREEN SHARING: Oriel started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=1940.309543>
Just for you to understand how my brain works, okay, business-wise. So, oh, this is not the right one, though. Just a sec. Where is that? Okay, cool. That's it. So let's do a mini-simulation here. Let's say that we do the first month, and we're going to set KPIs, and I'm just doing random numbers here. What's a KPI? Key Performance Indicator. The Key Performance Indicator is basically your north star to understand whether your ads are working or they're not working. Because in the end, we're in business here. We're not in the fields game. We're in the data game. So, we say 100 leads. We get our 100 leads, you spend \$1,500. That means that your cost per lead, CPL, is \$15, okay? Now let's say that from these \$15, we have 20 people that booked, okay? So if there's 22 people that booked, that means 20 booked. Cost per booking is, CPB, is \$1,500 divided by 20.75. Is that correct? Right?

33:28 - Dr. Ayanna Williams, DNP

If you say so, I'm not.

33:29 - Oriel Mor (oriel.mor2001@gmail.com)

You're not on math thing, okay. So let's say that from these 20 bookings, get 10 patients that show up. Okay, 10 patients show up to the clinic, 10 show up. Which means that our cost per show, per CPS, cost per show is \$150. And let's say from these 10 people, you close three people, okay, on the treatment. So that means that the, say, three people closed. That means that we get a cost per acquisition, which is the... The most important number in your business, cost per acquisition, is how much you pay to close a client, is \$450. Now, what the do these numbers mean, okay? They don't mean jack if you don't understand the numbers in your backend. So, you spent \$450 to get a customer. Is that profitable to you? Based on what we talked about in the past, and that your treatment package is \$3,000, correct me if I'm wrong, something like that, \$2,500 through \$3,000. Yes, that's profitable, okay? So, we want to understand, okay, so if our lifetime value, okay, or say average order, okay, let's do lifetime value, which is how much a patient pays you in general, is \$3,000, which is not really correct because they do have the maintenance sessions and all that stuff. So, it just gets more and more and more, but let's say \$3,000 on the low end. Okay. So, if our lifetime value is \$3,000, how much, like, what's the maximum? What that we are willing to pay to acquire a customer? In your sense, how much are you willing to pay to acquire a customer if your lifetime value is \$3,000? When would it stop being profitable for you?

35:18 - Dr. Ayanna Williams, DNP

When would it stop being profitable for me? Well, I mean, this is to acquire the patient. And then you figure if I sold a \$3,000 package, that's six sessions. So, I mean, just calculating my time, I would want to clear. I guess, like, I would definitely want to clear \$1,500 for each session. So, I'm thinking of it, I'm thinking of it in terms of, like, how much I make. I about \$2.50 to \$2.70. I make between \$2.75 to \$3.05 per session off of insurance. So I want to keep that up. And I don't know if that makes sense to you. So somebody's sitting in my office, they come in for

treatment, a two-hour treatment. I make somewhere between \$2.75 to \$3.05 off of the person. And then for me, what really makes it profitable is if I have three chairs and all three chairs are filled up. So now I'm making for that two hours, I'm making just say on the low end, \$2.75 times three people, \$8.25.

36:48 - Oriel Mor (oriel.mor2001@gmail.com)

That's \$8.25 I've made in two hours. Okay. So let's do a little reset here. So you say that you're getting paid \$2.70 between \$3.05. That's your profit.

36:57 - Dr. Ayanna Williams, DNP

That's your like clean profit, correct? Yeah, \$2.70.

37:01 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so let's time. So the LTV is not 3000 because what an important thing to note with LTV is that we want to take lifetime gross profit. Okay, so you want to take off what you get deducted from it, because the LTV is the revenue itself. You want to look at profit, because that's what you care about. Nobody cares about revenue, if you don't have any profit. So let's say that it's 290. Let's put in the middle 290×6 . That's approximately 17, 1750, something like that. Yeah, 1750. 1740. Let's do 1750. Okay, so 1750. That's your profit. So from that, and that's for one person. Yeah, let's just look at the LTV from a one person perspective. If you fill out three chairs, great, but we're still looking at the profit per person. That's what we care about. Because in the end, it's cost per acquisition per person, not per three people. So 1750, that's your lifetime value. So when is it going to be profitable for us? Like, what's the maximum amount that you're willing to pay to acquire for us? That's the simple question. And if you say like, Oriel, listen, I don't want to get over a CPA of 700 bucks. Over that, I'm making \$1,000 profit. Anything less than that, it's not worth my time. Because in the end, you want to take off the CPA. You want to take off the CPA of the 450, and that's going to be \$1,300. And now you divide that by six, and that equals your profit per session. Okay? That equals your profit per session, which is approximately \$220 of profit per session. And another thing that you need to include is the money that you're paying me. You're also paying me money to run your ads. So you need to take that into consideration as well. So in the end, you see, if you don't look at your numbers religiously, you can lose so much money. Just because you don't understand the numbers. Yeah. And that's what people don't understand. And that's what I'm trying to communicate also to clients in my school. I understand business. I don't care about Facebook. Okay. I need to, I want to understand what's the KPI that we need to do and what's, what are the actions that we need to take in order for us to get there? And that's it. It's very simple. People don't work like that. Okay. And I honestly, I thought that because this guy in Texas, like you were really like, they, they really, like, he talked really about how they helped them and everything.

39:25 - Dr. Ayanna Williams, DNP

I was like, maybe they do know, they do know what they're doing. You know?

39:29 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah.

39:29 - Dr. Ayanna Williams, DNP

I was like, .

39:32 - Oriel Mor (oriel.mor2001@gmail.com)

But it seems like they don't, it seems like they just don't.

39:35 - Dr. Ayanna Williams, DNP

So this is what we need to do.

39:41 - Oriel Mor (oriel.mor2001@gmail.com)

We need to look at. So this is what I was trying to say to tell you, I'm going to do the simulation because this is what we're going to look at before we start running. Okay. What's the maximum number of profit that you want to have? Like, okay. You say, Oriel, I don't want to get anywhere off \$175 a session profit, anything less than that. That's not worth my time. That's completely fine. So we're just going to optimize. It's based on this number. This is what we're going to optimize off. And in the end, what we want to do is you can see we have 100 leads, 20 booked, 10 show up, 3 closed. We want to make sure that we optimize these numbers too. Okay, so why from 100 leads, why did only 20 book? Why not 50? Why did only 10 people show up? Why is it not a 70% show up rate, 80% show up rate? What are going to do to increase that? From these people that closed, why could we not get the closing rate higher? What are the objections that they have? What are the patterns that they're going through? Like, is it the offer? Are they scared? Do they have uncertainty? Like, what's going on there? What can we do to improve these numbers and optimize them all the time to make sure that we get the CPA down? And also on your back end, you want to make sure that you get your base LTV, which is, you know, 1750, and you want to make sure that it always grows. So you have six sessions and then you do like a maintenance session once a month. And then your LTV keeps on going, which is like, basically, like, uh, You want to create a mini subscription army of, for example, 30 people that pay \$200 a month, you start the month with \$6,000 in your pocket before you even got your new patients. You see, this is how you want to think about business. This is the right way to look at things. You look at numbers and you see, okay, how do I make each customer more valuable? And how do I get my CPA down? And how do I optimize everything in between to make sure that I, you know, make money? Because that's what we want to do. We want to make money and help people. These are the two main purposes here. And we optimize based on these goals. And that's it. So, very simple. I'm pretty sure that if you're going to hop on the call with her, she's not going to be showing up all these numbers and trying to understand them.

ACTION ITEM: Review contract with Patient Plus, check cancellation policy.

- WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=2510.9999>

41:54 - Dr. Ayanna Williams, DNP

I just want to see what, I mean, I'm going to see what she has to say about why the performance has been so low. And, um, You know, I, I know that, um, the contract is just month to month to look at the contract and just see what my cancellation policy is with them. Cause yeah, I don't want to do, I don't want to spend a bunch of money next month and get nothing because I mean, it's already, it's, things are just, I just, I'm, I'm already just barely hanging on. And you know, I'm, I need to get to a point where if I'm at least making enough profit, I need to hire really sometimes I need to, I need to really hire another assistant. So it doesn't have to be my daughter. She's a high school student, but you know, I really need an assistant, somebody that really take things off my plate, but I kind of need the revenue to, to make, make that jump. So, you know, it's like, uh, it's like, uh, you know, when, when do you, when do you leap off the cliff that's crumbling beneath You know, leap to another cliff, you know, that you're hoping will sustain you, you know, so it's just, that's been the only thing. Anyway, I'll just show you right quick this guy. This is who the guy was. I never even got to talk to him that I met when I went to the training.

SCREEN SHARING: Dr. started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=2599.589413>

So he's already got, he's already got two clinics. He's got two clinics down in Texas. So, I mean, he's doing really, really well.

43:35 - Oriel Mor (oriel.mor2001@gmail.com)

We can look at his ads if you want. I don't know if they're running ads from their page as well for him. First of all, you can see his website. They probably did not do his website. I don't think that by the, by what I saw, like the impression that I got, I don't think they did his website. We can look at his ads. So if you scroll down, here's a little hack for you. So, scroll down to the bottom of the page. Now they're supposed to be... Okay, hack is not going to work. We don't have his Facebook page. So scroll up and go open up. No, let me do this. Okay, so let's go Hawkins. Okay, so let's see if they have a Facebook page. Doesn't seem like they even have a Facebook page, which is interesting. Oh, no, that's not the right one.

44:39 - Dr. Ayanna Williams, DNP

Jermaine Hawkins with a G. He's a D.O. out of Texas.

SCREEN SHARING: Oriel started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=2690.411225>

44:44 - Oriel Mor (oriel.mor2001@gmail.com)

Let's see. I'm trying to... Let me share my screen. I want to share what I'm doing as well. So, okay, so this is his website. I wonder who built the website. Nobody didn't show who built the website. They have a little box. Here, which is cool. I wonder if he has, okay, so another good thing that he has, which is important, he has a blog, which really helps with his SEO. Is, patients do this? Do they do that? Or, I think you should talk to him, honestly.

45:21 - Dr. Ayanna Williams, DNP

They didn't do anything with my website.

45:24 - Oriel Mor (oriel.mor2001@gmail.com)

So yeah, ask this guy, talk to him, say, oh, I see that you have a blog on your website. Like, who does that blog for you, all that stuff. Because you can see, the thing is, it helps with SEO, because when people do search up for it, it's gonna help people get to you organically. I specifically, that's a weak point for me. Okay, that's a weak point for me, SEO. I really need to get with the SEO and AI, because you can do SEO with AI, and it can just get insane results and stuff. But I haven't had the time to actually dive into that. Well, that's a lie, I did have the time. It's just not in my priorities. So, I wanna see his ads, and see... If it's from his, it's from his page, or from their page. Hawking Psychiatry. Did I write Psychiatry right?

46:24 - Dr. Ayanna Williams, DNP

Yeah, you put Psychiatry Hawking.

46:30 - Oriel Mor (oriel.mor2001@gmail.com)

Oh, Hawkins.

46:31 - Dr. Ayanna Williams, DNP

Oh yeah, yeah, Hawkins.

46:35 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, so let's see. That's not him, right? Yeah. And you see, oh my God. This ad though, this ad is unbelievable. I actually had an ad for myself that on this ad. Like this is one of the ads that I'm running right now. I don't know if it's him though. don't think, no, that's a different one.

46:58 - Dr. Ayanna Williams, DNP

That's a different one. Are you trying to find him on Facebook?

47:02 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I want to see Specialist Specialist.

47:18 - Dr. Ayanna Williams, DNP

Here it is right here. found it.

47:22 - Oriel Mor (oriel.mor2001@gmail.com)

Are you found his Facebook page?

47:25 - Dr. Ayanna Williams, DNP

I don't know if it's, but it's an ad for him.

SCREEN SHARING: Dr. started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=2857.324574>

47:29 - Oriel Mor (oriel.mor2001@gmail.com)

Oh, really? Okay. Share the screen. Let's see that. Peak logic. Hmm. Oh, yeah, it is his. Ah, no. No, that's a different page. Okay. Go up, go up. Scroll up, scroll up. Let's see what's going on. Um... Okay, no, so peak long... I think it's like a like a TMS provider. Yeah, it's a TMS provider.

48:08 - Dr. Ayanna Williams, DNP

Hawkins psychiatry would now be offering personalized, repetitive.

48:15 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it doesn't seem like he has a face like a Facebook page. This is a different one.

48:23 - Dr. Ayanna Williams, DNP

That's Aaron Hawkins.

48:29 - Oriel Mor (oriel.mor2001@gmail.com)

Okay, yeah, I don't think they're using his page. I think they're using their page as well for him. And I'm trying to, the thing is, it's impossible to find their Facebook page, because it's such a generic name. Special. Yeah, it doesn't even show up. So. Yeah. . Let's do something else. Yes, I found our page, okay. So that's the page that I wanted. Cool.

49:45 - Dr. Ayanna Williams, DNP

Hold on for one second, please. Your environmental health, can I help you? This is she speaking. Hi, Keith. How are I'm on a call right now. I was going to call you. I was going to call you because I never did get those samples from my new medical office. So I was going to see if you could. Okay. Okay. I'll call you back when I get a chance. Hey, when you call me, call me on my cell phone because I always, this is a patient number. So when I call you back, I'll call you

from my cell phone. So you make sure you just save that. Okay. Thanks, Keith. I'll call you back. Thank you. Bye.

50:38 - Oriel Mor (oriel.mor2001@gmail.com)

So I found, I found her page. Um, I, it doesn't seem like I can't find the other guy's page though. I can't find my ads though. So I want to, I want to actually show you one ad that we have, that we're using for this clinic and it's called that it's called that our ads showing up here.

SCREEN SHARING: Oriel started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=3059.2173> So this is the guy, Hope and Melons. All right, you probably cannot hear the audio. So, all right, let redo this.

SCREEN SHARING: Oriel started screen sharing - WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=3077.461797>

Okay, cool. So this is the ad, again, it's a video ad, extremely long, but it works, like the click-through rate on that is very, very high. So we have this, basically, this is the hook, as I've told you. Is treatment-resistant depression actually untreatable? A new ground-breaking, pill-free treatment that has been studied in over 400 clinical studies is proving otherwise. If you've been struggling, this may be the solution for you. Across the country, millions of people are quietly doing everything right when it comes to treating the depression. They're showing therapy, they're taking medications, they're practicing gratitude, trying to stay positive. But still, the heaviness stays. It's like a thought that will never lift. And the system keeps saying, keep going, adjust the dose, wait it out. But if you've ever done everything right and still feel stuck, you know how painful it is to wonder if healing is impossible for you. Let me say this clearly, it's not that you did not try hard enough, it's that the system gave you the wrong tools.

51:53 - Dr. Ayanna Williams, DNP

Traditional psychiatry was built to manage symptoms, not to resolve them. And just, add a myth. Can't sleep, add another. Still stuck, increase the dose. But that's like turning down the volume on a smoke alarm, while the fire alarm or the fire still burns. And when the alarm finally goes silent, the damage continues. It's quiet, it's dangerous. So what's the alternative? Stop muting the signal and go to the root. Thanks to breakthroughs in neuroscience, there is now an FDA-approved treatment that targets depression at its core. It's called Spravato, a nasal spray designed for people who haven't responded to traditional medications. It's not just another pill. It works differently, and for many people, it works faster. Spravato targets a different part of the brain, the NMDA receptors, which responsible for thought loops, negative biases, and emotional notes. Unlike SSRIs that can take months to start working, Spravato can start working with hours to take care of it.

52:24 - Oriel Mor (oriel.mor2001@gmail.com)

So, basically, you see, this is an educational ad to the max. You want to educate your patients, tell them, okay, this is what you've been through, we understand. Another pill is not going to

solve it, but there is something else. Here's why this something else is going to help you. Okay? And we also have this ad, which is a very, very long ad, just talking about the, you know, the pains and everything. And there's also this guy that I told you about, Alpha Omega Illness, which is, this guy's insane with his ads.

52:51 - Dr. Ayanna Williams, DNP

I love his ads so much. And... Do you do his stuff?

52:56 - Oriel Mor (oriel.mor2001@gmail.com)

The Alpha Omega Illness guy? No. But I would definitely, the way that he does it, I would definitely do it that way. Like, that's...

ACTION ITEM: Attend 12:30 PM meeting with Klara (phone service provider).

- WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=3234.9999>

54:01 - Dr. Ayanna Williams, DNP

I told her 2.30 would be a good time today. I've got two more meetings. I've got a 12.30 meeting, actually, with the phone service called Klarna.

54:12 - Oriel Mor (oriel.mor2001@gmail.com)

Oh, okay.

54:13 - Dr. Ayanna Williams, DNP

Have you ever heard of them?

54:15 - Oriel Mor (oriel.mor2001@gmail.com)

I'm pretty sure. Is Klarna a payment thing?

54:21 - Dr. Ayanna Williams, DNP

It's Klarna. Maybe it's Clara, K-L-A-R-A. I know what you're talking about. They look alike. One's a phone service that one of my doctors uses to send texts and stuff like that and to communicate and to answer phone calls. I have one call with them today just because I am looking for some type of phone solution. That's an ongoing challenge.

54:50 - Oriel Mor (oriel.mor2001@gmail.com)

We have that solution, though. HighLevel has everything. You just need the app. We already, by the way, I didn't delete your account. Your account is still live with me because I had a feeling

that it would not, it wouldn't. I had a feeling that I was like, OK, let's let her start. I'm just going to keep the account, see what's going on. We already have a number there. You just need to download the app and start calling. It's going to record the calls. You're going to have everything in the app, the transcripts, whatever you want. It's very simple. You don't need to look for outside solutions. There's everything in just one place. You just need to utilize the tools in the right way. The tools are there. Thank God, 2025, unbelievable technology. So it's becoming more and more insane, actually. So there's everything that you need is already here. You just need to leverage the tools that are at your hand, which that has not been done up until now. So, yeah, that's as simple as that.

55:45 - Dr. Ayanna Williams, DNP

and then I have everything's going well with the. The next step for me to really be able to expand is to to get to a place where I can see more than the three patients. So now the office space that I have can only accommodate three people. 1, to Thank At a time. And what I'm hoping is that, you know, everything starts growing together. So if I, you know, get a system in place where I'm getting more leads, have more people, I have to have the space to accommodate the sessions too. And I also have to have some changes in the way that I do billing and the billing that I do and stuff like that. So I've been working on getting all of that stuff taken care of because now, I don't know if I explained it to you, but I currently use like Growth Therapy and Alma for, I don't know these platforms.

56:46 - Oriel Mor (oriel.mor2001@gmail.com)

What did they do?

56:47 - Dr. Ayanna Williams, DNP

What's the purpose of that? So Growth Therapy, Alma, and Headway, they're three platforms. And what they do is they court individual providers and they say, hey, come to us, let us credential you. You know what credentialing is, right?

57:00 - Oriel Mor (oriel.mor2001@gmail.com)

For healthcare providers.

57:03 - Dr. Ayanna Williams, DNP

So credentialing is the process of, say if you're Blue Cross Blue Shield, which is a major insurance company, right? You are Blue Cross Blue Shield. I am Dr. Williams. I want to be able to see Blue Cross Blue Shield patients. So I'm going to come to you. I'm going to lay out all my credentials, my training, this and that. And you're going to run a check basically and say, okay, you're verified. You're in network. Now you can see my patients that have a Blue Cross Blue Shield policy. So that process for healthcare providers is called credentialing. So what Alma, Headway, and Growth Therapy do is they credential you, the individual provider, under their umbrella, right? And then they do the billing for you. But then with each credentialed contract,

there's a certain amount of codes that you can use. So if I, if you're my patient and I prescribe a medication, that's one code. So if I give If you therapy and like, just say, if we talked about the passing of your dad and I gave you some tools to manage the grief, that's therapy, right? And that's a different code I would use to show the insurance company what I have done to help you, right? So growth therapy and Alma and Headway, there is a limitation on the codes that I can use. And it requires me with each person to do therapy. That's not a bad thing, but it's a very limiting thing because I can't do therapy with 10 people at once. So each person, I'm limited in how many people I can do at one time. But if I had other codes available to me, I can basically put everybody in a room, give everybody their Spravato, and just basically make the focus be not the therapy piece, but monitoring their vital signs and monitoring them during... And so those codes are not currently available to me, which keeps me from expanding. So that is a really big part of me expanding is getting the contracts under my own name, under Nirvana Mental Health Care. And so I have those other codes so that everybody comes in, they do their Spravato, they put their headphones on, they listen to their Zen music. And it's not about I have to go in there and, you know, talk to them about their specific issues, because as you can imagine, you have to, in order to get, in order for me to get a decent reimbursement now, I have to do 55 minutes of one to one therapy with each person. So you can see how that can be cumbersome. But those are the only codes that I that I have access to now. I have a credentialing company getting me credential with eight or nine. Kind of the most popular insurance panels, Blue Cross Blue Shield and Medicaid and all that stuff. So then everybody can just come in. I document they came in. I took vitals. They sat in the chair. I watched them. These are the vitals. And boom, that's it. And it'll be much easier, much less documentation, and it'll just be better. So that's what I'm working on to try to expand. But then getting the people in the door is obviously that's a different puzzle. Yeah. So you need both things to come together. I need the people to come in the door, and then I need a place for them to sit when they get in the door. That's bigger than the space that I have now, which is good. It's a good start. But if things take off, I'm going to grow out of it.

ACTION ITEM: Text Oriel post-Patient Plus meeting with outcome summary.

- WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=3648.9999>

And I want to grow out of it.

1:00:54 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, that's the goal.

1:00:55 - Dr. Ayanna Williams, DNP

That's why we have a business.

1:00:57 - Oriel Mor (oriel.mor2001@gmail.com)

So, okay.

1:00:59 - Dr. Ayanna Williams, DNP

If I have a meeting with her, I'll text you after I have the And I'll just give you an overview of what she said, and I'm going to let her know I'm not really happy, and, you know, I'm considering, you know, canceling the contract, and, you know, stuff like that.

1:01:16 - Oriel Mor (oriel.mor2001@gmail.com)

Okay. No problem. So, don't let her, that's going to happen. She's going to you saying, oh, we need more time. If she's going to say, oh, we need more time to optimize. If she said, oh, we, that there's a problem with the algorithm. If she said, if she tries, okay, if she tries at this point, I'm telling you, this is what you need to understand. This is like, this is your baseline. You were supposed to have more leads by now. They were supposed to make more tests.

ACTION ITEM: Text Dr. Williams talking points for Patient Plus meeting. Include: baseline expectations, lead quantity, campaign duplication issues, meta lead forms, lack of automated messages.

- WATCH:

<https://fathom.video/share/gU1XNh837GJizzU1BxjzVHyUuztBGm9Y?timestamp=3705.9999>

They were not supposed to duplicate campaigns to get better results. Okay. And they're not supposed to use meta lead forms. And on top of that, they need to have automated messages for you and all that stuff.

1:01:56 - Dr. Ayanna Williams, DNP

So your baseline, just to return send, you were supposed to get better results by now, at least. Do you mind me? Do me a favor and just texting me these talking points so that during the meeting I can tell her and then they'll do that for me. then once I talked to her, I told her 2.30 today and then I'll text you and I'll let you know what the outcome was. But I mean, you know, I'm willing to do something different, Oriel. Like I said, I think we had, you know, I feel like we had a good baseline, good off to start. You were transparent and upfront with me and I was the same thing with you. I think that's why we're back here talking now. You know, we've been, we've kept it, we've kept it, kept it real with each other.

1:02:40 - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. A hundred percent. That's what's important. I know that's like, in the end, that's my, that's the values that are driving me. And then in the end, even if it's going to take, you see what it's been like, what, two months since we talked, time does not matter. Okay. Because I'm, I'm looking at the long game here. There's a very long game.

1:02:56 - Dr. Ayanna Williams, DNP

the long game too. And I mean, I want, I want this, I want my business to grow. Like I really need. My business to grow like it's, I can't stay like this little hamster just making enough to pay

everything and barely, you know, you know, it's just, it's just been like that for a long time, in part, not to give a sob story, but I mean, I'm a, I'm a, I'm a single parent, I have two children, my, my son is now 20. He just left the home six months ago, and I have a 17 year old who's leaving. And as a single parent, my focus has just been pay the bills, make sure I'm feeding my kids, have enough money to send in the camp, put clothes on there, like just, but it's never in 10 years, it's never been focused on my business. And now that they are adults, young adults, mean, they still need my help. Obviously, she's calling me asking me for \$9. So she can get on the bus. But I mean, I'm still a mom, but I don't have to sit here and freaking breastfeed. And you know, they're young adults. I mean, you're a young adult, you know, the transition. So they, they need. I things, but what I need to do is I need to focus on my business so my business can grow so that I can, you know, just get this thing off the ground. I've been practicing for almost 10 years. It'll be 10 years next March. So, you know, it's time.

1:04:21 - Oriel Mor (oriel.mor2001@gmail.com)

It is time. Yeah.

1:04:24 - Dr. Ayanna Williams, DNP

All right. So text me those talking points, and then I'll text you after I talk to her this afternoon.

1:04:29 - Oriel Mor (oriel.mor2001@gmail.com)

Great. No problem. I'm going to put it in the docs and send to you through a message. Okay. If you have any questions, let me know. Okay. Okay. Awesome. an email. Okay. Talk to you soon, Anna. Bye. Bye. Bye. Bye.

Transcript 4:

Oriel x Amir | Deeper Dive - September 16

[VIEW RECORDING - 70 mins \(No highlights\)](#)

[@0:00](#) - Oriel Mor (oriel.mor2001@gmail.com)

How's going? Can you hear me?

[@0:02](#) - Amir

This meeting is being recorded.

[@0:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Hey, how's it going?

[@0:07](#) - **Amir**

Not bad. How are you?

[@0:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Great. Actually, no, not very great. Me and my girlfriend broke up.

[@0:14](#) - **Amir**

Oh, really?

[@0:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm sorry. Yeah, it's not easy, but we do what we can do. So, yeah.

[@0:24](#) - **Amir**

All right. So, did you get a chance to read my email, Oriel?

[@0:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes, I did. I also sent you a message, because I wanted to go over it now, or I could have also responded to it, but I feel like it would be more efficient to go over it now.

[@0:39](#) - **Amir**

Yeah, let's go over it now.

[@0:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, when it comes to the projects, that's the first thing. Do you want me to open with that, or do you want me to touch about anything else in the email?

Because we talked about what happened with all the agencies in the past. Like, you talked about this with me.

Do you want me to touch on it?

[@0:56](#) - **Amir**

Yes, we are correct.

[@0:58](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm. So, when it comes to The project, I sent you the video of me going through the ads of my clients.

[@1:04](#) - **Amir**

don't know if you've had the chance to see it. Did you that to me?

[@1:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I actually sent it to you via SMS.

[@1:12](#) - **Amir**

Oh, really?

[@1:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah.

[@1:15](#) - Amir

Yeah, so it's like a 10-minute video of me going all over my clients. Yeah, going all over my clients' results and all that stuff.

I'll go over it.

[@1:25](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, no problem. So you can see there are all the stats, the budgets that I'm running, all that stuff.

This is the main thing that I'm working on right now. Obviously developing the marketing agency in this space in the US.

And I have another side project, which is my hobby, which is music. So it doesn't have to do with anything.

But yeah, I'm working on music.

[@1:43](#) - Amir

I'm producing music and all that stuff. Oriel, do you have any US clients, any neuromodulation clients in the US?

[@1:49](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yes, I have Greenbrook and I have another guy called Shanz from Hope and Wellness. And another acupuncture clinic, which you can see everything's in the video.

can see the video itself.

[@1:57](#) - Amir

Got it, but I'm... I'm... I was under the impression that Greenbrook's does everything marketing in-house.

[@2:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I'm consulting for them. So I'm writing the ads now and they have people that take care of the, you know, technical stuff of uploading the campaigns and all these things.

I got into the creative side of things, so.

[@2:16](#) - **Amir**

I see.

[@2:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I see what you're saying.

[@2:18](#) - **Amir**

I see what you're saying. Okay. All right. So then how is that going to work? I mean, like, you know, if you want to, if me and you are going to work together, then that's going to be a conflict of interest.

[@2:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, a hundred percent. I agree with you. This is also a thing that I wanted to talk about now, but Greenbrook is a consulting client of mine.

It does not interfere with my agency. I talked with them about it as well. They have no problem with me doing whatever I'm doing.

Obviously there is a conflict of interest, but it's a thing that I'm willing to take and work with because I cannot just, you know, they're a big client.

They can help me a lot in my reputation as well. I'm going to be completely honest with you. And I'm just working.

I'm just, yeah, I'm just working with it. So if you have, if you have anything that you want to bring up and talk about, of course, you can freely do so.

And if you have a problem with that, that's completely fine as well.

[@3:08](#) - Amir

Yeah, I mean, like, you know, so, yes, so that's, so there are three Greenbrook offices close to my office, like, they're my biggest competitor.

And, and obviously, like, you know, just, you know, you are going to be, I mean, if, if me and you, me and you work on the level that I'm thinking about, we are going to be like, you know, just talking about all of these ideas.

And then, okay, so clearly, like, you know what, so you have a creative mind, and then you are going to be coming up with something, but there's a limited amount of, I mean, I was just creating something, I was just like, you know, doing an ad right before this.

I mean, there's a limited amount of things that you can come up with. mean, like, you know, there's, like, there's a limited amount of wording, there's a limited amount of artwork.

I mean, you can be a little bit creative, but, but there's, there's this bucket. And then. You can easily, like, you know, just go from, you know, okay, you know what, I'm creating this for Greenbrook's, and then now I'm creating this for one of the agencies, like, you know, somewhere else.

Majority of the ideas that I have for this practice, for this company, for the marketing company, are basically what I'm using in my own marketing initiatives.

And then, so I cannot disclose that to you, because then you're going to be working with the biggest competitor of me.

[@4:31](#) - Oriel Mor (oriel.mor2001@gmail.com)

100%. So, a thing that I want to say about that is that Greenbrook wants to focus on specific areas in the U.S., okay?

That's what we're going to be, what they're going to be focusing on in Q4, and they're running ads across the entire U.S., so it's not specifically in local areas such as yours.

Another thing that we need that is important to understand is, you talked about the creative and the amount of awarding and all that stuff.

What I like to do with my ads is to create clinics. How do even say that? Clinic unique ads, I guess you could say.

what are these clinic-specific ads? And how can you create clinic-specific ads? Mostly from testimonials. So testimonials ads are not just people filming and say, oh, I feel better.

It's basically the clinic owner itself talking in front of the camera about a story of a patient. And then in the end, there's a testimonial or a bunch of testimonials.

And that's an ad that nobody can steal because, first of all, it's unethical. Second of all, it's basically illegal.

So this is what I do. I don't create. There is a bunch of specific copywriting and specific ads that I do use across clinics.

But even then, I change things up and I can change the concept so it's not going to be word-to-word.

Specifically, I do have an exclusivity contract, though, with clients. So, yeah, I'm trying to always push the clinic owner itself to be on camera and talk.

So it's impossible to steal the And that's the problem with static images. You can always steal these images. But when the clinic owner is talking with your ads, as I've seen, it's impossible to steal them.

[@6:11](#) - Amir

I absolutely understand what you're saying. But still, that's a huge issue. I'm not willing to jeopardize any of the ideas that we have.

[@6:23](#) - Oriel Mor (oriel.mor2001@gmail.com)

Because I believe that we are very different.

[@6:26](#) - Amir

I think our product is going to be unique. And I cannot jeopardize this for somebody who is also doing marketing on the site to just be involved in that.

That's one thing. And then the other thing that I was mentioning in the email is that, so again, I have no idea.

I don't know who you are. don't know what is your market space or how much is your financials or revenue or anything like that.

But whatever it is, I mean, like, you know, I am looking for something. I wanted to be 100% invested in this company and not anything else because, I mean, I'm doing it and I'm a person who works 16 to 18 hours a day.

I think like, you know, I, in the past six months, I've worked every day for 16 to 18 hours, although I was doing clinical stuff, but I think on average I spend 10 hours a day on marketing.

And, and that's something that requires dedication. It cannot be done with like, you know, just, you know, okay, I'm running one company and then I'm running another company.

And then like, you know, that doesn't work because I'm going to be a hundred percent involved or I'm not going to be involved.

And then I'm just going to be overseeing. Because again, I mean, like, you know, I, you know, on top of the marketing idea, I have other ideas.

Like, you know, I want to expand my business. I want to open another practice and you know, want to do all of this.

So I like, I want, I want somebody that I can, as I told you last time to like, you know, just create this and then offload it completely to, to another person who can run this.

And so that is who I'm looking for. And the reason, again, like, you know, I interviewed a couple of people who are, like, you know, very, like, you know, advanced in marketing.

But the problem with all of these people who know marketing is that they don't know neuromodulation. And then I have to teach them neuromodulation.

And that's going to take a lot of time. And, you know, in your particular case, it was different. I mean, like, you you are an individual who knows neuromodulation.

So is that something that, like, you know, potentially would be viable to you or no? You're not looking to, like, you know, just focus on, you know, you're not willing to, like, you know, just let go and then focus on one thing.

Again, like, you know, trusting somebody who you never met.

[@8:42](#) - Oriel Mor (oriel.mor2001@gmail.com)

This is the second time that you were meeting. And then, you know, just go with that. So I'll tell you my goal.

Okay. And I also can open up a dashboard and everything to show you because I created this very nice dashboard with Base44, if you know what that is.

About my goals and what I want to do. Okay. My goal is very, very simple. Okay. I want to hit a certain revenue goal by the end of next year.

I want to make \$75,000 a month. That's my goal. It's possible. I've done my research. I know that I did the numbers.

It's possible. The way that I do it doesn't matter to me. I know that I have the work ethic.

The question is, what's going to be our dynamic? Okay. That's what's going to be our dynamic. What's going to be your involvement in this whole process.

And also, how do you expect us to work together? Because to me, in my eyes, I want you to understand, it's us partnering up.

I'm not a person. In my identity, the identity of a person that works for someone has died a long time ago.

So, if the dynamic is going to be giving me orders or telling me what to work on and not giving me strategic, strategic, I didn't even say that word, strategic.

Strategic, you know, thinking and, you know, control over things is going to be a problem because I sensed and I did some research on you.

And I analyzed our last call and everything. And you're a go getter. I'm also a go getter. This can collide.

Okay, we're both, we're both dominant individuals. Okay, I'm aware of that. And you don't know me yet. So you don't really know that.

And I'm so it's important for me to disclose that as well. Whether, whether I can see that happening 100%.

You have, you definitely did an excellent job. And by that email that you send and all these tools that you asked me about, it shows that you actually know what you're talking about.

Because yeah, these are tools that not everybody knows about. And yes, I'm familiar with 80% of these tools. There's a couple of them in which I don't know, but don't use because there's no need of them for them.

And you know, and a bunch of them that I do not know on like, completely honest with you. So, yes.

I can be invested in this 100%. It just depends on the dynamic. What's the product that we offer? How does our structure look like?

And it's basically that. And I need to know what is expected of me so I know exactly what I'm going inside to because if our goal, if you say on my list, Oriel, our goal is to partner up.

We want to do this. We're going to pitch. We're going to have an MVP, minimum viable product, to sell to people, see how it goes.

Then we're going to sell it to five clinics, see how it works. Okay. We see that there's something going on.

It's working. Okay. Let's hire people. Start transferring skills. Then that sounds like something I would do because in my eyes, I'll be honest with you, you have leverage for me.

You have leverage for me because of the simple fact that you have the expertise and the knowledge and also the values that I'm looking for.

So yeah, the path to me doesn't matter. The goal is what I'm looking for. And the goal is to work with a specific set of clinics, make a certain amount of money.

Okay. And change the world in 1%. That's my goal. Change the world in 1% because that's what you guys do.

And I think we talked about it in the last call as well. So, yeah, I hope this is a, is this clear?

Is this a, is this?

[@12:14](#) - Amir

Yeah, it's very clear. And so, yes, and I agree with you. mean, like, you know, and no, I'm not looking to like, you know, just tell you what to do.

I'm not, I'm not, I actually like, you know, one of the reasons is, you know, just bringing somebody who knows a little bit of marketing.

Beyond what I, so again, like, you know, as I, as you know, I learned this based on experience in this past few years that I've been practicing.

like, you know, I saw patients, I saw the need, I see what works, I see what doesn't work. We can create a structure that, you know, we have, we have certain responsibilities.

I think like, you know, the, one of the first things that we have to think about is, so what are the tasks involved?

Obviously, like, you know, some of these, some of these. Some of the big decisions, like, for example, you tell me, hey, Amir, my idea about, for example, the type of clinics that we're going to be going for is this, and I'm not willing to change that.

This is just something that's solid. It's written in stone. There's no way that I'm going to change my mind.

Then you're going to have, like, you know, okay, so either I agree with it, or I disagree with it, and I say, look, no, I'm not going to work with that ideology or ideation.

Or you say, no, you know what, I am open to basically, like, you know, just changing this however we want.

Like, you know, we can talk about it, we can think about it, we can come up with ideas. The issue is, how are we going to do this in a timely manner?

To get it to a point that it's, it's starting to generate revenue. I mean, so you're saying, so this idea of \$75,000 a year, I mean, looking at the way that you're saying it's so solid, Oriel, if you think that 100%, 100%, you are going to make to make \$75,000 a month at the end of 2026, I would say it's solid.

Like, for you.

[@14:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Like, you know, just go and do that.

[@14:34](#) - **Amir**

Because if you're 100%, if your projection is 100% that you're going to be making that, perfect. I mean, why would you want to even share it with me?

Like, if I had an idea, if I thought my marketing company is going to generate almost a million dollar revenue, and by the end of 2026, I wouldn't want anyone.

So, so that's one thing that I think like, you know, I, that that's just a word of wisdom for you, if you really.

The that you have that product, go execute it because that's something that's not my projection for my marketing company.

[@15:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It is not.

[@15:12](#) - **Amir**

And then the only thing that that's going to do, so for example, if I'm coming with my ideas, you have to think about it.

So I'm coming with my ideas and then you're coming with your ideas. Your ideas are generating \$75,000 a month.

My ideas, I have no idea what's going to generate. It can generate nothing by the end of 2026. So the only thing that I'm going to do is I'm going to be a burden on you because then you have to deal with my ideas as well.

Okay.

[@15:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I understand what you're saying.

[@15:43](#) - **Amir**

But if you think that, so if you think that, okay, you know what? I have a product. I think it's going to work.

You know, I'm going to aim for \$75,000 a month, but there is a possibility that it may or may not happen.

Of course there is. Then you can leverage my, you know, My expertise, my connections, because at the end of the day, if you want to go and I can tell you about how I'm going to be approaching different clients, so when you're approaching the clients, then I can approach them.

I can say, hey, what's up, doc? Let me tell you what I have, see if it works for you.

I think it works really well if you do it that way. What are your thoughts?

[@16:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so obviously the \$75 a month is not set in stone. It cannot be set in stone, because that's business.

It's obvious. The thing is, because of my environment, I am in an environment of a lot of entrepreneurs that run agencies, not specifically in the mental health space, but in other spaces.

It doesn't matter if it's mess spas, auto detailing, roofing, tree removal, doesn't matter. Point is, I am working currently and learning and interacting with people that scale their agencies.

your utilised numbers, define In the span of three months, from \$15,000 a month to \$55,000, \$60,000 a month. So this reality is possible for me.

And I know what comes and I know what is required to reach that. There's a couple of pillars that we need to focus on in order to reach that milestone.

It's basically the way that I see it, and I want to tell you how I see it. There's a winning duo here because of the simple fact that I have a very strong mind when it comes to marketing and understanding strategy and all that stuff.

You have a very strong mind when it comes to understanding clinic owners and also sales. And this is what clinic owners need.

This is all they need. They need the marketing side to be said and understand how it works. And you need someone to lead them in that way.

And they also need to understand how to sell and how to get people to come into the clinic itself.

And you've cracked that. So once you combine these two things, having the tools in place, such as voice AI or hiring.

Or creating a call center, I have all the tools to do that. I have everything. There's a whole module in the coaching program that I have that is showing you exactly how to create a call center from zero to 100 in a month.

That's possible. So the tools are not the problem. The thing is the product. And this is why I also believe it's possible to reach that revenue goal.

Because when the product is right, the LTV is going to be high because people are not going to leave you.

If you have a high churn, then you're not going to reach that goal. Because first of all, people are going to leave you, obviously.

Second of all, it's going to create you a bad reputation. And these are the main things. So when I'm thinking about that goal, I'm thinking about it with a working product, an LTV of at least \$15,000.

At least, that's the bare minimum. And, you know, getting word to mouth at a certain point to play for itself.

Okay, and also content. And when it comes to you, because of your story, one of the things that I'm absolutely, I'm unbelievable at.

It's creating story-based ads, okay? Every single client of mine who I created a story ad for has generated hundreds of thousands of dollars from a single ad, which is their story.

And you have a very strong story, a story that a lot of people can relate to. So in my eyes, if we create just one ad of your story, of you in the clinic working with patients, whatever that is, talking about what you did, showing how many ads you run, showing your expertise, or even running a webinar of sort and getting 200 clinic owners inside there, you can sell 10, to 20, to 30 clinics in an hour.

The only thing that needs to be done is having the, you know, having the, what's it called? How's it called?

The base? Not the base. The foundations to do that. That's the only thing. So, and that's why I'm thinking that, of course, we can start slow, see if our dynamic even works, okay?

Okay. And once we see that we have something that works, scaling is the easy part. Scaling is definitely the easy part.

You only need to have the foundations of the product and the people to actually execute on that. So this is why I believe the goal is possible with both of our skill levels and expertise in two different sides of things.

Because I've seen your ads, and I'll be 100% honest with you, I don't know what your lead costs and all that stuff.

Your ads can be improved. They can be improved. I know that they can be improved. And if you get 60, yeah, so if you see 60 to 70 patients a day from these ads, and I come insider, there's going to be a point, like I have clients that tell me, Oriel, just stop the campaigns.

I cannot keep up with this. So it's possible. It just depends. There's foundations that need to be set in place.

Once these are set in place, everything's easier. And I'm pretty sure that you already know all these things. So I want to know, as well, what you think.

So, I mean, yeah, I mean, yeah, obviously, like, you I understand all of them.

[@21:06](#) - Amir

That's why I approached you. I'm, you know, the only thing that I'm thinking about is how are we going to be like, you know, if you're going to be working together, how are we going to be structuring it?

Would you be open to something like this? Would you be open to having the company, like, you know, I'll be the owner of the company 100% for nine months.

And then we work together 50-50. Financially, 50-50, we're going to, whatever we We make, we take. And then after nine months, if you're still working together and working well, then we divide the company into 50% your equity and 50% mine.

Or 51-49. Okay. That's going to give you some time. The reason for that, Oriel, is like, you know, you also, you know, you, as I said, like, you know, you have a working process for yourself.

You have a projection. And I have a working process for myself, and I have a projection. I really think that, like, you know, if I, if I create Bright Horizons marketing.

And put my face on it, and then the product that I have, because I, again, I've seen the products that are out there.

Not only, I mean, ads are the first thing that happens. I mean, honestly, like, you know, the voice bots and the AI bots that the other companies are using, they suck.

[@22:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

They don't do anything.

[@22:17](#) - **Amir**

You know, I've created a voice AI that, you know, my calendar, my consult calendar for last week was 38 consults.

And it wasn't live person, it was the voice AI that generated 38 consults. So I know that this product, mean, I just have to, like, you know, find the right people to, like, you know, make it what I wanted to make it.

But I am, but I'm not willing to, like, you know, just give it away right away, because I don't know who you are.

I have no idea, you know, what your level of expertise are. You, I mean, you, you, you, you are saying you work with Greenbrooks and one more company, I mean, where you don't have that much experience in, like, you know, in the US market.

don't, I, and Greenbrooks is just so, it is so. Closed box. mean, I cannot find, if you would tell me, like, you know, I work with Clinic X in Utah, that would be easier because I could just go see the ads, like, you know, talk to the guy who's like, with Greenbrook's, who am I going to talk to?

Like, there's no way for me to know, you know, what you're doing. And, of course, like, you know, you can have, I mean, like, you know, again, I'm to go look at the video, but you can have

all these marketing companies back in Israel that are working really well for different types of products.

But at the end of the day, are you working with U.S. neuromodulation clinics? And then, yes, Greenbrook's is a very big company.

And if you can, like, you know, continue working with them, it's going to be very fruitful for you. But that doesn't tell me anything about, like, who are you in a neuromodulation practice in the U.S.

I am going to be that door for you. I am going to be opening that door for you to, like, you know, to just seat all of these patients, not patients, clinics.

And then you are going to be my technical guy. Because it's difficult. mean, like, you know, I know all of these tools, but I don't know exactly how to use them.

have, again, I told you, have freelancers who are doing it. And, you know, it's like, you know, having a technical person who knows exactly what it is and invest it in the company, that's a different story.

So what are your thoughts about that?

[@24:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. So when it comes to the neuromodulation marketing, that's right. Yes, I do need to do more work when it comes to signing clients.

have approximately more 10 sales calls this week. Okay. Because of my dad's passing and all that stuff, it's been difficult for me to continue on with posting the ads and I didn't close clients that I was supposed to close.

Just, yeah, it doesn't look good on paper. There is this one clinic though, in which I went over in the video.

It's called Hope and Wellness Psychiatric Clinic. I went over their results. Hope and Wellness Psychiatric Clinic. They are based in Arkansas.

The owner is Sean's Floors. So I'm running the ads for them. I'm running the video ads. And I also, in the video...

I went through, went over the results and all that stuff, so you can take a look at that as well.

[@25:06](#) - **Amir**

I got them a proc. How many, what type of TMS machines they have?

[@25:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, they're doing Spravato.

[@25:13](#) - **Amir**

Only Spravato.

[@25:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@25:14](#) - **Amir**

How many patients do you see on a daily basis?

[@25:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

On a daily basis, I actually do not know the amount of daily patients that they see.

[@25:22](#) - **Amir**

How many new patients they sign up per month?

[@25:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So per month, it is about five per month, I know, for my stuff. Okay. They do have a problem though.

Yeah. They do have a problem when it comes to their follow-up and also sales process in which I went, I had a call with them about that.

Our cost per booking was approximately 60 bucks, but because they book people so far away, like a week, two weeks in advance, and they don't take credit cards, people just don't show up.

Okay.

[@25:51](#) - Amir

And that's the thing that I have. How does that work?

[@25:55](#) - Oriel Mor (oriel.mor2001@gmail.com)

No. On the phone call, taking credit cards to secure their... Oh, so you do that? I didn't understand the question.

No. Oh, you don't do that? How far away do you book people?

[@26:07](#) - Amir

For the new patients?

[@26:10](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, for people that come to a consultation in the clinic itself, or are you doing Zoom consult the next day.

So you see, that's the problem that they have. When you book, you know, I'm pretty sure I know this, if you book more than four days ahead, people just, you know, throw its drop.

And that's their main problem. So if, and that's the thing that we need, that's another thing that you need to transfer to the clinics, because people don't understand that.

[@26:32](#) - Amir

You know, this problem, you don't know the solution to that problem. I solved that problem. Why do you think I'm sitting here talking to you for an hour and I'm not seeing patients?

You don't know how to solve that problem.

[@26:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That makes sense.

[@26:46](#) - **Amir**

Okay. There's a reason that I can't see. I mean, like, you know, if I, if I want to see a patient right after this, if they say there's a patient outside, they want to do esketamine, do you want to see them now?

I'll see them right after this call. Because I I have any patients.

[@27:03](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is it because of the nurse practitioners or?

[@27:08](#) - **Amir**

So, yeah, I mean, like, you know, obviously it's because of nurse practitioners, but how are you going to do it?

Are you going to, how are you going to make the nurse practitioner so trustworthy that you can delegate and then just sit here without, I mean, nobody comes knocking on my door and 60 patients are being seen on a daily basis.

[@27:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, and this is, this is a skill thing.

[@27:29](#) - **Amir**

The skill set that, you know, that again, I mean, like, you know, yes, the ad is good. Everything is good.

But running a clinic, running a neuromodulation clinic is a different ball game. And then five new patients. And I mean, like, yes.

I mean, if they're signing up five new patients with like, you know, just seeing them two weeks down, that's pretty good.

[@27:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

What is their ad budget? They're running about a thousand.

[@27:54](#) - **Amir**

No, they're only on Facebook. I'm not running with Google.

[@27:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

A thousand dollars a month, approximately. They're also, their area is extremely small. Which makes it a bit harder. It's only 80,000 people in the Facebook radius as well.

Really? So, yeah. So it's a bit, and we're still getting \$11 leads, you know. But the thing is that the lead cost is not the thing.

The lead, it's what you're talking about. Having the process in place to make sure that people, you know, get called right then and there.

And they also get booked a day after, two days after, and not more than that. And yes, you're right.

I do not have the skills to teach people how to delegate that to nurses. I don't. I am aware of that.

And this is also why I said that you have to disleverage.

[@28:35](#) - **Amir**

So. Yeah. didn't want to, like, you know, don't get me wrong. I didn't want to rub it in your face or anything.

I was just saying that the, so the reason that I'm like, you know, very confident in my marketing strategy is that I know it works.

I just have to teach it to someone. I mean, the only thing I need is like, you know, somebody who can handle the technical stuff.

However, you are different because you want to be not only technical, but also you want to be involved in.

In sales and communication with practices, and you do have the skills. The reason I didn't want my freelancers to be involved because they don't know how to talk.

They have no idea how to present themselves. But you clearly have the charisma and the tools that one needs to start making that connection with people.

So I think, again, I really don't think I would go any other way unless you come up with a very different out-of-the-box thinking.

I would really want to work with you for at least nine months to have complete confidence to be a business partner with you.

A business partnership is something that we can create the best marketing company in the field, and then if we don't agree on something, we're going to just break it.

So, because we have disagreements. So, I am not a person who... I tell you what to do, obviously, like, you know, I would guide and be open in terms of my opinions, but I will give you a lot of freedom to do what you want to do, and then, you know, you would consult with each other, and obviously, at the end of the day, I want this product to be a very successful product.

If I think that your idea is better than mine, or my idea is better than yours, I will fight for each idea the same amount.

But I don't see myself, Oriel, working, first of all, in this nine months, there are a couple of things I want to learn.

First of all, are you dedicated enough? Second of all, are you who you say you are? Third of all, like, you know, are your skills to the level that you're explaining?

Again, I'm not saying you're wrong. 100%, I understand what you're saying. not saying that you're lying, but if this is going to be, because I agree with you, mean, like, you know, just if we charge, if you have, that's

It's 30 clients, and then we charge each of them \$5,000 to \$7,000 a month, and I would say our overhead would be one-third of that, so the company will be generating \$100,000.

I see that happening in a year, two years, and very close to the goal that you're thinking about, but I'm not going to be able to just say, okay, you know what, I am going to be giving this a million-dollar idea.

It is a million-dollar idea to give it away because I'm going to get into a partnership with somebody from the get-go.

[@31:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that makes sense. It makes complete sense. Question is, you know, I have two questions, okay? One is what made you, because you said you have a successful practice.

You reached unbelievable goals in a very short amount of time, okay? I've done some, I've done research. You only finished your John Hopkins, John And then, and how John Hopkins is.

[@32:01](#) - **Amir**

How's it called?

[@32:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Resonance. Yeah, Resonance in 2023. So the fact that you got to what you are now in this short of a time span is incredible.

So the question is, what makes you want to focus on opening this marketing company in the first place instead of just, you know, expanding the business that you obviously have working very well now and you crack the code on it?

Because with two or three practices, you can definitely get to \$10 million a year like that. So that's the first question.

And the second question I'm going to ask you after that.

[@32:29](#) - **Amir**

So it's actually a very simple answer to that question. So running a practice is very risky. You know, we're seeing patients.

And with each practice, Oriel, I have, so now I have 11 employees. You need HR. You need insurance. You need to get benefits.

There's, there's with, with. There's drama with patients. You have to, because you need to see a certain number of patients to be able to generate that amount of income, that amount of revenue.

It's not going to be easy. Yes, I know. If I open another office, I mean, I'll go 20 miles toward D.C.

and just photocopy what I'm doing right there, because I know I'm the most successful clinic in Maryland, Virginia, and D.C.

I am going to be, like, you know, creating another copy of mine, maybe not as successful, because we are here, and then, you know, I have to go further.

have to go 30 miles, 40 miles, and I don't want to go that far, because I live here. So the main thing, the main reason is the amount of headache that a practice is going to create for me.

Am I going to be doing it? Yes, but I don't want to have three or four or five. Maybe I have another one, and then that's it.

And the reason for that is because of, you know, internal reasons. Like, know, I have providers, have nurse practitioners that I want to make partner, and then

And, you know, if I want to make them partner, I have to have other clinics so they can be invested in those clinics.

So I have other reasons to do that, but, but finding, and, you know, again, having an entrepreneurship mindset is how do you create a product that generates the safest amount of passive income?

Because look at this, look at, look at TMS and escadamine. TMS and escadamine is kind of a passive income because I'm not involved in that, but, you know, the techs are doing it and then that's it.

So to my mindset is that what can we do that we can put the least amount of work and generate the most amount of, most amount of money.

And with marketing companies, it's the same, I mean, like, you know, after we have a polished system, it's just changing the ads and then like, you making sure the SEO is running correctly.

And then we, and then we hire people to do that. We hire all these like, you Instead of freelancers, we can hire people as full-time employees who are completely invested and they're doing it.

But at the end of the day, what are the risks? Let's be honest, if you have 30 to 40 clients, we are set.

We don't need more than that. And one of the things actually I forgot to tell you is one of the marketing tools that I want to be using in the website and everything and in my sales pitch, I'm just going to be selling that.

I want to make sure that you are a good fit for me, not that I'm a good fit for you.

I mean, do you even worthy of sharing, you know, do you even have the desire to be another Bright Horizons psychiatrist?

Do you have what it takes? So instead of selling to them, want to, my goal is after a year, have the companies beg to be.

Be part of the marketing program, and I think we can do it. mean, as long as, because, you know, what's happening with all, and again, like, you know, that's another thing, like, you know, that I realized.

What happens with, like, Beyond Marketing and Raise4 and whatever, all of these companies, when they go on their sales calls, they're selling.

Oh, my God, I'm going to give you, like, you 100 clicks. My cost per click is, like, \$3. That's not what I'm to say.

I'm going to say that, yeah, you want clients, you want patients on your chair. I can prove it to you that I have patients on my chair.

And if we can do a very good job for the first two or three clients and make sure that they are generating what you are promising, after that is easy.

After that, it's like you don't have to do anything. People are going to beg you to be part of your system, and then you can pick and choose.

And again, I have a system in terms of how am I going to be going toward, like, you know, the clinic.

plan, can't do be Do I am going to pick some of the clinics, and then one thing that you know that I was thinking about is, I'm not going to share that with you.

[@37:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, no problem. Okay, that's cool.

[@37:17](#) - **Amir**

But that's, it was a long-winded answer, but that's the reason for it.

[@37:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, that makes sense. I think that I thought about, which could be even easier on us, and even on you if you want to do that, is I have two business consultants in which I'm working with.

I went over their ads as well in the video that I sent you, and they are partners as well.

One is marketing, the other one is more of a sales product person, and they have a coaching program in Israel for business owners, but it's for all types of business owners.

All types of business owners, and they have this thing in which they, once every three months, they run a challenge, an online challenge.

and get It's a four-day life challenge in which they're going over the four pillars that you need to scale your business, blah, blah, blah.

In the end of the challenge, they sell a \$10,000 product, which is basically them teaching you how to build an insane business, a big business, giving you all the tools, all the knowledge, all that stuff.

That's another thing that can be done. I asked for the syllabus of their program as well and the way that they structure it.

And we can basically create the same thing and not even run their marketing, but teach them how to do it themselves.

So that's another thing that can also be happening. It's less of a passive income for the first three months, but in the end, you're sophisticating the clinic owners.

By giving them the tools to do it themselves, in the end, they're probably not going to have even the time to run their marketing on their own.

They would want, you know, obviously they would want coaching and want people to help them with sales and all that stuff.

Let's Let's Let's Thank So you can create this whole community of clinic owners that are basically working together, having this coaching program, and then having the LTV in the end, like, you know, having a monthly coaching program that they pay \$500 a month for, or whatever it's going to be, and they can hop on sales calls, they can, you know, role play with one another, or it could be coaching calls of me going over marketing, coaching calls of you going over how to train clinicians, or how to do sales, or, you know, show up rate tips, and all that stuff.

So that's also a, you know, a direction that we can go to, and that's, as well, very, very safe, and also creates a very strong brand.

[@39:37](#) - Amir

So absolutely, absolutely, Oriel, but think about it. If we do that from the get go, we're going to put ourselves in a position that you are right now.

We need something that people can trust. We need to, we need to first, like, you know, show that for 10, 20 clinics, we are making them very successful.

I mean, because, I mean, why a busy psychiatrist? The teacher's gonna come and take that course. Well, I wouldn't do that.

I mean, like a year ago, I wouldn't do that. I'm like, you know, are you kidding me? I can do it myself.

You are talking about doctors, Oriel. They have big egos. They think they are the best. They think nobody knows better than them.

And you need to persuade them to like, you know, come take your course. You need to have a big product.

You need to like show that, hey, dude, this works. I know it works. I can prove it to you that it works.

Just, and then they will come. I think that's a wonderful idea. But without a base, they're not gonna do anything.

Even if I show them my success, they're gonna be like, and I did. I actually had a call with a head of marketing for Brainsway.

And because it was actually funny. So I was talking to my Brainsway rep about what I wanna do. And I was looking at just giving some information.

And then I showed. She was interested. was like, you know, can I just see your calendar, see how many consults you have?

And then I showed it to her and she just, she flipped. She was like, I'd never seen this before.

So she was like, you know, would it be possible for you to talk to the head of marketing and then present your idea?

And then I did. And actually what he said, which is very promising, and then that's something that, you we can work on.

He said that if you guys create this product and then like, you know, have it ready for lunch, they would cover the cost of the implementation for the first few clinics that they want to do, which was really promising.

So that, so he, he really liked the idea, but even with that, even with like, you know, just showing them, showing them, like, you know, oh, this many consults, you know what that guy told me?

That guy told me that your product seems to be different, but what if all of this success is you, is me, and you are the one who's like, you know, generating all these luck, you know, because you're talking, because you're training these people.

But what if another psychiatrist is not as motivated? And that made me thinking, what part of this is me and what part of it is actually the marketing aspect, is the product that I created?

And I have an understanding. I think like 30% of this is me and then about 70% is the process.

So even if I show this to a very smart psychiatrist, even I say, hey, look at the number of consults I have.

Look at the number of patients I see on a monthly basis. Look at the number of neuromods that I convert.

Still then, a good smart psychiatrist would question, okay, it's only one. What if it's only you? What if it's you that's generating all of this thing?

So I think your idea is actually a brilliant one, but you need to show that you can do it.

You need to have a flashy product. You need to have a flashy result. You need to be, you know, as I said, you need to get to a point.

We need to get to a point that we are. are not chasing customers. The customers are chasing us. Because the easiest thing, Oriel, that we can do is to have a few very successful clients, very successful, and then just go have a talk at Brainsway or Spravato because, you know, they always want me to go and talk.

They always ask me, hey, can you come give a talk? I never go. But that's the only thing you need to do that, like, you know, hey, you go and, yes, I mean, you know, but now we have a marketing company.

Can we showcase it? They will be thrilled. And then we can go and say, hey, you know what, we have this flashy product, and we only take, you know, it's membership.

It's not like we're going to sell it to everyone. And I can imagine that that's happening in the future.

[@43:46](mailto:oriel.mor2001@gmail.com) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, yeah, I get what you're saying. So definitely because, listen, this is, for me, it's obvious that I look at like some sort of a game, even in a sense, because just as a game, you need to have certain skills and certain tools to get to the final box.

Awesome. Beat the final boss. This is for me, the final boss, because I have all the skills needed when it comes to marketing and all that stuff.

You have all the skills needed in building a practice. Combining these two is unbelievable. It can generate unbelievable results.

So I see this happening. I see this happening. I can put the dedication inside this. This is the project that I want.

In my head, and I'm going to be a bit vulnerable with you here, my, as I've told you, my dad has passed and all that stuff.

And before he passed, there was a huge blow up with my mom, and they divorced. And I lived in my grandma's house for seven, eight months.

And basically, the situation right now is that my mom is living from the money that they sold the apartment for.

Okay. And my main goal is to create a career ending move in a good way. I want I'll be able to make so much money that she does not have to care about money anymore.

Whatever it takes to get there, I'm going to get there. If I can be ethical and help people in the process, even better.

Even better. And in the end of the end, my main goal is to do music. That's my main goal.

To do music. I do electronic music, Sightrans, if you know a bit about Sightrans. I want to produce that and go travel around the world.

I actually have a show on Performer next week in a club in Israel. So, yeah, so this is my goal.

I can definitely see this happening. What you said about within nine months.

[@45:37](#) - Amir

And, Oriel, I'm a man of my word. mean, I know, again, you don't know me. But I pay my staff well.

I'm a fair guy. And what I'm asking and what I'm saying is, I've been where you are. I mean, like, you know, I created, like, you know, before I went to medical school.

Look, I'm an engineer. And then I went to medical school ten years after. There are... The reason that I graduated in 2023 at the age of 37 was because I went to medical school when I was 30.

So I graduated from electrical engineering in 2008. I worked for 10 years and then I decided that I want to go to medical school.

And in this 10 years, I created so many different businesses. I created a real estate business called Fruity Homes.

I created a home renovation business. I created a postal business, but the reason, so what I'm telling you is that I'm just a business-minded person.

And then when I went to medical school, I went with the idea of, okay, you know what? As soon as I graduate, I'm going to have a private practice and I'm going to explode it.

So I understand. And that's what I love. That's what I like. I mean, you need to have this like hunger to be able to make something happen.

So I, again, I think based on what I know from you, again, based. Based on the level of, again, I haven't seen any of the ads, I'm just going based on the videos, based on, you know, my talk with you, based on the things that you've been telling me, I think you can definitely grow if you have the resources that I can provide.

So, you know, I can, you know, I can, I can build a website and I can pay for it.

I can, you know, I can have everything, you know, I can create this business without any, anything you put, you putting anything down.

You know, we can, like, you know, I can pay the guys who, who are the freelancers who can help you.

I can do all of that. And I'm willing to invest in you because that's an investment in you. I mean, like, you know, if I'm saying, hey, take away 50% of the profits, that's investment.

Not only I'm giving you all the, all the baselines, but also I'm giving you all the, all the, the financial aspect of things.

The reason is that, of course, there's a benefit in this for me, because if you are the person that I am looking for, then I'm done.

After nine months, then, you know, we. Have a certain understanding, exactly as you said, I am doing certain things, you are doing certain things, and then we have a clear division of the work that we need to do for this business, and then I can be a business partner with you, but I need to trust you first.

Yeah, that makes sense, 100%. Okay, no problem. The only thing I'm obviously would be worried about is if after nine months we work, we have 10 clinics, and I have the whole marketing process laid out, I have it all SOP'd, and I have everything, you know, you will basically, after nine months, you're going to understand my mind, you would know how my mind works.

At that point, you can definitely bring someone who is under, like a beat player, and take all the profits for yourself, and let the beat player do the work, and just, you know, be with the clinics, or hire a customer service rep, and a customer success rep, and all that stuff.

So, the question is... How can I, you how can I know that if I, yeah, that's the, that's the thing.

[@49:07](#) - Amir

This is the, yeah, you just have my word.

[@49:15](#) - Oriel Mor (oriel.mor2001@gmail.com)

Difficult stuff.

[@49:16](#) - Amir

I know, but unfortunately, I mean, like, you know, there's no, I mean, I thought about the legality of it.

Like, oh, first of all, do you, like, you're not a U.S.

[@49:24](#) - Oriel Mor (oriel.mor2001@gmail.com)

citizen, right?

[@49:25](#) - Amir

No. No. Do you have, have you, have you been here before?

[@49:29](#) - Oriel Mor (oriel.mor2001@gmail.com)

In the U.S., yes, I have been.

[@49:30](#) - Amir

Okay, I, I have no idea how ownership of a company works for a foreign, uh, foreign person, so we need to look into that, but, uh, but, however I thought about the legality of it, it, it just doesn't, like, I don't even know how to word it, because I've worded many documents, many contracts, um, it, you know, like, you know, I would say, if I decide to work with this person in nine months, then he's going to be having 50% ownership of the company.

But what if I don't decide to work with this person? So at the end of the day, I can just say, I don't want to work with you, but what I can tell you is that if this, if, I mean, not 10 clinics, let's say two clinics, if you have two clinics by the end of nine months, and they are, and they're working well, and we don't have disagreements, and we're working well together, and again, I am not going to be telling you, I mean, you work with me for a month, if you, if you feel like, you know, I'm, I'm too bossy, or I'm just like, you know, trying to push my agenda, leave.

But if you feel like, you know, at the end of nine months, if you feel like, you know, we're working together, we're working well, you have my word, I am going to give you 50% of the company, we just have to like, know, look at what, what is the, like, like, what do we need to do in terms of the, the, the legal aspect of things.

[@50:46](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay.

[@50:47](#) - Amir

It's very difficult, it's very difficult to take somebody's word these days. I'm a man of my words.

[@50:55](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, no problem. Cool. Cool. Okay, so, it's the. Is there something that you want to go over? How do you see this morning?

[@51:10](#) - Amir

Yeah, so what we're going to do is, first, I am going to just go over the documents that you sent me.

If you don't mind, please send me a scale. I'm not sure if you have already or not, but send me a scale in terms of the level of your...

Expertise, the level of your expertise in all of those tools that we're using. And if you're not familiar with one of the tools, just look it up and see what it is, and then tell me if you're using an alternative, and then what that alternative is.

[@51:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And that's okay. I mean, we just picked these tools because I picked them.

[@51:50](#) - **Amir**

And then let's have a meeting, so with the two freelancers that I'm working with, I am going to be starting to introduce you to the whole idea of what we're doing.

And then we'll go from there, but still there's a remaining problem, what are you going to do with Greenbrook's?

[@52:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So currently with Greenbrook, until I believe that we have a very strong base here, I'm not going to leave Greenbrook, it's not going to happen.

They're a very big client and they're very nice people, like the people I'm working with and talking with, they're very nice people.

Really? They are?

[@52:31](#) - **Amir**

Yeah, yeah.

[@52:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So once I see that there is a base, we could do one of two things. One, I may need to stop working with them, depending on what we build.

Because you see, if they're going to pay me an X amount of money, which is \$10,000 to \$15,000 a month for me consulting and all that stuff, cool.

But if I'm going to have a better product and I think that it's mine, it is what it is.

Sometimes So that's one thing. Or the other thing could be any ads that we are going to write or work on are going to be exclusive ads for the people that we work with.

And this is another thing, like you said, have my word, you need to have my word, that the ads that I write, you know, they're going to be ours and not going to be to distribute to any other client.

And in general, with Greenbrook themselves, the main focus that I have with their ads is testimonial-based ads. I'm not doing the regular type of ads.

Even though they work, but they have such great testimonials that I can create just unbelievable stories from them, and they're going to be ads that are going to crush it.

[@53:38](#) - Amir

I just know. I watched some of those testimonials, like, you know, they're mainly African-Americans. Did you guys, you know, pick, you are running those?

[@53:47](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, these new ads, these ads that they're running right now, they're not mine. They are still in production for my ads.

There's like 40 variations that they need to produce based on my ads. So, yeah, a lot of stuff.

[@54:03](#) - Amir

But it seems like the ones that they're running right now, because they obviously come up on my feed, it seems like they're actors.

It doesn't seem like Junior.

[@54:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

There are people that are actors, from what I understood. I don't. Yes, yes, yes. People are actors. There may be people, if I'm not mistaken, people that talk in the testimonial.

There's this guy called Jay, which he's not an actor. He's actually a person.

[@54:28](#) - **Amir**

don't know if you know who that guy is. Is the guy with the red hair?

[@54:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, it's a, he, I don't know how to explain him even. He's like brownish, he has glasses, and he talks about what he, what TMS did to him and how it helped him.

He has like a, he has a, I don't know, like a spiky hair, if I remember correctly. So there's that.

And there's also people that are UGC creators as well. So yeah, and what I want to do with the UGC creators is have them talk about the stories.

of the real patients and not place them as. People that have done something specific because you can see, that's the thing, you can see that these are not genuine people.

You can see that the energy in which, in the way that they're talking, they're talking like they're selling an e-commerce product.

And it's not, there's a specific tone that needs to be, you know, used in ads. And once you find the right tone and you know how to talk to the clients and the patients in the right way, and you understand where they're at, and you can also, you know, communicate to them how you can solve their problems and create the belief in them, problem is basically solved.

You need to have this part, generate a ton of demand, and then you got people to the clinic and stuff, you know, you know that.

So this is what I'm trying to do there. And they have a whole call center and they, they're, they're, they have so many calls going out every single day.

Like absolute insanity. What's going on there? I wanted to ask you, like, if you want to share, what's your cost per lead right now?

[@55:57](#) - Amir

if you, you know, the average of it.

[@55:59](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah.

[@56:03](#) - Amir

I haven't calculated it because, you know, again, it's dynamic, it's a change.

[@56:08](#) - Oriel Mor (oriel.mor2001@gmail.com)

I'm talking about like, because here's another thing, which I'm going to be very helpful with. Do you know, are you using, because you just talked about Google Analytics, I'm assuming that you're using UTMs, right?

[@56:20](#) - Amir

Yes.

[@56:21](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so the thing is with the UTMs is that we want to, I want to create a process in which we know exactly which person has been closed from what ad.

And once this person is closed, I want to send the data back to Facebook. So Facebook optimizes based on the purchases and, you know, and the people that are starting treatment from the ad and not just based on the lead cost, because that's misleading.

Okay, so that's another thing we want to understand because Facebook can be very, if you hop on now and tell me, Oriel, look, I have this and this and this ad.

This ad has generated X amount, like this is a cost per lead, this is not a cost per lead, this is not a cost per lead.

I'm telling you, this is not accurate. If you're losing that landing pages, least. And also, not only that. It's not accurate.

On a bigger scale, and what you're running at right now, you don't know which person comes from which ad.

You just know that the campaign works, okay? And when you scale, you want to make sure that you have the foundations placed to understand what ads, what's the messaging that works, you know, expand on that.

[@57:18](#) - Amir

So... We are using that.

[@57:20](#) - Oriel Mor (oriel.mor2001@gmail.com)

So, do you have any idea?

[@57:23](#) - Amir

It's not optimized because I tell these guys, like, you know, do this, and then do that, and then do this, and then do that, and then they are not focused, but we are using it.

mean, like, in every single consult, we know exactly from what ad it's coming from.

[@57:41](#) - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. Okay.

[@57:42](#) - Amir

That's cool. But obviously, like, it needs to be optimized.

[@57:46](#) - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. So, do you know your average cost per lead? Because that's the thing that I'm interested in. There's nothing that I can do with this data as well.

[@57:53](#) - Amir

It's about \$200.

[@57:55](#) - Oriel Mor (oriel.mor2001@gmail.com)

Per lead or per consult?

[@57:57](#) - Amir

Per patient on chair.

[@57:59](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay. That's a very, that's a good CPA.

[@58:01](#) - Amir

Okay. That's a metric that I only go with. I don't go with any of anything else. How many patients are sitting on the chair getting treatment?

[@58:14](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's a good CPA. That's a very good CPA. Okay.

[@58:20](#) - Amir

So, yeah. So let me think about it a little bit. So a couple of things. So I mean, I called it Bright Horizons Marketing, obviously, because I wanted to be associated with Bright Bright Horizons, Psychiatry.

I have the guy started working on the website.

[@58:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So the website is going to be done in the next 10 days.

[@58:41](#) - **Amir**

And then we can talk about, we can think about, what are we going to do specific to, what is the structure that I'm using and all the tools and everything that we are using for our ads.

And then we can obviously like, you know, what, what I'm asking these guys to do, and you can help a lot with this is, I want them to up.

Optimize the tools like the GoHighLevel and the tracking and all the landing pages and all of that. So if you come in, you can work with them very closely to get this to a point, to a point that we can easily duplicate it.

When we can easily duplicate it, then we have the base and then we can start going and looking for the first customer.

And I'm going to share with you what I said I'm not going to say. So the way that I'm going to do it, Oriel, is I'm going to be talking to the sales rep for Spravato and TMS.

And I'm going to be asking them to tell me a person, psychiatrist who has the stamina and the energy, but don't have the knowledge of like, how am going to be getting the patients?

So somebody who is a go-getter, but does not and have a TMS machine and only sees like three patients a day.

So we need that. need that. We need somebody who is willing to do the work and does not have enough patience, and then we're going to target that.

And then after we target that, Oriel, I'm going to have a quick call with them, introduce myself, obviously it's going be a couple of them.

And then me and you, we're going to pick one of these companies, one of these clinics, and we are going to do everything for free for them.

We're going to create this, we're going to run the ads and everything. And then we tell them, like, we just do it.

If you start seeing results, pay us later. I know you're doing that. I know you mentioned that in one of your things.

However, it has to be, so you said, so I think, like, you know, what you mentioned is that you would charge them per lead or per consult, per booked consult as well.

Yeah. I say, because it's very difficult because when you're running ads, Google ads, I mean, you do have some conversions from your go high level, but you know, there are some conversions.

We get phone calls like, hey, I saw you on Google. Hey, I saw you on Facebook. Those are leads that we are generating.

So I'm not going to go with that. I'm just going to go with the number. So we are going to look at the number of converted patients on chair.

They have. And then we are going to tell them that if we start increasing this number, then you're going to be paying us \$5,000 a month.

[@1:01:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's going to be a fixed cost.

[@1:01:25](#) - **Amir**

Okay. So, and that is the way that we're going to introduce our company. We need to do some free work.

And then after three or four companies, and after we have generated that amount of stamina, then we can just say, okay, you know what, now we're just like, you know, you have to pay the base, you know, for everything that we create from the get go and all that jazz.

[@1:01:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. That sounds good. Uh, in my opinion, if you, if you even want to work, have a only result based thing.

So the first one to two months only get them to pay per patient that comes on chair. So if a patient is closed on a X, uh, on a.

So \$3,000 ketamine treatment or something like that, we can take a percentage out of that instead of charging them fixed cost and then transition to the fixed cost.

[@1:02:12](#) - Amir

I'm okay with that. The only problem with that is, again, like, you know, not all patients are coming from the go high level conversions, like, you know, patients are coming from like everywhere and then they're not going to be truthful about that.

They're not going to go high level and see how many patients we have and what four patients from go high level.

And that's not what happens. I mean, what happens is like, you know, your numbers go up because everything goes up.

SEO, Google presence, Google business profile, it's everything. So, so yeah, I mean, like, you know, we can talk about it, but that's, but that's how I'm imagining, like, you know, getting the first few companies that, you know, we just hook them, we just do everything.

As soon as you start generating. know, you know, know, I'll time. So or patients, then you have to start paying us, and then we can talk about, if we can find a way that we can, you know, what we can do is we can average the number of neuromods they had in the past, let's say six months, and then whatever number we go above that, they have to pay us like \$1,000 or something like that.

[@1:03:21](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, yeah.

[@1:03:22](#) - Amir

There are multiple ways we can do it.

[@1:03:25](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, that sounds cool. So, next steps for now, you want me to tell you about the tools and my familiarity with them?

No problem. What do I, is there anything that I need to expect from you, or, like, what is there?

Because, honestly, I don't know, like, do you want to talk to those Spravato reps? Because I understand how this works.

It's a very simple process, actually. We're having this, this is a pilot for me, basically. You want, you go talk to the sales reps of Spravato, or whoever you want to talk to in Brinsway, or whoever that is.

Get the companies. Get I know what to do. You know what to do to help them. and this is...

This

[@1:05:02](#) - Amir

Differences. Which one is working better? Whatever is working better, we implement that. And then we create the Bright Horizon Psychiatry System flawless.

And then after this is flawless, then we just have to make it so easily duplicatable. Like, we're just going to copy and paste it to the next event.

And I'm to need your help with that.

[@1:05:25](#) - Oriel Mor (oriel.mor2001@gmail.com)

Mm-hmm. 100%. Yeah. So I think that, like, another thing that, and this is where AI really comes into play, for example, when people, this is just one idea for you to understand.

When people submit an onboarding form, what can be done is that it can send a webhook to this tool called Base44, which all it does is create landing pages.

You can set it to work on a specific project, duplicate that project, and replace the placeholders with what they submitted in the onboarding form.

So that duplicates the landing page. And we can then use this landing page, create a subdomain for it, which is going to be based on the name of the clinic itself.

And just use it for the ads, which is going to be ready. I've... Everything's got to be ready automatically within, you know, a couple of minutes, because Base44 is going to do everything, the automation is going to do everything, so it's just one idea.

So yeah, the duplication part is going to be fairly simple, I believe. Obviously it's going to need, we're going to have, we're going to run into challenges, but because of AI, AI is just unbelievable.

[@1:06:23](#) - Amir

Are you doing all the technical parts yourself, or do you have people do that for you?

[@1:06:27](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, so currently with the U.S. market, I'm doing all the technical parts on my own, it's way easier. Instead of paying somebody an X amount of money a month to do that, I am going to hire what's called a black hat virtual assistant, which I'm going to be training on, doing the onboarding things, all the technical things which are low leverage, so I can focus on the high leverage things, which, you know, creating the ads, doing all that stuff.

[@1:06:49](#) - Amir

But are you going to pause that for now?

[@1:06:52](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, yeah, 100%. So, Oriel, you're going to focus on this, okay? Mm-hmm.

[@1:06:59](#) - Amir

Yeah, 100%. So we are going to... Again, so I have two guys. They're technical. I think they know. Again, you know, when you're going to, like, webhooks and stuff, that's beyond me.

I don't understand that. I know when they talk, they use that, like, webhooks. But let's have a meeting with Danish and Sagar.

And let us explain to you what we're doing. I mean, it's a very simple thing. Like, you we have ads, landing page, go high level, and then conversion, and then the bot kicks in.

So, and then I will give you access to all of that. And then you tell me, like, you know, what's working, what's not working.

I mean, I can tell you, like, you our ads are a mess, because I'm working, I'm doing them. I am just, like, you know, just generating, I'm trying to retarget and stuff like that.

[@1:07:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I can definitely use your help on that. Okay.

[@1:07:54](#) - **Amir**

Sounds good?

[@1:07:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, sounds good. So, okay. So I'm going to send you an email with all the tools and the knowledge about the tools.

You're going to send me an update with when you want to happen. We'll with the guys or anything else, and we'll just go from there.

[@1:08:06](#) - **Amir**

Sounds good. And what time is it there right now?

[@1:08:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's currently 5.12 p.m. Okay.

[@1:08:16](#) - **Amir**

All right. And what time do you usually work? From what time in the morning to what time in the evening?

[@1:08:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I work usually, I decide when to work in the mornings, usually from 10. And 10 in the morning until 12, I give myself some time to focus on doing stuff for myself.

So if it would be for us, would be refining things in the company itself with what we do. And then from 12 to X, Y, Z, I'm working.

It depends. I can stop working whenever I want. It could be 6, 7, 8. It really depends on my energy and what I want to do.

But usually I do not work later than 8. I try to have a hard stop there because it's a lot for me.

So, yeah.

[@1:08:59](#) - Amir

Absolutely. Okay. So, five hours. Or is that going to put me at 4 a.m.? So 4 a.m. is 12 p.m.

your time. Okay. So 8 would be around...

[@1:09:12](#) - Oriel Mor (oriel.mor2001@gmail.com)

p.m. for you.

[@1:09:14](#) - Amir

Okay. All right. Okay. Sounds good.

[@1:09:18](#) - Oriel Mor (oriel.mor2001@gmail.com)

So we'll be in touch, Oriel. Okay. I went in for you. I'm going to send you the email. And yeah, take a look at the video, though, with the ads and everything.

Okay. Awesome. Talk to you soon, man. Bye-bye. Bye-bye.-bye.

Transcript 5:

Amir - September 10

[VIEW RECORDING - 26 mins \(No highlights\)](#)

[@0:00](#) - Oriel Mor (oriel.mor2001@gmail.com)

How there?

[@0:01](#) - Amir

This meeting is being recorded. it Oriel?

[@0:04](#) - Oriel Mor (oriel.mor2001@gmail.com)

Oriel, yes.

[@0:05](#) - Amir

How's it going? Oriel, not bad. How are you?

[@0:07](#) - Oriel Mor (oriel.mor2001@gmail.com)

Great, great.

[@0:10](#) - Amir

So I just, I know, like, you you're probably wondering, like, you know, how this guy, like, you know, just sent me a text, like, you know, what is he talking about?

[@0:19](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. Yeah, I was wondering where you came from.

[@0:22](#) - Amir

I was wondering where you came from. Yeah, I'm just going to cut to the chase. So the purpose of this call is, like, you know, the big picture is I worked with two of the biggest companies, the marketing companies in TMS and S Academy.

I worked with Beyond Marketing and then with whatever, something for TMS, app for TMS, whatever they are. Okay. So premium, top, they sucked.

And what happened was I, about eight months ago, I decided that I am going to train myself in marketing and I'm going to bring everything in house and I'm going to start.

[@0:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm So I brought everything.

[@1:04](#) - **Amir**

I basically taught myself everything about marketing, about SEO, about campaigns, Meta, Google, everything. And then I hired two freelancers in India and Pakistan to basically just implement what I come up with for the past few months, and it's working beautifully.

Now, it came to, you know, one thing that sparked in my mind, and again, like, you know, I'm running a thriving business here, and then like, you know, I just got this marketing.

And I was like, you know what, why not? I start a marketing company. And I know the product out there, which are claiming to be the best.

It sucks. So why not, now that I know what to do, why not to bring it out. Now, one obstacle that I have is that I am, you know, my practice sees about 60 to 70 patients a day.

And I work with three nurse practitioners, and we are a very highly dynamic, fast-paced office. And me, getting myself into marketing, I had to spend a good chunk of time, a good three, four months.

I really, like, you know, 10, 12-hour days, I trained myself, basically. Starting a marketing business is a different animal.

It's going to require a dedicated amount of time, and, you know, me starting, like, this practice is my fourth business.

And I know, one thing I know is that you cannot half- something. You have to, like, you know, just put all your dedication and focus on that business.

When I saw your ad, something came to my mind. So, you know, I was looking at the videos that you were creating.

I looked at your website, and I, and again, like, you know, I'm introducing myself.

[@2:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm going to look

[@3:00](#) - Amir

So when I saw your ad, was like, okay, so you know what? There's this guy who does neuromodulation marketing.

It seemed to me, based on the quality of the ads and the marketing and the website that you have, that, and again, correct me if I'm wrong, that was my assumption.

That you are a very small operation. That's correct. And it seemed to me that you might not have the funds to implement the things, the ideas that you have.

So, again, like I'm not going let you introduce yourself and let me, but what I was thinking is that, how about, you know, if I, because the, like, this is what I was thinking.

I was like, you know, let me just hire somebody, train them, like, you know, from, from the get go.

And then, and, and, and. I was like, no, neuromodulation marketing is very specific. I need somebody who knows neuromodulation.

I cannot, like, train somebody from zero to be a marketer in neuromodulation. So I thought, how about, like, you know, this guy who wants to do marketing, has a marketing business.

I mean, I can bring this aspect. I can bring, you know, I, so obviously, like, you know, I know many psychiatrists and, you know, putting a face of a psychiatrist on a marketing product is going to be, I'm sorry, you want a second?

[@4:32](#) - Oriel Mor (oriel.mor2001@gmail.com)

What's up?

[@4:34](#) - Amir

Yeah. No. Yeah, that's good. Um, so, yeah, so finances, I can, I can provide, um, marketing in terms of, like, the face of the, face of the company toward psychiatrists, like, you know, like, picking up the phone and saying, Hey, hey, John, I've been doing this myself.

Like, you know, this is, this is what's going to happen, but I'm going to need. Somebody who knows neuromodulation marketing and who can work with these freelancers in India and Pakistan to be able to, like, you know, to run the operations.

So this is what came to my mind when I was looking at your ads and looking at your website.

Now, I'm going to give you the floor. Go ahead. Introduce yourself, please. And I'm sorry if I'm lucky to be frank and to direct.

[@5:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, it's completely good. I'm also like that. So I'm glad you did that in seven minutes and we didn't go into talks about dogs and stuff.

So, yes, from what you saw in the ads, I am a small operation. I have actually, I am from Israel.

I don't know if you have anything with Israel. So it's free to know that. And, yes, I do have a small operation.

have a marketing agency in Israel as well. And I am pivoting to the U.S. market with the goal to actually help clinics, you know, like yours and all that stuff, to actually fix their marketing.

I don't know if you've seen my YouTube videos and all that stuff. I have a very simple purpose. I'm not trying to have high-quality content.

I just want to be valuable. I want to be practical. I want to show people that I know what

Okay. And important for me to know, first of all, did you see, did it seem to you that I know what I'm talking about?

Like that's the first thing that I want to know. Okay. So that's very important because that's important to me.

And yeah, when it comes to funds, honestly, I do have the funds to grow the agency. I'm doing it bits by bits.

I have a couple of sales calls here and there. I know the snowball effect. Also, I'm in a coaching program of this guy.

You can search him up called Cameron England. He actually scaled an agency. \$300,000 a month. I basically all the tools to, to scale that thing is having a, having somebody that is an actual doctor.

And I saw your ads. I saw they have 94 ads running in your ads library, which is a lot of ads, which means you're doing something right.

Um, it could definitely be an interesting, uh, an interesting thing to do. Now, question is what type of service do you want to provide to the clinics?

Because, you know, there's a bunch of things. For example, I have this client now that I'm, I'm, for- I'm on a system to have voice AI implemented.

And instead of having a call center, then the voice AI is going to call leads, qualify them, book them into the consultation.

And it's going to do all the follow process. You mean when you want me to work with these guys from Pakistan, do you want me to train them on how to just upload the ads?

Because when it comes to creative and writing ads and copywriting and all that stuff, I do everything on my own, even when I'm going to sell the agency to \$100,000 a month, because of the simple fact that's what I'm best at.

That's what I'm good at.

[@7:31](#) - Amir

This is what's going on. So we have all of that. I created the voice AIs, chat AIs. I implemented all of that.

We call it Ashley. In my office, say, hey, did Ashley do this? Did Ashley do that? And these guys in Pakistan and India, they are just technical guys.

You tell them what to do, they do it. I exactly want that. Like, you know, I am the creative person here.

The ads that you're seeing. So created all of those. I'm running all the campaigns. But what happens is when I go on GoHighLevel and something is not getting tracked correctly, I go to the guy and say, hey, you know what?

This is not getting tracked correctly. Go take a look at the backlinks or whatever. Or SEO or Google. I told the guy, hey, just create my Google campaign, but all the keywords, everything, searching the keywords, I did all of that.

Because this guy knows WordPress. This guy knows SEO. This guy knows campaigns. One of them, the other one knows GoHighLevel, like automation.

They know all of that, but they don't know neuromodulation. That is the problem. And that's what was missing from beyond marketing and all those, like, you know, because that's exactly what they do.

They get me as a psychiatrist, and then they tell this guy in Pakistan that, like, you know, go and just, you know, shoot a bazooka.

So All But they don't know what they're targeting. They don't know who they're targeting. If you look at it, it's very interesting.

I'm pretty sure you're familiar with Greenbrook's. The only Greenbrook's ad that's running for Spravato is the Spravato nasal spray.

And then it says, FDA approved, insurance covered, patient respond.

[@9:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, you know what's funny? You want to hear something insane? I am consulting to Greenbrook right now. I started last week to consult to them.

And I'm going to revamp their whole process there as well with my ads. So I just want to be transparent with you about that as well.

[@9:41](#) - **Amir**

That's fine. mean, that's okay. But you know what I want to tell you is that the only ad that they're running for Spravato was my ad.

I created that ad. I gave it to Beyond Marketing.

[@9:52](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I started running that ad and then they copied it. That's crazy.

[@9:56](#) - **Amir**

I mean, you know what? No, that's not crazy. I know that this is how this is what I don't care.

But what I'm telling you is that it takes a psychiatrist who does neuromodulation to understand what people respond to.

Because, like, you know, they were coming up with all these ads, like, you know, happy woman, like, oh, my God, I'm depressed.

I'm like, that's, that's, nobody cares about that. The only thing people care, the only thing people care about is, am I going to get better?

And you know why I know that? Because I see, like, in our clinic, we see almost 22,500 patients, neuromodulation patients.

That's why I know that. And then combine my business-minded approach to a high-quality psychiatry. I believe I'm one of the best psychiatrists in America.

I got trained at Johns Hopkins. I was an engineer before coming to psychiatry. You know, when I went to medical school, I was 30 years old.

So, so combine, and, you know, I'm saying that is because I want to tell you that, like, it takes that to make a market.

Marketing company, who, like, what it's supposed to be. I mean, like, you know, I cannot market, like, I don't know, like, you know, my aunt is in construction, and she was asking me if I can help her with marketing.

was like, no, because then it's going to be me, you know, just bringing in freelancers, and then we don't know that, we don't know the technology, we don't know the market, we don't know who your customers are.

You need to know who those customers are, or patients are, in order to be able, so that's the very first thing, and then it's campaigns, and ads, and artwork, and then after that, it's all the other crap, like, go high level, and voice AI.

The very first thing is that, how many people are going to be interacting with my ads? And, and now I'm looking at the numbers that I have, it's more than 300% than what I had with Beyond Marketing, I worked with Beyond Marketing for two years, it just, and I was putting, and you know, I, like my campaigns, I was always allocating about.

Six to seven thousand dollars a month to all of my campaigns. Now, half that money tripled the number of leads and our scheduled patients more than ever.

So, I'm not sure. mean, again, this is just the spark of an idea. I'm not sure if you're interested or if you want to look and just work together.

You know, somehow, obviously, there's going to be so many conflict of interest. So this is this is just going to be like it has to be a strong long term relationship if you want to do this.

And again, you know, your role is going to be just managing the freelancers. But you are going to be the basically between me and you are going to be the main producers of the ideas and then and then the face of the company.

And then talking to all these doctors and then and then getting them to to sign. There is a specific doctor.

The population that I want to target, like the product that I'm creating, is going to cost a lot. So we need to have doctors who are serious about neuromodulation.

If somebody wants to do three TMS patients a day and then two escedamine patients a week, that's not going to work.

This is geared towards somebody like, not like us, because we are seeing about 30 to 40 neuromodulation patients a day.

But at least you need to see at least between 15 to 20 neuromodulation encounters a day for this product to make sense for a company.

So I'm still in the infancy and I'm creating these ideas in my head.

[@13:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

But again, I saw your video and I was like, let me just give it a shot. That's great. Okay, so I want to ask you, and I'll be completely honest.

I know Beyond Marketing, Ketamine Media, Patient Plus, all these people. And I'm hopping on calls like, actually, I hopped on a call.

I had a sales call two months ago with this woman. I Ayanna Williams. I can send you a clinic or whatever.

And PatientPlus, she went to PatientPlus. I told her because I told her, listen, I'm new in this. Don't pay me money.

I'm going to create it. just want to get your results, then pay me. And PatientPlus, somehow with better sales, things actually converted her.

She has currently, I hopped on a call with her a couple of days ago. I followed up with her.

She has a \$70 cost per lead. She got 17 leads in the first month. None of them even booked a consultation.

That's like what you said about the ads. And I was shocked because I was in my eyes. was like, maybe I'm doing something wrong here.

So why am I even saying that? Why am saying all of this? Is there anything specific that intrigued you me?

Is it because I'm small? Did you look at other people and you thought about talking to them? Like what specifically with me?

Because I'm 100% honest with you and I'm vulnerable with you.

[@14:56](#) - Amir

I'm going to be 100% honest with you. I think I gave... That's answer. My answer is, you are a motivated individual, which I thought don't have the resources.

And I thought that if I bring my expertise and resources with somebody who knows the market, who I can offload, like, you my goal is to offload this business idea to somebody who knows the business as a business partner, and then let that person, you know, just take over.

That was, like, beyond marketing and stuff, like, they're not going to be able to, like, they're a company, they're an organization by themselves.

But, you know, you seem like, you know, a one or two or three people company, and I was like, okay, you know what, that's what I, that's what I want, that's who I want to work with.

And then on top of that, again, when I was looking at your videos, it seems like you know what you're talking about.

Obviously, like, you know, you know, if, if, if we agree to go beyond this conversation, I want, I want to get to know you, and I want you to understand your, your clinical knowledge of all the neuromodulation of, I mean, again, like, you know, we, we sign a prenup, and then, you know, we, we, we disclose some information from

And then we, you know, we assess. Obviously, you need to assess me. I mean, I can, I'm saying 60, 70, you have no idea.

I might be lying. And then you are saying that, look, you know, I know what I'm talking about, and you might be lying.

So, you know, we need to talk to each other and then, you know, see if we are the partners that we're looking for.

And I'm not sure if you were, probably you weren't looking for a partner. I am, because I need somebody to run this because I can't do both.

[@16:31](#) - Oriel Mor (oriel.mor2001@gmail.com)

I can't be, I can't dedicate my time to both of these companies. Yeah, a hundred percent. I understand you.

So this is, this sounds very interesting. Okay. When you say about a partner, I'm not looking for a partner.

I actually, I was, I was supposed to start a partnership with these two guys, Chris, Chris Shefford. He has a clinic called brainstem TMS and another girl who has a clinic called USA brain sciences.

They both do TMS for some reason. I was with them. created ads for them. were supposed to start like this partnership marketing agency, but something didn't add up to me.

And then my dad passed. They didn't talk to me at all. And then they just removed me. They removed me from the ad accounts.

And I was like, you know what? This was supposed to happen. I felt relief. And I actually, I do want a partner that is going to complete me.

And you may be able to complete me because you have the resources. I can, I can just leverage your expertise and integrate my marketing to this.

And if we actually implement this and you know, we, you seem like if you did everything that you did in the, in the past, what you said, what, eight, nine months.

Six months.

[@17:40](#) - Amir

Yeah.

[@17:41](#) - Oriel Mor (oriel.mor2001@gmail.com)

Six months. So this is extremely fast, extremely fast. Okay. So that shows me, that shows me not your determination, but first of all, your understanding and also your, the, the way that you catch things.

And I, and I appreciate that. Okay. A hundred percent. appreciate that. So yes, I am very interested in talking more about this.

Definitely something that we need to think about. As you said, there is conflict of interest. need to see how we built that out, how we laid that out to make sure that it's good for both sides, okay?

Because I can definitely see us building something great here 100%. And I'm not saying that just because I'm like, oh, this is such an exciting opportunity.

Yes, it is a very exciting opportunity for me for two reasons. One, I've seen your ads and I actually, when I first started, I looked at the clinics and I saw your clinic.

was like, hmm, this guy's probably running with a huge marketing agency. He has all these ads and everything. And then that you sent me a message, I was like, who is this guy?

And then I just looked at your ads before I call. was like, holy, holy, that's this guy. Which was very nice to see that.

was like, damn, okay, it means I'm doing something right with my content and everything. So that's the first thing.

Second thing, that will allow me, obviously, to get my purpose across. I have one purpose, which is to make the world 1% better.

You know, people are feeling like, okay? With depression and all that stuff, you have the tools. And a lot of psychiatrists and people that are running these clinics have the tools.

So, yeah, I can definitely see this as something interesting. So I want to know from you, how do you want to move this forward?

We need to talk more about this, you know, go more in depth. This is not a, this is a type one decision, if you know, like what a type one and type two decisions are.

It's not, it's when it happens, it's very hard to reverse that. So we want to make sure that everything is dialed in and that we're both on the same page, a hundred percent.

[@19:28](#) - Amir

So, so yeah, and then, and then, you know, again, you know, I'm a, I'm a go getter. Like, you know, I'm, you know, I'm just, I can see this is what we're going to do.

I, I have a feeling that you are too. Again, like, you know, I know, I know you look me up.

I looked you up. Let's yeah. I mean, by all means, I mean, that's why I wanted to do it.

So I just wanted to, you just to initiate this conversation and then let's let's just let, let's, let's set up a meeting.

For early next week, by then, let's think about it a little more, again, you know, I gave it like a half an hour thought, so let's, let's think how you are, how we can, how we can work together, and then, and then we'll take it from there.

[@20:21](mailto:oriel.mor2001@gmail.com) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, 100%. Is there, so I want, I want to come ready to the call next week, I don't want to come and say, did you think about anything?

Is there anything specific that you want to see for me, any specific things that you want me to bring up, because I'll tell you the thing about me, and why I believe that I'm very good at marketing, is that because in Israel, okay, thing is in Israel, you cannot focus on a specific niche, okay, I chose TMS, Ketamine, and Spravato, I don't know if you've seen one of my videos on YouTube, it's because I have a simple friend, okay, I don't know if you saw that story, he's on antidepressants, okay, and since he, and he got hooked, quote unquote, I know the presence when he was not,

Today, he's 21. Not the same person anymore. He's addicted to weed. He's lost. He's like, it just messed with his brain.

Okay. And in my head, as a person that is very obsessed with psilocybin and psychedelics, I was trying to look up what's the status of that.

That's exactly what happened. And I figured out that there's, I was like, ketamine? Ketamine actually helps. Like, that's a thing in the US.

So I was like, okay, I'm getting tired of this agency in Israel. Because in Israel, need to work with everybody.

Okay. And because you need to work with everybody, with every single clinic. So for example, not clinic, sorry, business, you have, I have a client that sells a coaching program for people how to buy and invest in land, carpentry courses, dating, a guy that sells multimedia like things for cars.

So you need to understand marketing at its core. Okay. If I don't know if you know the OGs like Gary Halbert or Eugene Schwartz and all these great copywriters.

You need to understand the core, and when you understand the core, it's way easier to run marketing. So I want to know from you exactly then, that's why I'm saying that, is there anything specific that you expect from me?

Is there something that you want me to come with next week? Do you want me to send phone numbers of clients?

Like everything that you want for me to come ready to next week and be prepared? Because I don't want to just come and be like, okay, what are we doing here?

[@22:23](#) - Amir

Absolutely, and that's a good thing. So a couple of things. Because you know, instead of, instead of, you know, let's just take one step back.

So let's, the next meeting, let it just be about, you know, just a little bit more detailed introduction. And maybe a verbal resume, like what have you done?

And, and, and then realistic numbers. And by that, I mean. Yes, everybody wants to be rich. Everybody wants to make a business and then just make millions and millions of dollars.

[@23:07](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's a given.

[@23:08](#) - Amir

But what is your realistic number? In order for me to be able to say, okay, you know what, I think this is going to work, is that if you have a specific number in mind, and then you have a five-year and a 10-year goal.

[@23:27](#) - Oriel Mor (oriel.mor2001@gmail.com)

Because if your 10-year goal is \$5 million a year, I can tell you, like, you know, this is not going to work.

[@23:33](#) - Amir

Because I cannot imagine, I cannot forecast that. 100%. So I have a realistic goal. And, you know, I want to hear your realistic goal.

And again, I mean, like, you know, when I started this business, I was, you know, I, my goal was to do 1.5 million in the first year, we did three.

So, so we set a goal, we set a realistic goal, if we surpass it. Awesome. But if you don't surpass it, at least, like, you know, we have, you know, we have an understanding of, okay, so you know what, this is what, this is where we are.

The other thing is, you know, we have to think about the level of partnership. So you have a company, you have, you know, you have a, you have a name for yourself.

I have a company and I have a name for myself. How are we going to, how are we going to decide about how, how are we going to pursue a partnership company?

Like, know, who's going to be in charge of what? Again, not in detail, but I think like, you you need to come up with your version of things and I need to come up with my version of things and then see which one works better.

then like, you know, just back and forth, we need to come to see, like, you if you can come up with an agreement.

Because again, you know, I understand making a company, like, and it's your, it's, it's like your child. Obviously, like, you know, I'm, I think I'm older than you and I have a little bit more experience.

But, but obviously, like, you know, you created something and, you know, you, you, you value it. And, you know, I just want to know how you would like to approach that.

And I think the next one should be about that, just getting to know each other a little bit more, doing a little bit of a due diligence.

I mean, I got to look you up a little bit deeper.

[@25:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You should do that, too.

[@25:12](#) - **Amir**

And then just verbally talk about what have we done so far, and then what is the future is going to look like for both of us.

[@25:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

100%.

[@25:23](#) - **Amir**

That sounds good.

[@25:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@25:25](#) - **Amir**

Okay. So we'll talk, we'll talk with, you know, we will communicate via email. But let me, I need to check my schedule, and then I will let you know what availabilities I have, and then you let me know what availabilities you have.

[@25:38](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

100%. I can tell you early next week, I don't currently have a lot of things booked. So you can tell me what your availability is, and we can just basically book it.

So just for you to know.

[@25:47](#) - **Amir**

Okay. Okay. Well, Ariel, it was very nice meeting you.

[@25:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Nice meeting you, too.

[@25:53](#) - **Amir**

To potentially work with you, I think we can do this.

[@25:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. That sounds good. Thank you so much, Amir. Have a great rest of your day, and you.

[@26:00](#) - Amir

You really sound like a great guy. Like I honestly say that, so. Yeah, you too. Have a good day.

Thank you, man. Have a good day. Bye-bye.

Transcript 6:

Impromptu Zoom Meeting - September 02

[VIEW RECORDING - 48 mins \(No highlights\)](#)

[@0:12](#) - Oriel Mor (oriel.mor2001@gmail.com)

This meeting is being recorded. Somebody here? Or? My apocalyptic land. Oh, sounds like I am.

[@0:58](#) - Melissa.

Oh. Oh. Oh. Oh. Oh. You Hi, I think we're waiting for Shantz to join.

[@1:21](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay. Thanks, Al.

[@1:27](#) - Melissa.

Bye-bye. Bye-bye. Bye-bye. Thank you. Thank you.

[@2:45](#) - Schantz Flores

Hey, man. Sorry about that.

[@2:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

How's it going?

[@2:49](#) - **Schantz Flores**

It's going good, man. How are you?

[@2:52](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Great. Great.

[@2:54](#) - **Schantz Flores**

So Melissa hopped on, and then Raleigh, can you resend her the link?

[@3:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

She's going to hop on from her phone. She's not here yet. Should I set in the Slack?

[@3:07](#) - **Schantz Flores**

I don't know if she has Slack on her phone. I know she has it on her desktop, but like I said, she's not here yet.

So let me, matter of fact, I may have it.

[@3:15](#) - **Melissa.**

Yeah, I don't have her. Let me just text her the Zoom link. I'm just going to text her the Zoom link.

[@3:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

All right, that'll work.

[@3:24](#) - **Schantz Flores**

You know, she's young and she overslept her alarm and I get it.

[@3:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You know, we've all, we've all been there. Bam. If there would be more employers like you.

[@3:34](#) - **Schantz Flores**

Yeah, well, I'm about to have to start doing like verbal write-ups and stuff like that, but we'll see. We'll see how it goes.

I'm probably underpaying her right now, so I'm trying to give her a little bit of grace.

[@3:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That makes sense, I guess. If you're underpaying her, She's making minimum wage.

[@3:57](#) - **Schantz Flores**

And I told my wife what all she's doing. She's taking a little. My wife's duties when she left for the baby stuff, and she says, Schantz, you're not paying her enough.

I said, okay. I said, okay, I'll try to figure something out. How are you, man? How's everything going?

[@4:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm cool. I'm getting back to work and everything, as you can see. Yeah, just trying to get back to work, getting on my stuff.

[@4:26](#) - **Schantz Flores**

I turned my ads back on. It's been a while since I – I that, man. That new one, I like it.

[@4:31](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I like your new one. The one with the brain scan? Yeah. Or the VSL? Yeah, there's two. Yeah. It came to intuition because I started to do more.

I'm walking every single morning now, and I'm waking up way earlier. So I think that's helping my brain be more intuitive and come up with ideas really fast.

Yeah. So, yeah. Dude, I'm out there.

[@4:59](#) - **Schantz Flores**

I'm What was it, last year? Every now and I'll get on a kick and I'll get up at like, I'll start getting up at like 5, 5.30 in morning.

It's hard to do when I have my two kids and I'm exhausted all the time, but I was getting up and then I was like taking cold showers for like 10 minutes as soon as I got up, get that little quick spark, better than a cup of coffee, and I was getting all kinds of work.

I was super productive, man. When I'm doing that, I'm super productive in time to get your day started like that.

[@5:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it's definitely a big shifter. Also, I'm sleeping, like the craziest thing is, before my dad passed, I used to wake up at like 10, 11, and throughout like in 3, 4 p.m., 5 p.m., I would be exhausted.

I would be like drained out of energy. Now, I'm sleeping less, I'm sleeping six hours, and I'm still not tired at 4 p.m., even though I wake up at 6.30, which is unbelievable.

[@5:57](#) - **Schantz Flores**

It's the mind and body, man. It's crazy how that

[@6:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It works, for sure. It's unbelievable. It's just unbelievable.

[@6:05](#) - **Schantz Flores**

All right. Well, we got Melissa. I know you got things to do.

[@6:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

We got things. So Riley can just pop on and listen whenever she gets in.

[@6:12](#) - **Schantz Flores**

Yeah. Let me shut my door. Melissa, are you still at the front, or are you back in your office?

I bet she's at the front still. All right. Not because I'm trying to hide anything. I just can pay attention better if I don't have people walking past my door in the hallway.

[@6:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I have the stats to go over. Kind of simplified things. Didn't want to overcomplicate it. I'm just going to go over the simple stats.

I've made like a simple Google Doc. I want to make this better. I think I'm actually, with my Israeli clients, I'm using a Google Sheet that updates statuses based on where people are in the pipeline.

So I think I'm going to do the same thing. And we will be able to filter them through the Google Sheet.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

We every single month and see exactly what's going on. But for now, just based on the tags that we have in the go-eye level, made this little thing, and it's very simple.

It's very easy to understand the bottlenecks that we have from here. Okay, so obviously, total number of leads that we got up until now was 139 since we started, which is a lot.

And total bookends, we got 23, which is also good. The cost per bookend is good. The booking rate, though, is not good, which means we either have a problem with calling them as fast as possible, not calling them enough time, or creating urgency.

These are the main three factors that will determine the booking rate. So I do want them to hop on, and I want to see what they're doing in terms of when it comes to calling people.

Because I know that people can come in and leave their details after business hours, and yeah, that makes sense.

But first thing to call them in the mornings, send the messages, do all these things. The cost per booking is good, but obviously, the show.

The no-shows are very bad, and I'm very surprised because a week after we started, we changed the protocol to take credit cards.

So I'm trying to understand how come the shows is really low because from what I see and go high level, just a second, from what I see.

[@8:18](#) - **Schantz Flores**

That cancellation rate, and that's what we're seeing, man, is the cancellation, and it's the no-shows. Honestly, I don't know if the no-shows have gotten worse because people are calling, like, the day ahead of time, and so I know that's one of the things, and then it's the girls, the people will book, and they'll say, like, tentative appointment on our side.

Well, we don't ever actually confirm it until they'll answer their phone and talk to Riley or Adriana or somebody, and they're able to, like, send them all the consent forms, everything like that, and that is when they have to get the credit card information.

Well, I know Melissa, she's a therapist, so she's not even working in the front, but when she was... She was slow one day.

She got on and heard of calling people for us. And she had several at the moment she asked for a credit card.

They were like, no, never mind. And they wouldn't do it, which is good, man. I like that's good because that means they're not really serious about it anyway.

And they're not going to block a time. But that's one of the things. It's that whole, it's Tebra, dude.

I don't like how the flow is with go high level and Tebra. It's garbage. And it's this extra work on the front is rough.

So that's why I've hired the AI company for multiple reasons. But I think that will help our contact rate.

[@9:42](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You know, we get in touch with them quicker is when I can access that into the go high level because the AI can actually do everything in Tebra, too.

So we'll doing everything simultaneously.

[@9:51](#) - **Schantz Flores**

The only thing it will not be able to do is the credit card. And that's still the problem. And they said that is.

It's from a, I guess it's a legal thing with AI or something. They're having to try to figure out how to implement that down the road.

But the AI, I told them to keep it all HIPAA compliant so that AI can ask more health-based questions.

A few of the people that I've seen, they showed up, but they weren't medically appropriate. They had a brain aneurysm in the past.

So they had an aortic or an aortic aneurysm, or one of them was bipolar, you know, something like that.

So the AI, being able to ask more of those detailed questions and keep it recorded in the HIPAA compliant AI thing will help.

I think weed out some of the bad leads. I know it'll help our call rates anyway, for sure. That'll get back to them really quick.

And I told them that once we get this inbound call thing set up, which they said it should be done by the end of the week, it was done last week, but I found so many hiccups with it, so they went back to try to fix some stuff.

But once I... I've got the inbound stuff. Good. That's the next thing I'm having them work on, is to link with all of this stuff and start making outbound calls.

[@11:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Yeah. So I can see that we have set. So how many people did we have coming inside up until now?

How many people did you see in the clinic? or Paula?

[@11:20](#) - **Schantz Flores**

Let me look.

[@11:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Because I feel like it's not updated. Also, like, there's a bunch of things that, like, more things that I want to go over.

[@11:30](#) - **Schantz Flores**

Yeah. The front desk, that's something I've noticed, too, is when I was getting your notifications of, like, has this person been seen or whatever, I was having to go there and, like, kind of backtrack, putting them as scheduled or canceled because the systems don't talk to each other.

And when the front desk is flowing that quickly, and you got people coming in and out, like, I get where the front desk is dropping the ball on that.

But we've got to figure out a way to fix that. And I think the AI will help us eliminate that.

As well, because I can do both simultaneously. So, yeah, I'm having to spend more money, but ultimately, I think that maybe it'll help.

I mean, I know it'll help with patient satisfaction trying to get a hold of us, but, you know, having a computer take over some of the roles where the people are dropping the ball, I think that'll help a little bit.

[@12:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so can you, do you have the stat of how many people showed up?

[@12:30](#) - **Schantz Flores**

I just had a thing that we see because it's extremely important. I'm getting it pulled up here. Hang on.

I will tell you something Melissa pointed out today, which is a problem and I don't know how to fix it, is the widget we have to use.

I turned on her online scheduling as a therapist for her patients. Her provider profile, well, when the people are now clicking on the widget for us, for the Facebook ads, it also pulls her up, and so they're selecting her as well, and she doesn't have the license, the medical compliance, I guess would be the word, to actually dictate if they can or cannot have that.

So now we're going to have to go back and reschedule those people because they can't see Melissa for that.

[@13:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

They can see her for therapy, but not for medication stuff. So where do they see that, again? You said on Facebook, specifically, is it from the ads, or is it something like, where do they see that?

[@13:37](#) - **Schantz Flores**

It's the widget. It's that link that I sent you for them to schedule directly.

[@13:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, you mean the Tebra link?

[@13:43](#) - **Schantz Flores**

The Tebra link, yes. I did not know that because that is apparently the same widget or link that our provider profiles through Tebra have for people to book with us.

When they click on that link, they can go search the provider, times, all that stuff, but I did not realize that it was also going to put Melissa.

On that link as well. I thought it was a separate entity when I turned it on for her profile, but it's not.

It's the exact same link. Okay. So let me pull up – I'm going to just do August real quick.

[@14:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is it – how many – is there – I saw that there's one that wants to start. Are there more than that, or is there – Honestly, no.

[@14:24](#) - **Schantz Flores**

So we've converted one that has started. Amber Forrest has started. She was a Facebook ad. And then we have – I see Lauren.

One for sure that we are working on that I've seen. Paula, she's with Patience.

[@14:44](#) - **Audreyanna**

I'll have to look at her thing here in a second. We're still working on Lauren's too.

[@14:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I can see – okay. So we have Amber Forrest, which she started. She started.

[@14:54](#) - **Schantz Flores**

That's good. Carpenter, that's her last name. She is – we're working on her. Trying to make sure her insurance will pay for it because she has like an Indian reservation type insurance.

And then Laura Pfeiffer had straight Arkansas Medicaid, which is always going to be the hardest one to get. And we are working on hers, but she is gunning and ready to do it as soon as we can get it approved.

[@15:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, awesome. So we have Amber, Laura, which we need to get done with.

[@15:24](#) - **Schantz Flores**

And we have another one. What's her name? What's the name of the last one?

[@15:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Sarah Carpenter. Sarah Carpenter. Okay. Is it Sarah with an H or?

[@15:33](#) - **Schantz Flores**

Yes.

[@15:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. With an H. Let's see. Let's see Sarah Roofer. Nope. That's just a carpenter. That's weird.

[@15:44](#) - **Schantz Flores**

I Timber is garbage. And that is something else, man. Even if I have to put some stuff on hold to be able to get this to work smoother, I'm willing to do that down the road we got.

I've been talking to several EMR systems. My staff is going to find out right now that we will probably...

I'm probably switching that all at the beginning of the year because I'm just – I'm fed up with them.

[@16:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I understand. Yeah, you should definitely switch them. It's unbelievable, like the fact that – you know, the thing that gives the biggest red flag is not even a red flag.

It's just unbelievable that they can book with Melissa on the same widget.

[@16:20](#) - **Schantz Flores**

It's just – So just for an example, like even taking all this other stuff out of consideration, the customer service is awful.

I sent in a request for help last Tuesday for something, and they just got back to me yesterday. That's not acceptable.

So, yeah.

[@16:40](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Help me. I cannot even see Sarah here, which is weird.

[@16:44](#) - **Schantz Flores**

Now, she may not – I don't know if she – she may not have ever linked – booked through this, but she found us through a Facebook ad.

[@16:51](#) - **Audreyanna**

So I'm adding her. I'm counting her in. Sarah didn't – she didn't go through the link.

[@16:54](#) - **Ryleigh**

No, Sarah called.

[@16:57](#) - **Audreyanna**

She called.

[@16:58](#) - **Schantz Flores**

She didn't go through the link. Okay, okay. Okay. How did she find out about us?

[@17:03](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Do you remember?

[@17:04](#) - **Audreyanna**

I don't know. She just came. I think she called and booked an appointment, but she didn't go to Queens.

[@17:12](#) - **Ryleigh**

She said her friend was on Spravado and she was like searching about nearest Spravado locations and then we were the one.

[@17:19](#) - **Schantz Flores**

Oh, okay. Then she found us. Okay. All right. Let's see. Note that one's here for appointments. got one.

[@17:31](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Nope. That's an appointment. So how many appointments do we have set and how many people showed up in August in general?

[@17:38](#) - **Schantz Flores**

Well, let's just, I want to pull it up. So some of those, some of those are my pre like previously standing clients that are just coming in for treatments.

I'm looking. that Hmm. Okay. I've seen lots of counseling sessions. Somebody's doing something for it.

[@18:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

A lot of what, didn't hear what you said? Counseling. Oh, canceling.

[@18:06](#) - **Schantz Flores**

Okay. Yeah. Was the first of August when Paula was out sick a lot? Guys, do y'all know?

[@18:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I definitely don't know. No, no, yeah, you know.

[@18:26](#) - **Schantz Flores**

Okay, here we go. A couple of evaluations. So Angela Cheatham, she was one through there. She did not qualify because she's not tried enough medications, and I will not be able to get that approved through her Facebook.

This one rescheduled.

[@18:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So she was basically in charge. she was excluded.

[@18:51](#) - **Schantz Flores**

Yeah, she said she was going to stay and stay a patient. We could keep working on like just other meds and try to get a converter once we could, but she never showed back up for a follow up.

So Laura Pfeiffer came in. So that's one of ones we've already talked about. Devin Williams came in. So she actually agreed.

We went through all the stuff. So this is a new one.

[@19:12](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

However, she called us last week and said she's going to hold off. So Devin, I can't even see Devin.

Did I write it right?

[@19:22](#) - **Schantz Flores**

Hang on a minute. D-E-V-I-N Williams. It looks like she booked the widget, too. Yeah.

[@19:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So it's interesting where she booked it from because I don't see it here.

[@19:38](#) - **Schantz Flores**

Okay. Tony Pruitt booked for that.

[@19:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Tony Pruitt.

[@19:46](#) - **Schantz Flores**

Oh, there he is. So he was ruled out because he has one of the contraindications.

[@19:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So he's basically disqualified.

[@19:57](#) - **Schantz Flores**

Yeah, he's disqualified. So. So. So. So. So. So.

[@20:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so let's do a little analysis here. When Tiffany didn't show, first of all, was credit card taken? And second of all, when was she scheduled for?

Like how long from the phone call was she scheduled for? Do you guys remember?

[@20:32](#) - **Schantz Flores**

I'm looking on my side of it. Who am I looking up? Tiffany Franks? So she was scheduled for August the 7th.

[@20:43](#) - **Ryleigh**

I think she was scheduled before we started taking cards.

[@20:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. And how long after did you schedule for?

[@20:51](#) - **Ryleigh**

Like how many days after? I'm not sure.

[@20:58](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Was it the same week or was it after?

[@21:00](#) - **Schantz Flores**

That's the question. It was probably after that week. Because that was before we started implementing everything.

[@21:08](#) - **Ryleigh**

Yeah.

[@21:10](#) - **Schantz Flores**

Okay. Demographics.

[@21:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I can't even find it.

[@21:15](#) - **Schantz Flores**

Demographics, is that the card, or what's the card under?

[@21:21](#) - **Ryleigh**

It should be demographics or account, I think. then, like, no, it should be demographics and then payment info, I believe.

Or that's account, one of those.

[@21:38](#) - **Schantz Flores**

I just want to collect payment and see what pulls up. Yeah, no card on file. So she was one of ones before we started trying to implement that.

And then I'll keep looking through here. Yeah, Helena Newsome. No-showed, Angela Boll, no-showed, Elena.

[@22:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Did I write it right?

[@22:09](#) - **Schantz Flores**

Because I can see her, too. H-E-L-E-N-A, Newsome.

[@22:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Did I? Oh, no. Okay, I did a double. Yeah, she also is not here for some reason. That is so weird.

Like, where are they coming from? That's the question. I think that there's a... Oh, there she is. That's weird.

[@22:30](#) - **Schantz Flores**

Yeah. so we moved her to the next show. So she's on there twice. Okay.

[@22:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Um... Interesting.

[@22:37](#) - **Schantz Flores**

Let's see...

[@22:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So she came in on August 10th.

[@22:41](#) - **Schantz Flores**

When was she booked for? Uh... She was booked for 820... 822? No, I'm sorry. That's her birthday.

[@22:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Hang on just a second.

[@22:59](#) - **Schantz Flores**

Hang on. Uh... 820...

[@23:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so that's a major problem that we have. We are not, like, we have to do everything possible to optimize for the closest date possible.

Closest date possible because the chances of people, and it's like proven by studies and everything, the chances of people showing up if you book them after just four days is unbelievable.

Like, I'm going to take it, I'm going to give you an example for a client of mine that's not even a clinic.

He runs webinars, okay, live events. We run, we do a webinar every single week, okay, and then we have a budget running from Monday, okay, because Monday is the live event.

So we run Tuesday, Wednesday, Thursday, and Friday, and 80% of the people that sign up are people that signed up on Friday, Saturday, and Sunday.

So we're not going be up to Tuesday, And Friday are not coming because there's such a long gap and people are so busy and their memory is so short that they're not going to do it.

Also, the pain in which they're at when they sign up for the ad is the highest. Two weeks after, life goes by, they don't really see our ads anymore, and we don't have a nurture sequence for two weeks, which makes it basically impossible for us to keep them warm and keep them intact with what they're doing.

And also, we need to take into consideration that they are dealing with depression, which makes them even less likely to actually take action.

So, girls, the main thing that you need to optimize for is when you see a booking, like optimize for the closest booking possible on the calendar that is available for either Schantz or Paula.

[@24:49](#) - **Schantz Flores**

And also... So if they're doing that, even if they're booking through the widget, because that's one of the problems, it's not going to show the most optimal appointment because it's going to show what's first available.

So, like if they're clicking, you know, two weeks... That's what's showing up in the widget. When our girls call them, hey, would you like something closer because we can fit you in at this date?

ACTION ITEM: Brainstorm incentives for patients to book earlier appointments. Note ideas in calendar. - [WATCH](#)

Because I can double book for my Spravato treatment. So even though it's showing closed, I can still squeeze in another patient at that time because I'm not with the patients the entire time.

[@25:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Does that make sense? That's perfect. Yeah, we can do that. We should do that. And also, we should also give them an incentive.

So this is like a bit of a brainstorming thing now. What kind of thing can we give them as an incentive to come earlier instead of two weeks out?

Is there anything that we could give them? It doesn't have to be something that costs you guys money. just needs to be something that is going to be perceived as valuable to them.

That makes sense.

[@25:51](#) - **Schantz Flores**

That's a good question. I would say a free consultation, but then I start getting into the liability of like Medicare, Medicaid.

Because if I do it for one type of person, I have to do it for all. Let me think on that one.

I don't know. I don't know on that one for sure.

[@26:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. All right. That's like, this is, take like an hour today, in my opinion, and like write that down in your notes calendar.

Just sit down and understand what we can do.

[@26:25](#) - **Melissa.**

Let me do it. We'll put them on intake with me.

[@26:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Be helpful. Just a second. My response died. Wait, I need to find. Just a second.

[@26:36](#) - **Melissa.**

Melissa, actually. We're going to bring it back, okay? Okay, I'm going bring it back here.

[@26:42](#) - **Schantz Flores**

If I can do the criteria to diagnose the major depression, treatment resistant, you can at least say yes or no, you're a possible candidate.

And we can get you to one of the med providers.

[@26:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That way we can get them in faster. Okay, Speed guys.

[@27:00](#) - **Melissa.**

Isam.

[@27:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I cannot hear you.

[@27:02](#) - **Melissa.**

Wait. Can you hear me?

[@27:03](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Some Zoom technical difficulty session for a second. Let me see. Okay. Okay. Speak.

[@27:13](#) - **Schantz Flores**

Okay.

[@27:14](#) - **Melissa.**

Well, you know, I'm a mental health therapist. I could always do, I mean, honestly, I'd still like to build a 90791, though, but so it'd need to be at least 50 minutes, but we can tailor the questions around that, maybe.

[@27:29](#) - **Schantz Flores**

Yeah. So she can technically do a psychiatric evaluation. She just doesn't have the medical exam part. So she could give them the diagnosis of treatment resistant major depression.

So kind of get a partial evaluation out of the way and get them established with care faster if they go with her.

And in that way, it's only like a 30 minute appointment with us to come back and see if we can finish getting them approved for Spravato.

[@27:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Okay. That's cool. Yeah. So if you can do that, this is, this is perfect. This applies. Okay. do

So very important to implement that. Is there any way that, girls, is there any way that I can help you implement that?

Because this is, for me, okay, the most important thing to optimize for. The most important thing. Because it keeps them in the ballpark of them having the pain and being excited to, like, you know, they left their details, they read through our long ad and watched three minute video of an ad because they resonate with the pain.

They submitted the form on the landing page because they resonated with the pain. They booked themselves on the widget because they resonated, because they really do need help.

So we want to make sure that we keep them warm and get them to come as fast as possible.

[@28:44](#) - **Schantz Flores**

So this is important. That's a, you know, I was ruling it out because she can't prescribe the medication, but we could get them in faster by doing that, by keeping them seeing Melissa and the girls, Adriana and Ryleigh, when they talked to them.

Even if they're scheduled with me or Paula, I hey, you know, I know you're scheduled this far out to see one of the med providers, but we can get you in quicker and start the process if you can come see Melissa, who's one of our therapists, and you don't have to keep seeing her because they may have their own therapist, but she can at least do the, that's one of the things that people ask me is like, can I keep seeing my own provider?

Well, yes, you can, because all we are is a treatment center. So, you know, making it clear with them that Melissa is not taking the place of their current therapist.

ACTION ITEM: Implement new process - book initial evals w/ Melissa for faster patient flow. Communicate changes to staff. Print August no-show list for follow-ups. - [WATCH](#)

She is helping us get them in faster to get evaluated to see if they are a good client.

[@29:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's perfect. So this is like the number one thing that we want to implement from now on for all new leads.

Number one thing.

[@29:43](#) - **Schantz Flores**

Melissa has the time. So we've definitely got spots for Melissa to fill.

[@29:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, that's perfect. That's what we want. Okay, so girls, please note that extremely important. You guys are doing a good job, a very good job with booking people.

Our cost per booking is great. I see what you guys are doing. With the follow-ups, just implement this one extra thing on top of the things that we have now, you know, just to make things way better.

In the end, we want to make sure that we get as many patients as possible.

[@30:11](#) - **Schantz Flores**

I want to make it clear for both of the girls at the front and Melissa that when I can get this AI figured out and I get it running smooth, I think this is going to help significantly with our callback time and our booking rates to where, Melissa, you may not have any openings within three months.

[@30:33](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

All right, so, so we have Helena, which for some reason doesn't show up in the opportunity. I don't even know why she doesn't show there, but, okay, so we have her, which we understand why she didn't show.

You guys can do, like, I do recommend you guys to go through all the no-shows that we had in August, make a list out of it, you know, and just call them.

Call them, ask them if they want Come back in if it's a good time, obviously for the people that didn't show up and didn't talk, because if you're going to call them from the local phone number, they're probably not even going to remember.

Just call them, say hi. You're supposed to come to an evaluation. It didn't work out in the end. We wanted to know if you wanted to come in the next week.

We have like one spot available for the next week on this Thursday, and we wanted to know if you want to take it.

So, yeah, book them. You don't even need to book these guys with a credit card just because they already no-showed, or you can try that out.

I mean, I guess it doesn't really matter.

[@31:38](#) - **Schantz Flores**

Just because you didn't take credit card the first time, they may be way more resistant to it the second time.

Yeah. Hey, and for your records, Oriel, I know that because we've signed a BAA, so everything's HIPAA compliant. I've got a report I'm going to print for you that will show the no-shows.

Mm-hmm. Mm And I'm going to actually send that to you probably – is Slack HIPAA compliant?

[@32:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I don't know. I have no idea.

[@32:08](#) - **Schantz Flores**

Okay. I know my email is. I may send it to you that way so at least you can look at it and see.

Because I'm sitting here looking at it, and I'm finding even more no-shows that are showing up on our thing on Google or GoHighLevel.

So there's several that aren't showing up. There are several that have rescheduled. They've got new insurance. Their insurance changed.

They lost their insurance. We had one lady that lived in Tennessee and didn't realize how far away we were.

[@32:38](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I don't know how she got the ad unless, like you said, she was driving through or something like that.

Yeah.

[@32:43](#) - **Schantz Flores**

That's like 100% what happened. There's no other way.

[@32:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So. Yeah. Okay. So we've had a lot of shows up until now. We had a bunch of shows. From what I understand, we had like seven or eight shows, correct?

We got four people disqualified. got four So how many people do we have booked for the next couple of days?

Did it look promising? Is there any way that we can already from these new people, if they're booked out for the 9th of September or anything later than that, call these people and get them booked in earlier.

Let's just start optimizing for that and implementing that as fast as possible.

[@33:27](#) - **Schantz Flores**

Yeah, no, we've actually got six leads already in Tebra this morning from this weekend, and several of them were already booked with Melissa.

So that's worked out perfect. A couple of them are booked with me that are out like next week, but if we can get them in this week, that would be even better.

Yeah. So yeah, I'm gonna send you this list and I'm trying to run a report just for, so if I can change it to Spravato evaluation, so that's all we can see.

But yeah, yeah. So I think those are definitely reasonable options. And girls, I don't know, is Riley still on here?

[@34:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Where did she? You have to hop off while she was driving. It doesn't seem she's not here.

[@34:06](#) - **Schantz Flores**

She can hear you.

[@34:08](#) - **Audreyanna**

Okay, okay. Let me have my son look into it.

[@34:12](#) - **Schantz Flores**

He'll be in a little rock clinic if you want to. Okay, that's not us. Let's see. Okay, yeah, I printed off one just strictly first for vital evaluation.

ACTION ITEM: Call patients booked >5 days out. Reschedule for this week. Offer Melissa eval if Schantz unavailable. Emphasize exclusivity/urgency. - [WATCH](#)

So I'll send, I'll print this and this to you. And then girls, you guys can use this list as like the code calls to follow back up with these people to see if they want to come back in.

ACTION ITEM: Call patients booked >5 days out. Reschedule for this week. Offer Melissa eval if Schantz unavailable. Emphasize exclusivity/urgency. - [WATCH](#)

[@34:32](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, extremely important. In my eyes, we get off this call, first thing you do is call the people that are booked more than five days ahead and try to book them for this week for what's opened.

Like that's the most important part, like the new leads are important, but you know, most important ones are people that are booked and they're booked too far out.

We want to book them for this week, give them an incentive, tell them, okay, if Schantz is not available, tell them to book with Melissa.

Tell them, oh, you're going to get this provato. Well, We can help you faster, and we got a spot opened up for you, this XYZ on blah, blah, blah.

So this is the only spot that we have this week, and we're just going to be able to help you faster.

Does that work? Just, you know, give them an incentive and play the psychology game. Make them feel like it's exclusive and it's not going to be something that, you know, it's like a one-time thing.

Or you're going to have to wait another week and a half. So make it, like, in their interest to feel like they need it, you know, it's important.

It's not for you guys, it's for them. So just keep that in mind. Have that mindset when you call them.

And, like, the first thing that you do, like, I don't want to tell you what to do, but if you can do that when we get off the call, I would very much appreciate that.

That's going to help us all. So, great. So we have, what, six people that are booked for the next couple of weeks, or was it?

Yeah.

[@35:56](#) - **Schantz Flores**

Okay. Yeah, but I know that are brand new. Now, I haven't looked to see how many are already on the schedule.

[@36:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Those are the ones that are new just from this weekend. Okay, cool. Do you have any data on how many people we have booked in general for the next couple of days?

[@36:09](#) - **Schantz Flores**

Yes, I'm playing with my list right now trying to run reports.

[@36:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, cool. So our CPA basically seems like only one person started. We have a couple of other people that are on the verge of it, which we need to optimize, obviously.

We need to optimize more. We need to get the booking rate a bit higher, following up with people a bit more, getting the booking, getting people to book way closer.

We need to optimize things, but our cost per booking is good. We just need to get the no-shows up.

Like the no-shows are extremely important because we have like seven no-shows from the bookings, which is not ideal. I mean, it makes sense, but the reasons that we have these no-shows is because of the circumstances in which we didn't know before.

So we're just going to fix it now, optimize and get better because that's what we do. So... Cool. So that's about that.

Your ads. The video ads are working extremely well, Schantz. Like, good job on the ads that you filmed. Hey, y making fun of me.

I thought I looked pretty good in that. Come on, man. No, no, it was a good video. was like, do you remember?

[@37:17](#) - **Schantz Flores**

I was basically shitting on your first videos.

[@37:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

But you improved extremely fast. Like the final videos, I was like, damn, he got it. So that's great. Cool.

So we're going to continue on this path as well. can also, we may be also able to start TikTok.

I don't know, though. They're extremely harsh with their policies and everything. So, yeah, and I'm still trying to fix the thing with the pixel because that's also making it hard for us.

[@37:48](#) - **Schantz Flores**

What is that?

[@37:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

What is the problem with that? I've never had this before. I'm very surprised that it actually happened. Like they have like data restrictions because of certain data that we send back to Facebook.

I'm assuming it's because of the. And the questions that we ask. So I did a new pixel. It wasn't flagged or anything yet.

And I want to see what's going on with that and see if it's actually going to be flagged. And if it is, I'm just going to have to hop on a call with the meta service team and everything and see what we can do to get that off because we do need to track data.

It's not good that we're not optimizing. So that's about that. And I'm on this thing. So, okay.

[@38:30](#) - **Schantz Flores**

And I will tell you. So, and also when I say I'm taking all the more medical questions out of go high level, like I'm still going to give you full access to the AI dashboards that you can see.

When the calls are made, the AIs and all that stuff and go high level, you can see if they're being ruled out in the calls.

[@38:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@38:49](#) - **Schantz Flores**

I'm not trying to hide anything from you, but if we're going to get more in depth in the questions we're asking on the phone, then I need it to be more HIPAA compliant.

[@38:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Yeah. hundred percent. A hundred percent. So a question. How many. How much did the AI company charge you, if you want to talk about it, of course?

[@39:05](#) - **Schantz Flores**

No, that's fine. It's \$9.99 is what I was able to get. Oh, that's it.

[@39:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Are they good, though?

[@39:14](#) - **Schantz Flores**

I'll let you know. I will say when I called the AI, the basic version, like with having all the blanks in it and everything, honestly, was really scary how good it was.

I let a pair of mine listen to it here in the office for their medical clinic. I said, hey, you know, if I can get this working right, maybe y'all can use this and cut some costs.

And she said, that's a robot? I was like, yeah, that's not a real person. But it was really clean.

And then just even with the tweaks they've made so far, even though it's not perfect, it's really good. So, and it's already set up to be able to forward to like a call center if they're suicidal.

[@39:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I didn't hear anything that you said because my internet died on my Wi-Fi for some reason. don't know what happened.

Sorry.

[@40:02](#) - **Schantz Flores**

Okay. So they, it is really good. I called the basic version and it sounded really good, even having all the stuff wrong with it.

And I let a pair of mine listen to it and see if could use it for their medical clinic.

And they were really impressed with just the basic crap version because it sounded so much like a real person.

ACTION ITEM: Message Sebastian (AI company). Connect him with Oriel re: potential partnership. - [WATCH](#)

And just even implementing the changes specifically for my clinic and things. mean, obviously there were some hiccups, but it's really good.

I think it's going to, I think it's going work out. Okay. Um, so we'll see.

[@40:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Cool. Okay. So if you, if you can send me the number, that's going to be great because I'm actually, I don't want to invest time to learn the voice AI on my own.

And I don't really have a company that I actually trust. And if you're saying that they're good, you know, you know what you're doing.

Like you're very intuitive with tech from what I've, uh, understood, which is very impressive. So if you can send me their number, I want to talk to them, see if I can have a potential partnership with them and post something on.

[@40:59](#) - **Schantz Flores**

I'm 100%. Because the more referrals I get, I can potentially get it for free.

[@41:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I'm all for that, man.

[@41:07](#) - **Schantz Flores**

That's great.

[@41:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

We love that.

[@41:10](#) - **Schantz Flores**

And they also said, I talked to one of the owners, his name's Sebastian, and he said he's used GoHighLevel and implemented it for like over five years.

And he's a previous marketing guy. So he said he's very familiar with it and made sure that his AI could implement with it 100%.

[@41:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is it a \$9.99 retainer, basically, that you're paying them?

[@41:31](#) - **Schantz Flores**

It's basically a subscription, \$9.99 a month.

[@41:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. That makes sense. Yeah, because I'm really debating whether to hire, because I do want for other clients to have, because not all clients obviously have a fundus team, which is also good in, you know, following up with what we have.

So I do want to have a system in place in which I call the leads and everything, and I'm just debating, because it's really on the verge.

Voice AI is really on the verge of being able To replace humans. Really on the verge. So I'm debating whether to hire somebody, train them, pay them \$1,000, but then they can take care of 10 clients or just implement voice AI and, you know, take care of everything.

[@42:14](#) - **Schantz Flores**

This voice AI, it's scary. I let my hospital staff listen to it, too. And my secretary over there said, I'm going to be replaced in five years.

So, I mean, it was that good. But yeah, I'll get with, I got a Slack channel with Sebastian as well.

I'll message him in a little bit. Because like I said, I was going to have get everybody together anyway to implement it for this.

So I'll just see if I can go ahead and get on the ball early and get you guys together.

[@42:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. That's great. Okay. Awesome. So, uh, okay. So I went over all the things that I wanted to go.

I'm glad like we had, uh, honestly, to be honest, I had like kind of a limiting belief before we went on the call was like, it's the way that we're like analyzing the data.

Yeah. They're going to be good, but I was like, okay, I know what I'm doing. I've done this like 7,000 times.

So, yeah, it's different because the clients in this role have such a different type of business structure. It's not a clinic-wise.

It's more of a high-ticket sales thing for different industries. So we analyze data differently there, and everything's different. But I was like, okay, let's just do what I know how to do, and that's it.

And that's great. So we know what to optimize for. We know what we want to do from now on when it comes to the bookings.

The lead flow is good. The ads are working. We just need to make sure to take care of the things that are most important.

That's actually getting people to show up and getting more volume of that because that's the most important. Without that, we're not going to get any results.

So that's about that. And the last thing that I wanted to ask is, so how many people do we have on the verge of joining?

Is there, like, a number of that besides Laura and Miss? a of of Is of Is number that?

[@44:01](#) - **Schantz Flores**

Is Is Laura and Sarah, both of those, and they're both initial Medicaid, but they both have a secondary insurance that's going to be kicking in at some point.

So I think I could convert both of those from a perspective of do they meet criteria? Yes, they both meet criteria and they had no contraindications.

So I think I've got two that are on the verge of it, but it's a battle of figuring out how their insurance is going to pay for it.

So, okay, that's cool.

[@44:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Any other people that we have on the verge or that's it?

[@44:32](#) - **Schantz Flores**

I've got one, two, three, four, five, six, seven, eight, eight patients scheduled for the month of September already for evaluations.

And that's just what's showing up on my list. Plus, I guess the three that are on Melissa's list from this morning that are going to want to come in for spavoidal evaluations for the month of September.

[@44:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's great. That's cool. Yeah, it's a lot of September. Let's go. Yeah, that's great. Okay. So yeah, we want to keep going in the same course.

We're going to film more ads, do more things, know, just keep optimizing. We just need to optimize the most important part because the ads are working.

The cost for booking is low. Only thing that we need to fix is getting people to show up. Once we have that dialed, we're going to be on the wave.

Like it's going to be extremely simple. Like we have the first part. We have the, I actually did a video about that yesterday on the five metrics that are most important as cost for lead.

And then we, after that, we have the amount of, bookings. then after that, we have the no shows versus shows and we have the closing and all these, all these things.

[@45:37](#) - **Schantz Flores**

So actually full transparency, something else that I'm working on is I went with a marketing company to like do SEO optimization and to like manage my online, like I guess status, because one thing people were not pulling up was when they were typing Spravato near me or Spravato treatments or I wasn't showing up.

They would only find me through Facebook. So like, even if like, like, They did it through that. They, I guess, didn't think we were a legit company.

So I've hired somebody to come in and help optimize that as well. It's supposed to have that hopefully fixed by the end of the month.

We'll see.

[@46:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Do they do general SEO, like old school or AI?

[@46:18](#) - **Schantz Flores**

Because AI is SEO now. Both. They do AI too, yeah. They're going to start posting my blogs online, and then they're going to optimize my Facebook profile.

And they're going to do all my posts per month. just straight post, so I don't have to keep going there and doing AI myself.

And it's easy, but it's still time that I don't have that I'm up at night trying to do it.

[@46:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's good. Okay. All right.

[@46:43](#) - **Schantz Flores**

And they were compliant. I told them that I was not going to use them for the AI or the Facebook and Google ads that I was going to keep using you for right now.

And I wanted to see how this worked out, and I felt like we had a good thing going. We got traction.

We tried to figure out how to optimize it. And they said a lot of places, you know, don't want to work with another marketing agency or anything like that.

[@47:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And they said they had no problem doing that, so that's cool. Okay, no problem. So, yeah, that's mainly all the things that I wanted to go over.

Is there anything else that you guys want to add? Any questions or anything like that?

[@47:18](#) - **Schantz Flores**

No, I think that's it.

[@47:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Cool. Hey girls, do you have any questions or anything or?

[@47:27](#) - **Schantz Flores**

We got Melissa. I think Melissa may be getting ready to see a patient. I don't know. We might have lost the girls a second ago.

I saw their names drop off. So I'll touch base with them, and I've got this recording. I've got the highlights here.

I've got my Fathom recording.

[@47:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You can send me the video that I can send to them, I'm going to have them look at the notes, my AI notes from this, and tell them the things they got to work on.

Okay, awesome. Cool. No problem.

[@47:50](#) - **Schantz Flores**

All right. Okay, guys. Thanks, man. Have a good one. Talk to you soon. Bye, guys. Bye-bye.

Transcript 7:

Rosana - September 16

[VIEW RECORDING - 56 mins \(No highlights\)](#)

[@0:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Hi there, Rosana. Just a second. Improving your Fireflies and also connecting my AirPods. So, just a second. Speak. I want to see if I can hear you.

[@0:25](#) - **Rosana Graves**

Yeah. Can you hear me?

[@0:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes. How's it going? Wait, let me turn on my camera. Okay. How's it going?

[@0:33](#) - **Rosana Graves**

Doing well. Great to meet you.

[@0:36](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Great. Great to meet you, too. So, I want to be as direct as possible. This is not a conversation in which we're going to talk about how your dog is doing today.

I want to do one thing, and that is to help you, give you value, show you what I can do, show you how I work, how we work.

And in the end, if you're going to see that we are a good fit, perfect. If not, I'm going to send you resources that will be able to help you whether you pay me or not.

Pay me. Does that make sense?

[@1:02](#) - **Rosana Graves**

Yeah, sounds good.

[@1:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. Awesome. So I want to go over the marketing audit that you filled out. So you have 15 patients right now.

As I see, you have TMS and ketamine. You are working with an agency now and you're getting poor leads.

Is that correct? Yes. So first question is, I want to know what happens with the poor leads. What does that mean, poor leads?

Can you elaborate on that a little bit?

[@1:34](#) - **Rosana Graves**

Well, I don't know if it takes time. They're telling me it's going to take 90 days for the ads to get dialed in.

I don't know that I believe that.

[@1:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Red flag.

[@1:45](#) - **Rosana Graves**

Yeah, most of the leads that are coming through go cold. We can't get a hold of them. Right now, the call to action is just to fill out a form.

So we get their phone number, their email and their diagnoses. And then we attempt to. We would them immediately or text them immediately, and we're just not getting any responses.

There's also a number of them that are coming outside of what I would consider a radius of where we want to market, over 30 miles or 25 miles, enough where they could find a local TMS or Ketamine or Spirbato clinic near them.

[@2:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. So I want to start analyzing and mapping out exactly what's going on with the marketing funnel. So first things first, are you guys using a landing page or are you using Facebook lead forms?

Do have any idea what's the difference between these?

[@2:36](#) - **Rosana Graves**

I believe there's a landing page.

[@2:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, let's check that out. You want to see, I want to show you something cool. I can search up your clinic and see what types of ads you're running right now.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

So it's a pretty cool trick if you want to go and also like analyze competitors. So let's see that.

Okay. Okay. So is that your clinic? Mm-hmm. Okay, cool. So we have, I can see there's a bunch of ads.

So it seems like you're running with these guys for about a month. So as you can see, it's been running from the 20th of August.

Okay, so seems like it is a landing page. You are working with Ketamine Media. Is that correct?

[@3:21](#) - **Rosana Graves**

Yes.

[@3:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, they have a template for the landing page, which is a nice template. So the fact that you're using a landing page is a green flag, okay?

Red flag is that they say it's going to take 90 days because it doesn't work like that. The messaging is what dictates whether the ads are going to work or not.

Now, another question that I have is, how many leads are you getting a day? And how long does it take you to call the leads back and get in contact with them?

[@3:53](#) - **Rosana Graves**

So we've literally, we've been up a month. think my ad budget was \$2,500 and we've gotten a total. Mr.

I Maybe 13 leads. Typically, when they come in, they're getting a call back. We're seeing, unfortunately, an email notification a little bit later, so usually within 5 to 10, 15 minutes, unless it comes in in the evening, and I don't have anyone working in the evening to give those leads a call, so they're getting called first thing in the morning.

[@4:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. So, wait, so you spent \$2,500 both on the agency and in the ads, or just on the ads?

[@4:27](#) - **Rosana Graves**

Just on the ads. so, to me, that's just a really big red flag, and I don't want to waste any more time.

I'll tell you what resonated with me from the ad that I saw of yours is I am not a medical provider.

I started this clinic because of the impact that it had on close family members' lives, and I find a lot of the marketing out there is not really geared towards the user.

In the feel like there's no emotional hooks. There's no authenticity. It's just a bunch of facts about TMS, and I think education is important, but I find this a really whitewashed, kind of boring ad campaign, and I'd like to mix it up.

I've already created a bunch of content, video content, that can be used, but I'm afraid to give it to them because I'm not sure if they're going to be able to couple it with the right copy to really draw readers in.

[@5:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm. Okay, so first things first that I want to talk about with the marketing education, I'm glad that she resonated with the ad, that means I'm doing something right.

Another thing is the red flag that you're talking about with the \$2,500, that's not a red flag, that's a black flag, that's a major black and red flag, I don't know what to call it.

That means your cost per lead is \$220, yeah, \$220, that's insane, that's insane, and cold Yeah. So that's very bad.

Okay. I just want to show you, I want to show you an example of one of our clients ads.

Okay. So you understand exactly what type of marketing I do. And then if you have time, I also want to walk you through two presentations.

These are two YouTube videos that I did in which you can go watch them, but I can also walk you through the presentation to understand exactly what we do and how we work.

Before that, which ad did you come from? Did you come from the video ad or from a...

[@6:30](#) - **Rosana Graves**

It was a meta ad. It was on Facebook. You discussed the... You discussed that most ads are not targeted towards the user's experience, meaning that they're already disillusioned with therapies out there that have been geared towards them because everything has failed.

So there's no trust built.

[@7:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's right. Okay, so let's show you this guy's ad. It's like. Bonus, get, uh-uh-uh. Where is his ad? Just a sec.

Okay, so just for you to get a bit of context, um, we have, uh, one campaign running, and you can see we had this campaign running.

The reason it's turned off because Facebook got onto us, caught onto us, because what we do in the landing page is we filter people out, okay, and I usually ask questions about if they're clinically diagnosed.

And sometimes Facebook goes. And they understand that, so we needed to duplicate the campaign, but as you can see, even with this campaign, which surprisingly with more filtering, got a lower cost per lead, we got \$11 leads and on a way lower budget.

And that's because of the ads. Okay. So ad number one that I really, really like to use. And if you have a clinic picture or anything like that, that's going to work immensely, immensely well.

It's like a breaking news type ad. You can see that it's extremely viral. It's gone extremely viral. And it's basically a very, very long ad that talks about the one real way to solve depression.

Obviously, there's not one real way, but the client had no problem using that wording. And it's basically a very, very long ad copy talking about, you know, basically making them feel like we know what they're going through.

Okay. So we're talking about how old meds work. We educate them. And then we talk about what's the alternative.

Stop to mute the signal if the house is burning and feed it from the root. then we introduce bravado, explain how it works.

And it's basically the same thing for ketamine or psychedelic therapy, psilocybin, hopefully psilocybin is going to become legal soon.

And that's what we do. Another type of ad that we run, which works extremely, extremely well, is the patient testimonial ad.

Did you have a chance to look up any of my content, by the way, or the video that I sent you?

[@9:23](#) - **Rosana Graves**

I didn't. I watched the video that you sent, and then I found another one just through a Google search, but I haven't gone to your social media page.

Is that where you have most of your, yeah?

[@9:33](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes, I have on my Instagram. I have about 30 videos on my Instagram and another seven videos on YouTube, approximately.

So yeah, I talk about everything there. So there's, I keep things simple, okay? I use only two types of ads.

One is the educational type ad, basically making them understand that we know what they're going through. And the second one is a story type ad, which is basically making people resonate because somebody else has been in their space, in their position, they've been depressed, and then they solve.

Now, All The problem with ketamine, so we showed them the bridge between point A to point B, which point A is then being depressed, point B is then being happy, the bridge is the ad, and showing them how it can be done with Spravato, TMS, ketamine, and psychedelic therapy, and this is the winning combination to create ads that work, and, but that's the thing, the thing is, it's not only about the ad, it's not only about the ad, we need to have a very systematic process, okay, very systematic process when it comes to calling the leads, making the leads understand, that we are there for them, and also having everything dialed in to make sure that they feel like it's not an automatic message, okay, so I would usually ask a question, a question that Facebook lets you pass is, what is your insurance, what's your insurance, and then when we ask that question, in the follow-up message, in the first text message that we send them, tell them, hi, this is blah, blah from blah, blah, blah clinic, we saw that you signed up for XYZ, and that your insurance is Y, is that correct?

And we just let them answer. After they answer, there's another automatic message that says, perfect. In order for us to help you, please book your 15-minute consultation in the link below so we can make sure that we can help you as fast as possible.

So, you see, we make them interact with us. We also send a personalized message and we get them to take action because now they feel like it's a personalized message.

And it's not just an automated tech message like, oh, we got your details. Please do blah, blah, blah. Okay?

Now, another thing that I want to ask is, did you have any sales calls, sales consultations inside the clinic?

Do you have any data on that? Because that's also very, very crucial.

[@11:47](#) - **Rosana Graves**

You mean from the 13 leads that we got?

[@11:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, yeah. Nobody came to the clinic.

[@11:53](#) - **Rosana Graves**

No, so we're brand new. And of the ones that we did get a hold of that we spoke to.

Yeah. A few of them were just outside of the radius, so we ended up recommending them to go to different clinics, and then there was a couple, we didn't take their insurance, so we couldn't serve them.

[@12:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, I understand. And in general, do you guys have any other source of leads besides the ads, or is it the only one?

[@12:26](#) - **Rosana Graves**

No, not right now. We're working on kind of a referral partner strategy, so that's currently being executed, but beyond the ads, no, I'm, unfortunately, because I'm not a psychiatrist, right, I don't have my own patient base where I'm building a Spravato or Ketamine or TMS clinic off of that patient base.

So it's important that my ads and my marketing campaign work effectively. I'm in an area of about 100,000 people.

I have zero competition in this area. There's no other Ketamine, Spravato or TMS clinic, so there's no... That's why I shouldn't be able to draw from the community, and a very high net worth community, yeah.

[@13:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's correct. Okay, so we have two green flags, three green flags actually, high net worth, no competitors, which is a white space.

And the only thing that needs to be dialed in, in my opinion, is the content, okay, the content of the ads.

And what I do is that we have this ad that I showed you, okay, but we also use another ad, which is an ad that I encourage everybody to do, okay, which is the video ad.

And as you can see, this is the ad that works the best. This ad I didn't turn off because it brought a good lead.

Once it gets to \$100, then we close the ad itself. So there's like a process to everything. I don't know what the other company is doing, if they have any processes.

But as you can see, it's a video ad, and we basically have two hooks here, and we just talk about the problem.

And, you know, we say, so let's look at this hook. I want to show you exactly what a hook is.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

Do you know what a hook is? There's a new depression treatment that's seeing a 92% response rate in patients within the first three weeks.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

It's FDA-proof, it's not based on pills, and it's backed by clinics like Harvard and Yale. If you've been struggling, this may be the solution for you.

So this is hook number one. You see, it's a very long ad. It's a very long ad. And a lot of people are going to tell you, oh, don't use long ads, people don't watch them, blah, blah, blah.

This is, sorry for the word, that's . Because in the end, when a patient, a client, patient, consumer, no matter who, when they resonate with the ad, and it talks to them, and the flow of the ad is structured in a way that's making them want to keep watching, they're going to watch the ad, no matter what.

It's basic psychology, okay?

[@14:57](#) - Rosana Graves

So what we like to do, is we like to come from...

[@15:00](#) - Oriel Mor (oriel.mor2001@gmail.com)

A couple of different angles, specifically with this clinic, because their budget is not very high, we only have two hooks here, we have another seven hooks to test, and we're just seeing what works.

So you can see there's an ad that caught on, and it works well, and it's just bringing in leads.

So once you crack an ad, it's very, very simple to scale it, because the messaging, once it works and you see what's going on, you can just do it again and again and again.

And once you get more patients in, then there's starts like a snowball effect, if you get people to actually, you know, leave testimonials, which is extremely crucial, by the way, people having video testimonials, after you field them and help them, you have no idea how crucial it is to take testimonials and create ads based on these testimonials.

Okay, so that's based on that. Now, by the way, if I'm overwhelming you with information, or if have any questions, let me know, because my purpose here is to just show you exactly how I work, I don't want to sell you dreams, I don't want to, you know, do all that stuff, it's not me.

Okay, so if you have any questions, feel free to ask me.

[@16:03](#) - **Rosana Graves**

Do you have anything? Yeah, just a real quick question. So on your landing page, you're just getting them to fill out those questions, right?

Because you do landing pages, correct?

[@16:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, yeah, 100%.

[@16:17](#) - **Rosana Graves**

And that's prompting a text, and then it's at that point that you're sending them a booking link to book a call?

[@16:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so we give them the option to book a call in the thank you page. And also, we wait for them to respond to the first message.

And after they respond to the first message and create an interaction with them, then we also send them the booking link as well.

[@16:36](#) - **Rosana Graves**

Okay. And do you find that people are, because my marketing agency said that typically people don't want to book a call?

[@16:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

How's that working for your clients? No, that people are booking a call. They are booking a call because they feel like they're getting the personalized message.

And also, they're getting warmed up before they even leave their details. So they don't just see a ad, say, oh, this is me.

Maybe for me, they sign up, they forget about it after two minutes, and then they just forget about it.

No, we want to make sure to touch their emotional points to the point in which they're going to feel like they need this.

And once they feel invested in it, if they watch a three-minute video and then they sign up, there's a way higher chance of them actually interacting with you and taking action on what you tell them to do because they understand you better.

They know what you're doing. They know you as a person. But when you have a random ad, whether it's going to be a static image of a person being happy after they solve depression or just a picture of ketamine, of a ketamine treatment or TMS machine, it's not going to get the same job done because it doesn't touch your emotional pain points.

So, yeah, but also a very crucial point, and that's the thing I'm working on right now, is if you do not have the ability to call leads as fast as possible, which is also extremely important, we want to send them a message, we also want to call them as fast as possible.

I'm actually implementing a voice AI thing right now. Now, it's very... And it's getting to the point in which it sounds very human.

So if you do not have a front this team, that's another thing that we're going to do. Because the speed to lead is extremely important.

don't know if you watched one of my other videos. If you call leads after 5-10 minutes, their chances of converting drop by 400%.

It's been found in the Harvard Business Study that it's been done on over 15,000 leads. So extremely crucial. It's a lot of pieces of the puzzle that need to be pieced in together.

Once you piece everything together, it just works. It's not just the ads. It's not just the landing page. It's not just sending a message.

It's everything together. But the thing is that you have a bottleneck in the first part of the funnel, which is supposed to be, honestly, the easiest part.

It's supposed to be the easiest part. So the fact that you're getting \$230 leads, it's just not okay. So yeah, I mean, this is basically it.

show next um...

[@19:00](#) - **Rosana Graves**

um... Or, Or, So you design the ads yourself?

[@19:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@19:09](#) - **Rosana Graves**

designed me a little bit about what it is. Yeah. Well, I guess maybe walk me through what it looks like to work with you.

[@19:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. So Ketamine Media is probably using... I want to go into the technical, explain exactly how dynamic is going to be and everything.

So Ketamine Media is probably using this platform, which is called Go High Level, okay? And Go High Level is a platform in which we're going to use to manage all the leads and all that stuff, okay?

Okay. So we are going to use this platform to, again, use everything with the leads, contacting the leads. You're going to have...

Do you have the phone app of Go High Level, of Lead Connector, or...?

[@19:44](#) - **Rosana Graves**

I don't. I don't. That is what they're using. I've used Go High Level with other businesses that I've worked with, but I don't have the app, actually.

[@19:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. The app is extremely important because you can get notifications there and call the leads from there.

[@19:58](#) - **Rosana Graves**

Like, that's... Yeah, I'll download that now.

[@21:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

As soon as possible. the foundations are going to be set. Meanwhile, in the meanwhile, when we set the foundations, I'm going to send you video ad scripts.

Okay. You will need to film the scripts. And I know that you'll be good with filming scripts because it seems like you have charisma.

Okay. It seems like you have charisma and you're going to be good on video. Okay. So that's a very green flag for me.

So you're going to film the scripts. I'm going to give you instructions exactly on how to do so. And after you film the ads, you send them to me, we edit them.

We take access to all the Facebook thingies and all that stuff, making sure that everything works. And our goal is to go live within seven business days.

Okay. Usually it happens even before, but this is our goal. So that's about that. Also, we're going to be having calls every two weeks to analyze performance, understand where our bottlenecks are, see what we need to improve.

Is it with the lead quality? Okay. Is it with the show up rate? Is it with people, not booking calls and see, okay, this is our bottleneck.

What can So problem, solution, problem, solution. It's a never-ending cycle until we optimize it to the point in which you're happy.

Because the only thing that we optimize for is the cost of a CPA, cost per acquisition of a client.

How much is it going to cost us to get a patient in the chair? We don't care about anything else.

That's what we optimize for and we basically reverse engineer what we need to do to get to that point.

Does that make sense?

[@22:28](#) - **Rosana Graves**

I agree.

[@22:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so that's about that. And then we just continuously improve. Every time that our ads get fatigued, we create new ads.

How do I know that ads get fatigued? It's based on the frequency in the ads manager. And we can just basically see, okay, what's going on?

This ad has died out. Let's see what worked. Reiterate. Do more of that. Try new ads. Testimonials. We're just going to go, we're going to be flowing all the time.

Okay, I don't know what Ketamine Media does. I've just, I talked with a bunch of people that worked with them.

They were They're extremely disappointed. They have a strong marketing presence, I guess, but I know that most of our clients are in the end going to come to me, so I don't really care about that.

So, yeah. Does that make sense?

[@23:15](#) - **Rosana Graves**

Yeah, so you've worked with other people that were disappointed with Ketamine Media specifically?

[@23:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, yeah. So, the thing is, there's people that come on the call with me and sometimes I feel like because I'm not that type of person that likes to sell dreams and like touch the pain points and I just show what I do, I feel like I overwhelm people sometimes and then they just feel like they don't want to do anything.

So, I've actually lost sales because of that, but it's completely fine. mean, the main problem is that these marketing agencies instill limiting beliefs inside clinic owners, which makes them freeze and not do marketing at all because they think that marketing doesn't work.

If this huge ketamine marketing thing that has so many clients did not work for me, nobody's going to work for me.

And it's just sad that I instilled these limiting beliefs because they have tools to help people and just try and, you know, fix that.

And that's why I'm actually uploading content and doing all that stuff to actually give value before I even ask for anything back.

[@24:25](#) - **Rosana Graves**

So, yeah, I'm going to rant here. Yeah, well, no, no, that's okay. I worked for online coaches and consultants in that industry for a long time before I started this business.

And I do understand that there's a bit of an art to this and that it's constantly changing, right? As far as, you know, it looks, what do you recommend as an ad budget considering my circumstance?

So Exactly. in

[@25:12](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so it is actually decided not day by day, but by a period of time. So within two weeks, I recommend starting with a \$35 to \$40 a day budget to get an understanding of the first two weeks of what's actually happening.

Okay, what you shouldn't do is run for a month, spend \$2,500, get 13 leads and say it takes 90 days.

Obviously, not. It's not the case, because there's obviously something wrong. Because if you look at the numbers themselves, okay, if you sell a treatment, a TMS treatment, okay, package for how much do you sell?

Usually a TMS package?

[@25:52](#) - **Rosana Graves**

What's your pricing? \$9,000.

[@25:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

\$9,000.

[@25:54](#) - **Rosana Graves**

\$9,000.,000. If they're not covered.

[@25:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So if you're selling a package for \$9,000, you need to understand from these \$9 Okay. What is the maximum amount that I'm willing to pay to acquire a patient?

Okay. Is it \$2,000? Is it \$1,500? Is it \$3,000? And you understand this number based on your clinic's numbers, based on what your expenses are, based on what my expenses are.

need to understand exactly. Okay. This is the, this is the highest number I'm willing to pay to get a patient.

And I'm trying to optimize that to be as low as possible. But when you run for a whole month, you spend \$2,500 and not even single patient came in through the door.

That means that you're already in a, in a position in which your ROI is, it's going to be one to three at max.

And this is like, if it's a very, very good, but nobody even came through the door because what usually happens is that people sign up.

And then there's, if you do a good job, 50% of them are going to sign up for a consult and then 50%, 50 to 60 to 70, between 50% of these people are going to come inside the clinic.

And then if you do a good job. Up at the clinic, 50% of these people are actually going to sign up.

So it's a very strong numbers game that you need to understand and reverse engineer to understand, okay, what are we working here with?

What is our KPI? Not just go blindly say it takes 90 days. No, it doesn't take 90 days, especially in a local area, okay?

Especially in a local area. I agree.

[@27:23](#) - **Rosana Graves**

No, I do agree with you. Now, are you open to, it sounds like you have some prescribed scripts that you like for video, you know, for video material, and you have some particular ads that you know are working well for other people.

How inventive are you getting with some of the creative or some of the strategy? Because I, I, I don't mind following what's working for other individuals, because if it's proven by data, then of course I want to do it.

But if that doesn't work with my locale, like if it's. It's not hitting the audience here in Castle Rock.

How willing are you to be flexible and maybe collaborate on different strategies for ad copy or ad content and material?

[@28:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Of course. So when it comes to copy, what I like about copy, if something doesn't work, which it usually does, obviously.

And after such a long time, I've developed sort of a sixth sense to that. We try different things because, again, as I've said, we have one goal.

OK, and that is to optimize for the lowest cost per acquisition. And we're going to do everything possible and test everything possible to get to that point.

So if there's things that we're going to try out based on my experience and they're not going to work, we're going to have a call and understand, OK, is there a specific pattern that you see with patients?

Is there anything that they're telling you? Is there something different about the mentality of people in your area in which we should focus on?

But usually we don't even get to these points. We don't get to these points because in the end, marketing and if you work with online coaches and all that stuff.

You know, marketing is based on psychology. Once you get the psychology right, then everything else is way simpler. And when it comes to being inventive, I do not like to reinvent the wheel.

I just like to focus on psychology and just use different ad angles. So I am, like, using ads as a puzzle.

I have the hook. I have the meat of the ad, which is the concept that I want to work on.

So if it's educated, if it's a testimonial or a story ad. And then after that, I have the call to action.

And that's it. And if you have testimonials, also inject testimonials in the end of the ad to boost the proof and, you know, make people feel like it's even better.

Okay. And I actually want to show you an ad of this company called Greenbrook. Do you know Greenbrook TMS?

[@29:50](#) - **Rosana Graves**

Have you heard of them?

[@29:52](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. They're probably the biggest provider of TMS in the whole of the U.S. And for them, I'm consulting to them.

Okay. Okay. So I want to show you one ad that is a story-based ad. So it starts with the video of the client saying, by the grace of God, I'm still here.

It was a very dark period for me and I almost took my own life. And then we cut off to the UGC creator or the client saying, Kimberly was dealing with treatment-resistant depression and almost gave up.

If you're in the same spot, this is for you. You know, to catch the audience. You want to catch the audience and get them to keep watching.

Then we talk about Kimberly's story. We talk about her depression and all that stuff. And then we also talk about what she did to get people to resonate with her.

Medication, adjustments waiting, and the depression still lingered. Honestly, it's not a surprise because here's the truth. And then we explain to them based on stats and scientific data on why it doesn't work for them, why they're not broken.

Because there's a lot of people that I'm assuming don't know this trial that has been done, which is actually insane.

The amount of people that don't recover from using antidepressants, and we just educate them and we give them clarity.

That's like a blown away moment. Okay? And we talk about the rest of talk cycling through pills, living half-lives, and not to mention the horrible side effects, just, you know, anchoring the pain, just agitating the pain.

Then we're talking about coming back to Kimberly, and because of that simple system she always took in her own life, and then we transfer to the solution, and we talk We about TMS, and we explain about what TMS is.

Okay? It's not on pill, not therapy. We explain exactly how it works, what it does, and how it works on the brain.

And then we say, so this is what happened to Kimberly. 10-second punchline of her talking about her result. She's happy and all that stuff.

And then we boost the proof again. It's not just for Kimberly. Here's what other people have to say as well.

So we have the testimonials and all that stuff as well. And we then close the ad, give them a call to action, and that's it.

This ad is in production. I already know that this ad is going to work insanely well. I just know it.

Because after doing so many of these ads, I am just, again, it's a sixth sense.

[@32:12](#) - **Rosana Graves**

It's just psychology.

[@32:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So ideally, these are the type of ads that I want to create. Okay. These are the types of ads because once you have a bank of 10 testimonials, 10 stories that you can talk about, you can just blow everything out of the water with your marketing.

Because it's the simplest form of content, but it's also the one that we need to use the most for these types of people because what they need is belief.

They don't, we're not selling them a facial treatment or a roofing or to fix the roof. We're selling them hope.

Hope. That's what they care about. And yeah, so that's what I do.

[@32:52](#) - **Rosana Graves**

How long have you been working? How long have you been working in this industry? If you don't mind me asking.

[@32:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's okay if it's not a long time. Yeah. Yeah. It's about four months. I've gotten into this in about four months.

In general, I've been in marketing for the past four years. I don't know if you've read my bio and everything.

I work with over 150 clients, manage over \$1 million in ad spend. And the reason that I know how the psychology of marketing is because I'm from Israel, if you saw from the ad library.

So the reason is because in Israel, you do not get to choose and pick a specific industry that you can work with.

So we need to crack every client's industry from zero. And to do that, you need to understand marketing at its core.

And that allowed me to develop skills in which it's way easier for me now to burst into this industry and say like, okay, I know exactly what to do.

I have these skills and I have the experience for that. So yeah, about four months, I really do plan to take over this industry in this next 12 months.

That's my goal. That's Um, and yeah, just, I want to change the world in 1% and also, you know, achieve financial freedom in the same time, all the good stuff.

[@34:11](#) - **Rosana Graves**

So, yeah, do you, so you must be a small team now, right? Um, which means I get, every two week meeting would be with you or a team member.

[@34:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it would be with me at some point. would transition to a team member, a client success manager, which I'm going to be working with, um, but it's not going to happen at once because I'm going to be there on the calls and they're going to be, um, they're going to be practicing.

And also what's the most important thing for me is that once I onboard somebody, they need to have the values that I'm looking for, because for me, it's values, skills, and then experience.

Once people have the values that I'm looking towards and they understand the purpose of what we're doing, it's going to be way easier for me to onboard them to the team.

And it's going to be like, like, it's easy for me to talk to you. Okay. It's easy for me to talk to you because I know I'm not talking from a point of, I'm, I'm, I'm desperate.

To sell you something, I know that I can actually help you. I know what I've done, and I know I have value to give.

And I want the people that work with you to have the same thing. So you're never going to be left alone.

That's important to know.

[@35:16](#) - **Rosana Graves**

So far, what are you seeing as the average cost per lead within this industry?

[@35:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Well, it really depends. It depends on the area. But once the ads are dialed in, you can expect to see a cost per lead of between \$11 to \$20.

[@35:32](#) - **Rosana Graves**

That's the average.

[@35:33](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay? That's the average. Of course, it also depends on the landing page. Because in the landing page itself, I put a lot of psychological components that are going to make people actually want to leave their details.

I am not a fan of Katamine Media's landing page. Honestly, it's okay, but it's just not doing the work that it's supposed to do when it comes to the psychological pain points.

And also, The thing is, with the ads, is that the ads need to have harmony with the landing page.

I've found out that if the ads are good, then the landing page matters even less than what the ads do, because the ads do most of the work.

But also in the landing page, we have the elements and the principles to get people to actually do the details.

Also, I'm not a fan of them having these open questions here. It really makes it difficult for people to leave their details, these open-ended questions.

And it's just that it's not good practice, in my opinion. Again, I don't want to feel like I'm shitting on them, but I am actually shitting on them, because that's the truth.

So, yeah.

[@36:54](#) - **Rosana Graves**

Who does all the creative design?

[@36:58](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, the thing is about the creative design. like going in design. I don't really like to design ads. I'm not a fan of designing ads.

I have this breaking news type ad that I showed you, which I have a template of it, so I just need to switch the picture, honestly.

need to switch the picture, switch the location, and I mostly love to focus on having an image that catches their attention, okay, that catches their attention, and then they read the ad, or when we have a video, we do not need any design, because then there's the video.

We need to have the editing of the video itself, but we don't need to have any design. So I love to use authentic images, and there's a very, so you watched the video about the bald guy that I analyzed this funnel?

[@37:41](#) - **Rosana Graves**

I didn't get all the way through, except that it was a little bit longer.

[@37:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I want to go back and look at that, but... Yeah. So I just want to show you his ads for a second, so you understand exactly what I'm talking about, because he's doing a phenomenal job, just really a phenomenal job.

I have no idea who runs his marketing, but it's definitely not any of the marketing agencies that... That are operating, because to run these types of ads, you need to have a very good understanding of marketing.

So I want to show you, so it seems like he's running a lot of video ads. And you can see, there's a picture of him, picture of a brain here, picture of neurons.

And you can see, how do I know that these ads work? Look how long they've been running for. Four months.

That's how you know an ad works, because he doesn't turn them off. And he has an extremely long ad here, talks about his story and all that stuff.

Look at this. This is extremely long, and it works unbelievably well. And he has ads of him talking over here.

I believe the root cause of why we get depression and anxiety, it's not a serotonin deficiency, it's not a chemical imbalance.

That doesn't really play out very well if you really look at the research. So And yeah, he's just every, I can see that every couple of months he's creating new ads.

So as you can see, the last batch was last month. And he's just creating new ads and he does what he needs to do when it comes to marketing psychology.

And the. the. So yeah, I watched the video. really going deep inside his funnel and understanding exactly what he does there.

It's going to give you a really, really a lot of value. I truly do believe in that. And this is basically how I work.

This is the type of way that I work. This is the type of practicing practice that I want to put inside the clinics that I work with, creating super long, educative ads that make people understand that they can heal, creating belief inside people.

And that's it. That's the, that's the main purpose. Very efficient with what I do. So yeah.

[@39:37](#) - **Rosana Graves**

And also there's- don't, you didn't, you do not run his ads, but this is along the lines of what you're trying to sort of create.

[@39:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yep, exactly that. I wish I could know who's running his ads because it's a, it's a very strong, I believe it's a direct response marketer who doesn't, who doesn't like focus specifically on ketamine or anything like that.

because it's You need to have a very specific type of knowledge to know how to write these types of ads, and you need to come from a very specific world to do that.

So, yeah, very much. Salute to him. I've never found anybody better than him, honestly, when it comes to the ads.

[@40:17](#) - **Rosana Graves**

Can you show me some examples of some of the images that you do tend to use for ads? I'm totally game for video content.

I personally would watch video content more than I would stop on an ad. But, typically, when I do find good ads on social media, it's just a striking image that captures my attention versus stock photography of smiling people with their arms in the air, right?

Yeah, 100%. I agree with you. Really annoyed with all of that.

[@40:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I understand. So, when it comes to the graphics, the type of graphics that I'm going to use is mainly going to be graphics that, again, catch the eye.

So, it's going to be something like that. This... Maybe something like that as well. And again, as I've told you, picture of you, the breaking news type ad works extremely well.

And also a thing that I tried out, which didn't really work, honestly, it didn't really work, was the carousel ad.

Okay. As you can see, I tried to do something that was very different. So if you're dealing with a terrestrial depression, what would you choose?

Another pill or more therapy, right? Or more therapy. What if you don't have to rely on either and actually solve the problem from the root?

Okay. And then I get them to read the post. As you can see, brand new concept didn't really work.

Another type of ad that I ran. So I worked with these guys at BrainsteamTMS. I was supposed to actually partner up with them.

And in the end, I didn't because I just didn't see the value of working with them. They wanted to open up a marketing agency for people.

And it was like two people, extremely slow. And yeah, I just, I lifted my ads and all that stuff.

So you can see here's one testimonial ads, which I edited. Okay, so it wasn't like that, it was like four minutes long.

And I edited that. This is another type of ad that we use, which is a new option. There's a new option for children who resist depression.

It's getting attention. That's another one, just a black screen. A picture of this woman here, for example. There's only one who will resolve depression without medicine in 2025.

This is to show you how. By the way, can you see the photos, or do you need me to?

[@42:32](#) - **Rosana Graves**

Yeah, I can. No, that's helpful. I just kind of want to get a gist of what you tend to lean into.

[@42:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so if people do not want to film videos, in which I am very, very stubborn on people to do film videos.

Like, for example, they didn't even want to film videos. They didn't want to film videos.

[@42:50](#) - **Rosana Graves**

You know? Honestly, there's no room. It's just crazy. I, listen, I should be, I have no doubt that I'm going to be.

I just need a good marketing team, because I would run my own marketing, I just don't have time for that, nor do I really want to, but compared to what else is out there, I'm, if I could get someone to execute it well, right, which it sounds like, you know, that's what you're trying to do, I don't know why there's, there's no reason why our clinic and any subsequent clinic we open isn't successful.

It's just, I don't know why, so far from this one marketing team, I'm not getting anything. So, you did mention like a, tell me a little bit about cost, obviously, and you mentioned something about, like doing a one month trial, give me the spiel on.

[@43:51](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, the way that it works, you have the spending for the ad spend as well. For the first month, what we do, we only take the setup cost, okay, so only to set up the ads, do the foundations, everything.

set up we're that, but even We take \$7.97 for that. At the end of the month, if you are not happy or anything of that sort, I'm not giving you 90 days.

30 days is exactly a good time for you to understand whether our dynamic works, whether you see progress and all that stuff.

Obviously, we will need to optimize as time goes by, but after a month, you're going to get a bright image of who I am, how I work, my values, because I can sit on this call and you for eternity.

In the end, what determines if I'm good or not is one month of you working with me. So in the first month, we do not take a retainer.

On the second month, what we do, we have two options. If you do want to continue, it's either \$1,000 retainer and we charge per every consultation a \$20 booking fee.

So at the end of the month, if we get 30 bookings, we get \$600 from that. Or the other option is just a base retainer of \$1,250 a month.

And you are free to cancel every... .. Every single month, there's no contracts, nothing, no, anything like that. I do not believe in these things.

I feel like they create a bad dynamic. And yeah, so that's, that's basically as simple as possible.

[@45:14](#) - **Rosana Graves**

Okay, so let me just clarify for the first month, there's just a setup cost of \$7.97. We run for 30 days, about \$40 a day on ads.

I get a chance to test you out, see, see what the journey looks like. Like, if I want to continue, I can go to \$1,000 retainer with \$20 per consult booked.

[@45:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's correct.

[@45:40](#) - **Rosana Graves**

Or \$1,250 retainer flat fee, and consult booked is not a part of that, correct?

[@45:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes, that's correct.

[@45:48](#) - **Rosana Graves**

That's right. Okay. Now, in order to move forward, then that means I have to deactivate my contract, correct? With my current team.

Yeah, I got to figure out how I'm going to handle that.

[@46:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So what's going on with them? Do you have a 90-day contract with them?

[@46:20](#) - **Rosana Graves**

Is that how it works? I don't believe I have a contract with them, actually. They are supposed to be handling...

They built my website, which I'm having redone because I'm not really happy with how the website turned out, but they handle all the SEO and blogs, etc.

So I would need to find a solution for that piece as well. If you're going to run ads, I need to find someone who can handle SEO and website content.

[@46:52](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm actually working. I don't have that solution yet, but I'm really trying to work on a way to automate these things, to have like automatic SEO.

So that's, you know, it's... You just need to have a very good automation that's gonna be able to know exactly, you know, all the things, all the things that come into having good SEO, and how to rank on ChatGPT as well, because it's not about Google anymore, it's about ChatGPT.

[@47:16](#) - **Rosana Graves**

So I'm really working on a system for that.

[@47:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And you can also find, there's a lot of good people on onlinejobs.ph. I know that can do a good job.

So you can search that up as well. But also, in general, what I would recommend you to do is, I don't know if there's a lot of education about that in your space.

So I don't know if SEO is even going to be valuable in that sense. Because if people are not educated on ketamine and TMS, they're not even going to search that up.

Did they do keyword research in your area about the...

[@47:50](#) - **Rosana Graves**

I don't have that report back. They were supposed to do that. Right now, Google's giving us a runaround.

[@47:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm not even listed on Google's listing at the moment. So there's, there's lots of problems.

[@48:01](#) - **Rosana Graves**

I'm just like...

[@48:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, with Google My Business.

[@48:04](#) - **Rosana Graves**

Yeah, that's also a very important thing to do. Yeah, they're, they're making it very difficult to get to verify businesses now, just because I think there's been so many that have created fake businesses just to capture listings.

But yeah, I will, let me, I'm interested. You're in Israel. So the hours are a little bit different.

[@48:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

This is typically when you meet with people, though, from the US, I take it? Yeah, yeah, approximately. I usually, I usually stop working around this time.

Around this time, I stop working. I usually work from the morning of you guys until around about this time.

So something like that. And if there are specific days in which you're not available, and you really want to hop on a call, I can obviously push that far away.

So that's about that. What time zone are you, by the way?

[@48:58](#) - **Rosana Graves**

I'm in Mountain Time Zone.

[@48:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm in Colorado.

[@49:00](#) - **Rosana Graves**

Okay. I don't know.

[@49:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, love Colorado, by the way. I actually really want to visit there. I don't why. I don't like the U.S.

[@49:11](#) - **Rosana Graves**

in general.

[@49:12](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

like a lot of the U.S., but Colorado for some reason, I don't know. I feel like there's something there with nature and also the fact that they're okay with mushrooms and all that stuff.

So, yeah. So, it's currently, what, is it now 12 for you?

[@49:30](#) - **Rosana Graves**

Yeah, 1220. So, totally fine. What time is it for you? If you don't mind me asking.

[@49:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is it late? 920.

[@49:36](#) - **Rosana Graves**

920. Oh, okay. I'm ending your day. So, I need to, obviously, I need to kind of strategize how I'm going to work that out with them and see what they're willing to do.

I, I know you've just been in the space for four months, but with the people that you are working with, how, how are the leads?

right. Are you guys getting good leads? Do they feel like, are they actually getting converted leads from the ads so far?

[@50:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. So our cost per booking, for example, for this clinic that I showed you is 60 bucks. 60 bucks cost per booking.

But they have a different problem, which is this is where optimizing comes in play. They've had a problem which they booked people too far away, like one week, two weeks in advance.

And that creates a show rate problem, because if you book people more than three, four days ahead, people just don't show up.

OK, so this is the thing that we're trying to optimize to get people to come in faster, giving them incentives to come in sooner, getting the nurse practitioners to come in and take their consultations if the provider itself or the doctor cannot do it.

You know, so there's other things that we need to optimize for, because, again, it's not the cost per lead.

leads to respond. The leads book themselves. The front desk team calls them. People are responsive. But again, there's like bottlenecks that needs need to be solved because after one.

One, two weeks, people just get cold, so we need to optimize in the end to contact the leads as fast as possible, book them in for the closest time as possible to make sure that they're always wrong, and also before they come in, having the proper reminders and giving them value before they come in and giving them reassurance.

So for example, what I would love you to do, which is going to be maybe a pain in the , is to, a day before people come inside the clinic, send them a video, a personalized video of their name.

Hi, Sarah. Just wanted to let you know that I'm extremely excited to talk to you tomorrow and see how we can help you beat XYZ.

And that's it. And then you just send that. Send them reminders. We're going to create also videos that are going to answer frequently asked questions.

So we're just going to have the whole, we're going to have everything set up in place to make sure that people are feeling, feeling like they can trust you, because that's very important with the state of mind that they're in.

So, yeah, so that's.

[@52:01](#) - **Rosana Graves**

So that's about that. So you support and handle a lot of the chat script and video content that's nurturing patients until they come in the door.

[@52:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that's correct. So we're going to be creating scripts for FAQs. You'll film these videos. We're going to edit them.

They're going to be very, very simple. We're going to put them in the thank you page. Also, when it comes to the chat, talking with people, I'm usually keeping it simple.

There's a couple of tools. don't know if Katamimi is using them. Closebot, for example, which is an AI-type AI bot that talks to people who acts like a human.

Haven't implemented that as well. Didn't really see the reason to do that. But that's definitely things. These are definitely things that can be done.

So, yeah.

[@52:51](#) - **Rosana Graves**

Yeah. Well, I worked for years on the sales team of a coaching program. I'm very familiar with all that.

I've never found AI that did a very good job, but I know. Well, that the industry is changing.

[@53:03](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So maybe there's some AI out there that's gotten, that has learned a little bit better. Yeah, you need to give them a knowledge base.

You need to give them a knowledge base and just, you know, correct them all the time. And once you do that, then they're going to catch the stuff.

The knowledge base is the thing that helps the most. So, yeah.

[@53:19](#) - **Rosana Graves**

Yeah. Yeah. Okay. So what would be the next step if I did want to move forward just to reach out to you?

[@53:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes, reach out to me. We can have a call if you want, explain exactly how the steps are going to work.

It's very simple. You're going to, we're going to get the payment done. You're going to fill out the onboarding form.

After you fill out the onboarding form, you're going to have six steps that you're going to need to follow. Two to three minutes, each one of them.

If you have any trouble, you let me know. Once you finish with the steps, we book a call, understand what's going on.

If you need any help, like to, I want to give you maximum clarity in this whole process. And we're going to go from there.

Okay. As I've told you, my goal is to go live within seven days. Okay. So we can start getting data, understanding what works and all that stuff.

So, yeah.

[@54:03](#) - **Rosana Graves**

All right. Fantastic. Okay, let me figure out what I'm going to do, or how I'm going to execute this, but I appreciate your time today, Oriel, and yeah, I look forward to the possibility of working with you very soon, getting this going.

[@54:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Me too. Yeah, you have great vibes. I like that.

[@54:24](#) - **Rosana Graves**

So awesome.

[@54:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So you want me to touch base with you on Monday, or you're going to send me a message? How do you want, where do you want to take this?

[@54:35](#) - **Rosana Graves**

Can I text you at that number that you were sending? That's your GHL account?

[@54:40](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes.

[@54:40](#) - **Rosana Graves**

Okay. I have, I, you can check in with me on Monday. If I don't have an answer for you by then, definitely be by the middle of next week, what I decide that I'm going to do.

Yeah, otherwise I'll definitely read

[@55:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, that sounds cool.

[@55:04](#) - **Rosana Graves**

Okay. Yeah, I'm, I'm, I'm in an urgent state. So I promise that as soon as I'm ready to press go, this is going to happen.

[@55:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So yeah, a hundred percent. I want you to know from my side, there's, there's no pressure. Okay. I want you to make the step in the right way.

Don't, don't go insane. Okay. Because if you're going to come stressed, it's going to be, it's going to be, it's going to impact you.

Okay. So just, so think that out, sit, understand how you want to approach them. Once you got, you got the answers, understand the process, reach out to me.

If you need any help, also let me know. And we're going to take it from there.

[@55:35](#) - **Rosana Graves**

Okay. Okay. Have you worked with anyone who has a Brainsway device yet?

[@55:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Particularly?

[@55:42](#) - **Rosana Graves**

No, no, no. Okay. Okay. All right. Well, I'll speak to them. They, they cover some ad budget for us in the first few months.

[@55:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And so I'll see if they're willing to transition that ad budget over to you. So I don't lose that.

Yeah. Okay. I think if you're on the same ad account, I don't see why that would be a problem for them, because if you run from the same ad account, then I believe they're going to be fine, unless that there's a different process when it comes to that.

[@56:12](#) - **Rosana Graves**

There might be a different process, but I'll ask my contact there to see what she has to say.

[@56:18](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, great.

[@56:19](#) - **Rosana Graves**

No problem.

[@56:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

right.

[@56:21](#) - **Rosana Graves**

Okay, thank you so much, Rosana. you so much, Oriel. Yes, have a good evening. We'll talk soon. too. You too have a great.

All right, bye-bye. Bye-bye.

Transcript 8:

Dawn - June 06

[VIEW RECORDING - 22 mins \(No highlights\)](#)

[@0:00](#) - **Sparklie Sparks Iphone 16 Pro Max**

This meeting is being recorded.

[@0:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Hello. Hello. Just a second. Let me see my camera. What does not show? Oh, there we go. How's it going?

[@0:14](#) - **Sparklie Sparks Iphone 16 Pro Max**

Good. How are you?

[@0:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Great. I'm going to start a black screen today.

[@0:22](#) - **Sparklie Sparks Iphone 16 Pro Max**

I'm in the car, so yeah.

[@0:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Makes sense. How are you doing?

[@0:27](#) - **Sparklie Sparks Iphone 16 Pro Max**

Good.

[@0:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. So I want to dive straight into it. I'm going to ask you how your dog is doing today.

So first of all, I saw you field two audits, two of the marketing audits. One is for skin treatments I've seen, and the other one is for the ketamine.

You want to?

[@0:47](#) - Sparklie Sparks Iphone 16 Pro Max

Sure. Mm-hmm.

[@0:49](#) - Oriel Mor (oriel.mor2001@gmail.com)

So you want to talk about that a bit?

[@0:53](#) - Sparklie Sparks Iphone 16 Pro Max

I want to know what you guys have to offer.

[@0:54](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's why we're on the call. Yeah. Oh, yeah. But before I can offer you something, I need to understand what you're doing best.

Bye. I've done some research. I saw your Instagram. Sorry, competitors. So I need to know a bit about you before.

[@1:07](#) - Sparklie Sparks Iphone 16 Pro Max

Yeah, so I'm longevity medicine, wellness, anesthesia, pain management doctor. been practicing for over 20 years and expanding. There you go.

[@1:19](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay. So have you tried marketing in the past? Are you doing anything right now?

[@1:24](#) - Sparklie Sparks Iphone 16 Pro Max

Because it doesn't seem you are. I mean, I live on an island of 80,000 people. So it's pretty small and word of mouth.

And I've been on the radio. I've done some newspaper stuff. But I haven't done like social media marketing, if that's the question.

[@1:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, because in the audits here, I see that you're not running anything right now. And in the other audit, you say that you're working with an agency.

That's why I'm asking, because you have two different answers there.

[@1:57](#) - **Sparklie Sparks Iphone 16 Pro Max**

Sure. So I have. There is an agency, I think they're an agency, I mean, I don't even know if that's what they call themselves, but they were telling me we could run all these ads and then do, what do you call it, like weight loss stuff, but I had said, like, hey, I didn't think that the weight loss stuff was a good idea for a bunch of different reasons, and then it turned out I was right.

So nothing really kind of came of it, if that makes sense. But they're like, well, we can market other stuff for you.

But nothing has been done. So I don't know how much they actually, you know, besides the weight loss niche, which, you know, people are being, what do you call it, like, sued for doing compounding and stuff now.-bye.

And so I'm glad I never got into it, I guess, because I don't have to worry about it. But literally, like the people who are had originally said they would do ads for me for weight loss are not doing that anymore and are trying to pivot.

So I guess that's the answer to the differential parts of those questions.

[@3:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so you're not running any these guys, they just stopped talking to you? Did you pay them anything?

[@3:27](#) - **Sparklie Sparks Iphone 16 Pro Max**

No, no, I don't really want to go into that with you. don't really think I need to. But like, yeah, I'm still talking to them.

And we still have a report. It's just that they got freaked out because other people were getting sued. And I said, I kind of told you guys, I thought that might happen, given everything that was going on.

And so we said we would pivot. And I just nothing has been done to this point. So because I think like their whole gig was based off of weight loss.

And that's... that's... And that's... I'm giving them an opportunity to pivot.

[@4:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, that makes sense. I want to ask you because you did a bunch of steps to get on this call with me.

Okay, you saw my ad, my ad is not short at all. You read through the whole ad, you submitted information, submitted marketing audit.

I want to know from you, like, what you see in the ad that, you know, made you think like this could be something that is of interest because there are other people that have competitors, obviously, I'm sure you've seen ads of them too.

So Do you have any reason that you specifically hopped on with me? Or you just thought, Oh, this looks cool.

[@4:34](#) - **Sparklie Sparks Iphone 16 Pro Max**

And you have your details. I run eight businesses. I don't really remember. Is this like an interrogation phone call?

[@4:42](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, it's not. No, no, no, no, no, no. It's, it's mainly for me, feedback for me to understand, first of all, why you hopped on the call with me because I need info.

[@4:50](#) - **Sparklie Sparks Iphone 16 Pro Max**

Yeah, but yeah, that's Well, the time when I saw the ad, and I read through it, I obviously was like, this could be good or interesting, or I found something appealing.

not feeling about... Outed at the time. Do I recall what that is now after being in the OR since 5 a.m.?

[@5:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No. Okay. Makes sense. So I can see that you're a very direct person. So I'm going to go straight into it.

I'm going to show you how I work, how my brain works. I don't know if you know what copywriting is.

I'm a very big fan of marketing psychology and, you know, copywriting and all that stuff. That's also probably a reason why the ad appealed to you.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

So I want to show you exactly how I work. Okay. Okay. And I'm going to make it very, very simple.

So just a second. No, this is not the one that I want. Just a second.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

[@5:37](#) - **Sparklie Sparks Iphone 16 Pro Max**

And if it said something about psychology on your ad, I was a psych major, an undergrad. I do pain management, which is very psych-based.

And I do feel like a lot of marketing is based on getting people's feelings involved and kind of bringing them in from the psychology of how they think.

[@5:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's exactly that.

[@5:56](#) - **Sparklie Sparks Iphone 16 Pro Max**

been why I jumped on that.

[@5:58](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yep. Exactly that. If you remember... CARE Framework by any chance, four words, you remember the acronym? Yeah. So basically, yeah, what I want to show you is a bunch of ads that I wrote for a couple of my clients, show you some results, show you how I track results, how we track things, if things are working or not working, and that's basically it.

So the way that I work, I have a structure to my ads, okay? There's a thing for me called hooks, okay?

And the hook is basically the first five to ten seconds of an ad. And by the way, I most of the time do videos, okay?

I sometimes do static ads, but static ads just don't get the same result as video ads. So we basically have the hooks.

You film all the hooks, okay? I'm going to give you a script, you're going to stand in front of the camera, I'm going to give you guides, all that stuff, and you're going to film all the hooks.

And then the point of the hooks is to see which message resonates the most with our audience, okay? So you can see there's a bunch of things here.

There's only one real way to solve the... Over 21 million U.S. adults, and then you say you have a hook here that starts with the area, then they're saying there's a new depression, that is a new depression treatment, but I've seen a 92% response for some patients within three weeks, you see, you attack it from different angles, see what appeals to people the most, and by the way, there's a really, really cool thing now, I don't know if you're up to AI news, there's a thing called VO3 by Google, in which you can actually create hooks and video hooks from Google itself, and it got really, really good.

[@7:28](#) - **Sparklie Sparks Iphone 16 Pro Max**

So I don't know if you're aware of that, that's also a thing that we're starting to use. It's called VO3?

[@7:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yep.

[@7:35](#) - Sparklie Sparks Iphone 16 Pro Max

Mm-hmm.

[@7:36](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay. Yeah, it's kind of expensive, but it doesn't matter. Anyways, so we have the body here, and the body is basically the concept of the ad, and what's the concept?

It's the way that we want to get our message across and shift the person's mindset, and what I love to do is I love to see people through a journey inside the ad.

So what does that mean? First of all, I acknowledge what they did. I acknowledge... It's a situation that they're at, so you see you've done the therapy, taken the meds, you've told yourself to hang in there more times than you can count, but nothing really changed, and then you touch about what they feel, because for people that we talk to specifically, they feel like depression is their personality, because they're being labeled as people that have treatment-resistant depression, which is, in their head, that's it, I'm a depression person now, but we tell them that it's not their fault, first of all, and second thing is that there is another way to solve it.

Okay, we explain why they went through what they went through up until now, why they couldn't solve it, and why traditional treatments could not solve it, and then we talk about the solution, we tell them that there is another way out, specifically with this person, he offers TMS, do you know what TMS is?

Yes. So yeah, he specifically offers TMS, and then we start talking about TMS, what it does, all that stuff, we talk about the fact that it's covered by studies, and you know, all the things, and we talk about the results, and all Where did you and that

And at the end of it, we are, and this is a very, very important point, so we have, as I told you, we acknowledge them, tell them why they couldn't fix it, we show them the fix, fix, and quote-unquote, and then we provide proof.

The proof is super, super crucial. So I want to ask you, do you have any patient testimonials? I've seen your website, I've seen the testimonial section.

It's not good, I'll be honest. It's just a plain text. It's not, it's not going to get the message across.

So do you have any patient testimonials by any chance, anything that you've ever done before, or?

[@9:39](#) - Sparklie Sparks Iphone 16 Pro Max

I mean, have patient testimonials, but they're for my pain practice, not for the wellness and longevity and that practice, because that part of the business is new.

[@9:52](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, that makes sense. So do you have any clients in that space currently, or do you do not even have clients there?

[@10:00](#) - Sparklie Sparks Iphone 16 Pro Max

Right. Yeah, I have people who definitely are saying they want to continue to see me. They're into doing the concierge medicine.

They know that it's going to be cash pay. But yeah, it's like anything. I've been on the island for 10 years, so people know me.

They know Dr. Sparks. It's not that I don't have clients. It's who's going to pivot and who's going to say, you know what, I'm just going to go find somebody who will still take my good old insurance card versus somebody.

who wants to pay cash. I mean, there's going to be people who are like, you know what, like, she's, doctors leave Kauai all the time.

And I've been there for 10 years. So that in itself speaks volumes, you know, yeah, that makes sense.

[@10:44](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, that gives me a very good understanding of what's going on. Cool. Okay. So basically, we show the proof because for people with depression, essentially, when we talk about these people, they have a very high sophistication level, and they're very skeptical.

We show proof. Because they've tried so many things and nothing worked. So we need to prove to them by using other people's stories and success that they could get another result.

And we have ads that we also do that is specifically based on client's journey. So let me find that doc over here.

So there's this company called Joyce, which I made a bunch of ads for them. And as you can see on the left here, we have basically the same format.

We have the hooks and then we have the ads and all that stuff. So this ad, for example, is focusing on a patient called Theathomis, which is completely real.

[@11:39](#) - **Sparklie Sparks Iphone 16 Pro Max**

By the way, this is not made up.

[@11:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And we talk about our story here basically the same thing as the journey that we're going through here, but we attack it from a different angle.

We're using a person's story. And in my experience, using stories from other people that have been in your situation works way better than

Everything else. It's, basic human psychology. So, again, we talk about what she did, how her life was, and then we say that it doesn't have to be like that anymore.

And then we introduce the solution, and again, proof, all that stuff, know, patient testimonial, patient testimonial, all that stuff too.

So, these are the main types of ads that I'm creating. This is how I'm approaching ads. I'm not trying to reinvent the wheel.

I'm not that person. I just do what works and I replicate that again and again and again. And that's it.

So, this is how my ads work. Does that make sense?

[@12:35](#) - **Sparklie Sparks Iphone 16 Pro Max**

So, do you only work with, like, psych people? Like, only ketamine drips, only TMS, only psych? Okay, so if I'm...

[@12:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, keep on going.

[@12:52](#) - Sparklie Sparks Iphone 16 Pro Max

Go ahead.

[@12:53](#) - Oriel Mor (oriel.mor2001@gmail.com)

Say what you're going say.

[@12:53](#) - Sparklie Sparks Iphone 16 Pro Max

Oh, okay.

[@12:54](#) - Oriel Mor (oriel.mor2001@gmail.com)

So, I don't know if you've done some research about me or if you looked into Instagram. If you remember from the ad, I am, by the way, full transparency, I'm from Israel, I'm not from the US, okay, I work with the US market, and in Israel, I've been in the marketing industry for about four years, and in Israel, because the market is very, very small, you cannot choose, oh, I want to work with these people, and these people, and that people, no, you need work with everybody that, you know, is willing to pay you money and has a good product, and blah, blah, blah, so I worked with over 150 clients in 63 different industries, and again, it's focusing on the point of the psychology itself, of the marketing, so, if the, I'm focusing my marketing, and my messaging, and my content, specifically for people that offer ketamine, TMS, psychedelic therapy, you know, Spravato, all these things, but I do have the ability, obviously, to work with things that are in the branch of wellness, it just depends on a couple of things, it depends on your product, it depends on you, who are you as a person, and if you have a high ticket, product,

That's the main thing, that is the differentiator. Because copywriting and psychology, I know the root of it. So it doesn't matter, you know, what kind of business comes to me.

I just would rather, obviously, to work with the same people because I can replicate the same ads, I can basically use the same ads and just, you know, iterate between clients.

So that's the main reason. Does that make sense?

[@14:26](#) - Sparklie Sparks Iphone 16 Pro Max

Mm-hmm.

[@14:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Mm-hmm. So, do you have any questions about that?

[@14:32](#) - **Sparklie Sparks Iphone 16 Pro Max**

Or? Mm-mm.

[@14:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, cool. Now we talked about the ads. Now I want to show you how I work when it comes to data tracking.

How do we know that what we do actually works? So there's two things that we do. First things first, we go, I want to go over the eye overview, because that's more important.

So what we do, I have a sample here of a client of mine, in which we, every single month, we are going to say, set a target.

Okay, we want to understand, okay, what's our main program? The price of the thing that we are advertising. How much money do we want to spend?

And what are the stats that we want to get? What are the stats that we want to achieve? Okay, so for example, here we have 200 leads.

We want, if we spend \$3,000, the cost is going to be \$15. Then we want to understand, okay, how many leads have showed up to the first initial call?

Then after that, how many consoles have been booked? Then after that, how many people showed up to the clinic?

And then in the end, care about, we care about, but the most is how many patients we got signed?

And what is our cash collected? And we set our targets. But at the end of each month, we're going to look at these stats and understand, okay, did we hit the goal?

Did we not hit the goal? If not, why? Where are our bottlenecks? Where do we need to improve? What we need to do differently?

Okay. So that's like the high level overview. And then when you go to low.

[@15:46](#) - Sparklie Sparks Iphone 16 Pro Max

go back to that page one more?

[@15:48](#) - Oriel Mor (oriel.mor2001@gmail.com)

Can you go back to that page one more time?

[@15:50](#) - Sparklie Sparks Iphone 16 Pro Max

Sorry. And that's just how you're going to target people?

[@15:53](#) - Oriel Mor (oriel.mor2001@gmail.com)

Is that what you're saying? What do you mean by target?

[@15:57](#) - Sparklie Sparks Iphone 16 Pro Max

Well, it says target right there.

[@15:59](#) - Oriel Mor (oriel.mor2001@gmail.com)

says No, no, no, target, I mean our target goals for your business, for the amount of money that you want to make, like, you know, the business goals that we want to reach.

Target is not like how we reach people. That's in the Facebook.

[@16:14](#) - Sparklie Sparks Iphone 16 Pro Max

So it says current and the current numbers.

[@16:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, current is like the metrics that we have right now. Like, what are the metrics that we have right now?

Okay, so how much money did we spend uphill now? How many leads did we get? What is our cost per lead?

[@16:28](#) - **Sparklie Sparks Iphone 16 Pro Max**

Are you familiar with all of these metrics, by the way? Because I just assumed that. Yeah, I understand the cost for leads, but I was just wondering, I mean, they just don't look like great numbers at all.

[@16:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I was just trying to like- This is sample data. This is sample data. Oh, okay. I would not give you actual stats of, like, my client right here.

It's not, it's not the place and not the time. Okay. Bye I can show you campaigns that we're running, but I'm not going to give you an in-depth overview of my client.

This also says sample here on the bottom left, if you can see. So yeah, so we're going to set the targets and then we're going to see our stats in the end of each month.

Very, very simple. So that's about that. Does that make sense? Yeah. So and besides that, what we're going to do every two weeks, we're going to go in-depth into every single ad that we're running because we're going to run multiple ads, as you know, multiple hooks, multiple different variations, multiple bodies.

And every two weeks, we're going to go inside every single ad and understand, OK, what are our metrics? How much money did we spend?

How many impressions did we get? How many landing page views? How many leads? What's our cost per lead? Conversion rate?

All that stuff. So we're going to go inside each and every ad and understand, OK, how do they perform and see which ads work best and which ads not work.

And we just turn off what doesn't work and we iterate and keep on working and duplicating. It does work.

So extremely simple when it comes to that. Does that make sense?

[@18:06](#) - Sparklie Sparks Iphone 16 Pro Max

Mm-hmm.

[@18:09](#) - Oriel Mor (oriel.mor2001@gmail.com)

So yeah, two main parts. One is the ads, two is data tracking. And we also have here, this is specifically my account, we're going to use what's called a platform called Go High Level.

Okay. And we have an account here that is white labeled on me, and they have a bunch of great stuff here.

So you will need, we will need to connect to this account, we have calendars here, automations, we will connect to Facebook, Instagram, you're going to be able to see all the leads over here, like you can see people that I have here, we're going to have pipelines inside here as well.

Let me share that. Okay. Yeah, just a second. So we have pipelines here, just for you to see as an example, and all that stuff here.

And yeah, this is going to be the platform that we're going to be using. Does that make Since it's a bit overwhelming, I'm not going to go into everything here now.

It's a very, very complicated platform. So I just wanted to show you, for you to understand exactly how it's going to work.

So that's about that. Let's see if there's anything else that I want to go over. Do you have any questions, any specific questions, something that you want to see, you know, ask me?

[@19:27](#) - Sparklie Sparks Iphone 16 Pro Max

No, I'm just trying to follow it along.

[@19:29](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. So yeah, these are the main things that we're going to be focusing on. This is the main things that I wanted to show you.

wanted to give you clarity. First of all, how I think. Second of all, how I track data. Third of all, where we're going to be working.

How are you going to be managing the leads? Where are going to get the details? What platform you're going to be using?

I mean, and that, that is, that is mainly it about that. If you have any questions, anything that you, you want to know, you can tell me.

Yeah, I can tell you every, I can, I can answer every question, basically.

[@19:59](#) - Sparklie Sparks Iphone 16 Pro Max

So. you.

[@20:04](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, I don't really have any questions.

[@20:09](#) - Sparklie Sparks Iphone 16 Pro Max

I think I get it and understand it, and yeah.

[@20:18](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so let me ask you now, is there anything that you need from me to keep moving forward? Do you want to know the pricing?

Let me know what you want to do. So, I mean, I kind of need you to communicate with me here.

[@20:33](#) - Sparklie Sparks Iphone 16 Pro Max

I mean, I jumped on the call. I heard what you had to say. I understand your system. I see what it's about.

I'm not someone who's going to make a decision this minute.

[@20:47](#) - Oriel Mor (oriel.mor2001@gmail.com)

That makes sense.

[@20:48](#) - Sparklie Sparks Iphone 16 Pro Max

to evaluate things and think of things and sleep on them and let them marinate my brain.

[@20:56](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, that makes complete sense. There's no problem with that, obviously. He could have said that. that. Let's You accept that, obviously.

Is there anything else that you...

[@21:07](#) - Sparklie Sparks Iphone 16 Pro Max

You said you completely accept that, and I'm like, well, you don't have a choice because that's the way I operate my businesses, so that's how I'll accept it or not.

If you didn't accept it, I don't know what to tell you. It is what it is, right? I just need to have this time to process it.

I need to understand. You gave me a good synopsis, I guess, of how you process and how you run, and I appreciate the time, and I will consider it for everything we're doing for marketing.

[@21:40](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, no problem. Yeah, sure. Well, you can talk to me, touch base with me, whatever you want. I'm here.

By the way, I've heard from your tone. I'm gonna be completely honest. For some reason, you sound defensive. I don't know why.

I am just offering you what I have. I don't why you became defensive. This is actually a red flag for me.

I'll be completely honest. So you can think, you can sleep on it. I'm here if you want to contact me and continue, want to speak forward, hop on another call.

And that is basically it. If you have any questions, you're free to talk to me. Let me know now.

I appreciate it. Thanks so much. you. Bye-bye. Aloha. Bye.-bye.

Transcript 9:

Michael - May 07

[VIEW RECORDING - 67 mins \(No highlights\)](#)

[@0:00](#) - **Michael**

This meeting is being recorded. is a hard question, but I do have a bunch anyway. So I guess there's a few.

I'm just going to be open about some of my concerns along the way, I guess, that I have. First of you're an independent person on your own, I guess handling multiple companies.

So I just want to make sure that this is something that you handle and that you can handle whatever volume you're coming in.

And then it's not going to become like sort of over time, you know, something where it gets less and less.

Like, for example, how often are we going to be in touch and how regularly can I get in touch with you were we to engage in something?

How would that work as far as your accessibility and the like?

[@1:18](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's a great question. I like that. So what's going on right now? I have the Israeli clients, as long as a couple of people from the U.S.

that I'm starting to work with. I do the transition to the U.S. I'm stopping to work with Israel. I want to I want to I want to stop working with Israel.

That's the first thing. Second thing, when it comes to our accessibility and communication, we're going to have Slack. If you have WhatsApp, can do WhatsApp.

If you want messages, we can do messages. On top of that, you're going to have a calendar in which if you want to book a call with me, you'll be able to book a call with me whenever you want.

OK, it's pretty simple. And as time goes on in the next three months, I'm going to hire people, obviously.

But these are going to be A players at some point in the next three months. I want to hire a client success manager.

I'm going to train to be basically a clone of me, but it's not going to change anything about your results.

We're going to have the same thing going on with me checking the ads. I'm going to check the ads regularly all the time.

doesn't really matter until I have a person that I trust that will do it, like, you know, instead of me.

And we're going to have the shooting days once a month or once a month and a half. So we're always going to work on new ads and we're going to keep on having the calls to see the data and the stats, see what we can improve on.

It's not going to stop. It's like, I know that this relationship is based on, you long term. And also when you're happy, I know that I'm comfortable because I have, I want to get to a point in which I have, as I told you, want to have 30 clients that these 30 clients do not leave me.

That's what I have in Israel right now. And I want to basically clone that to the U.S. just in way higher ticket with a better purpose, as I told you on our first call.

So that's basically it. I hope this, does this answer your question?

[@2:54](#) - Michael

Yeah, I suppose so. You said so. I was just telling you where I am in general, and I mentioned this briefly yesterday, that there's anxiety around me leaving this company, not because they're good, they're terrible, that I had another email after that, and it's the same version of some kind of email every time that's trying to just calm me and everybody else is going through this.

[@3:30](#) - Oriel Mor (oriel.mor2001@gmail.com)

So wait, I want to cut you for a second here. I'm sorry, but I have to make something extremely clear.

And this is not marketing agency Oriel, live for more, this is Oriel, Oriel, okay? What's your alternative here?

[@3:46](#) - Michael

Yeah, no, the alternative is that I find another agency or somebody else that does something, that's obviously one thing, or I figure out that they're doing something wrong and that's something that I can fix.

But- It doesn't seem like that. Nothing else has happened. So no, I don't have a great alternative. I just don't want to jump from the frying pan into the fire and just be in another situation where I'm not doing well.

I guess the advantage here is what we're talking about is me moving into go high level accounts and then not having to and having my own access to my own data, which is important.

So I don't feel stuck as one of the reasons what I imagine this is by design is that I feel stuck with them because I have the numbers.

I got to go through all the verifications. I mean, there is a bit of like a little bit of good news as some of our main numbers or our main numbers are owned by me in Colerail.

So I have like a separate, are you familiar with Colerail?

[@4:49](#) - Oriel Mor (oriel.mor2001@gmail.com)

No, but I just know, I know how Lead Connector works. The thing is with Lead Connector, there's, as I've told you in the email, there's Twilio, if you're familiar with Twilio and then there's Lead Connector.

And the past year, go ahead. High level has made a change in which all numbers are under lead connector.

have no idea why they did that. Obviously, I'm assuming because of retention, but yeah, there's like, you need to understand that there's like very separates and separate entities for your business.

don't know if entity is the right word, but there's different assets for your business. There's the assets that they build for the funnel itself.

That's on-go high level, as I told you. And then there's your assets, your website, the reu.life, that's yours. And then there's the funnel, which is r.reu.life, which is the funnel, like a subdomain on-go high level, and that's theirs.

And honestly, I don't care.

[@5:39](#) - Michael

Their funnel isn't even that good in any ways. when you say their funnel, what is the description of their funnel?

[@5:44](#) - Oriel Mor (oriel.mor2001@gmail.com)

What do you mean by their funnel? A funnel is, so let me show you.

[@5:48](#) - Michael

It's a computer right now on the internet.

[@5:52](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it can be a bit complicated. No, so let me, and I'm about the computer, I'm sorry, it sucks, but I want to just, so I'm going to show

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

I'm just going to just a second. I want to show you exactly what I mean here. So if you go to the ad library here and we go to searcher, so we have the ads here and everything, but we have seen that they uploaded a new ad.

I'm assuming it's because of your email to them.

[@6:23](#) - Michael

I think I can find another network so I can see this more clearly on my computer. Let me see if I can do this.

Okay.

[@6:39](#) - Oriel Mor (oriel.mor2001@gmail.com)

Can you see it?

[@6:39](#) - Michael

Yes.

[@6:40](#) - Oriel Mor (oriel.mor2001@gmail.com)

Awesome. So this is the funnel. This is the funnel that they use. This is on-go high level. They built this on-go high level.

And you have basically this, this page. This is m.ru.life. Sorry. Go ahead. Awesome. So we have this, m.reu.life, as you can see here in the thing.

So that's the website, that's the funnel on Go High Level. Building this is extremely simple, it can take me exactly an hour.

And I don't even want to build it like that, it's that it's not that good, honestly. And then there's reu.life, which is your website.

That's your website. That's your core website, they cannot touch that. They cannot touch that, that's illegal for them to touch that.

Okay. Okay, so did they create this website for you? Yes. All right, it's still your website, you paid for that, right?

How much money did you pay for I pay for it, it's like part of the month, that's part of their service.

Your domain is part no, the domain is mine, I bought the domain, I own the domain. I think I recently gave them access to the domain, I can always pull their access.

To the domain, they wanted to make some changes or whatever, but I can always pull out their access. Is that on WordPress, by any chance?

Sorry? No, no, I wanted to see if it's on WordPress, like, where the website is built on, like, what's the platform?

Do you have any idea what platform it's built on? Like, you know, there's a couple of, like, platforms in which you can build websites on?

You what I'm talking about? Oh, you're stuck.

[@8:47](#) - Michael

Sorry about that. guess I'm back on my phone. This is not working.

[@8:50](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay. It's all good. So the platform is, like, you can build websites on different platforms. One of them is WordPress.

That's one of the famous ones.

[@8:58](#) - Michael

It's not WordPress. It's

[@9:00](#) - Oriel Mor (oriel.mor2001@gmail.com)

You can log into WordPress with a simple thing that you add to the URL, but I can look up where they built that on, and also they cannot, you have to pull their access, and also it's illegal for them to take it down, it's your website, your domain, it's your brand, so that's the thing that needs to be made clear, and also on the agreement itself, did they say anything about the website?

ACTION ITEM: Find signed agreement with Ketamine Media, review website ownership terms - [WATCH](#)

[@9:29](#) - Michael

I don't recall, I don't, I have to look, have to find, the only thing I have from them for some reason is a proposal, I have to find the signed agreement that I have with them, and we signed up, I'll have to look around for it, but to my recollection, the website is ours, the question is, I mean, they have the phone numbers on there are actually call rail numbers, not theirs, it's forwarding, the call rail numbers are forwarding, So that's fine.

Yeah, those numbers. Yeah, those numbers. There numbers I own in CallRail, although I don't like them because the area code is not something I want to have, but I'm leaving that one off because it's not working.

But yeah, the phone numbers are mine from CallRail. Eventually I would like to change them because we're in a 732 area code.

feel like people see 908, they think that it's in southern New Jersey and not central New Jersey. So that's something to change.

I'm sure, CallRail, you're familiar. It's a phone tracking software. I'd love to not have it. The reason why I'm paying \$200 a month for it is ATP verification.

I'm afraid to move anything.

[@10:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You know, the ATP is not as scary as you think it is.

[@10:49](#) - **Michael**

When they did it, when Ketamine Media did it, it was a month of absolute hell. Months? was a month, a month of, the main number was we had to send...

Everybody messages, this is our number, but it's only for now, and then when we sent it back, we switched it again, and we lost patients.

It was a disaster. And it cost, I don't know, \$10,000, \$15,000 in patient volume, just a lot of money.

it's just like every time I think about doing it, it's always like, yeah, I can't get into this.

[@11:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And yeah, anyway, so, so yeah, that's, you know, the solution, as I've told you, do it like the same time, but I'm not, I was like, right, you've, I mean, I don't know, like how much, here's, here's what's gonna, here's what's gonna happen.

[@11:40](#) - **Michael**

I imagine if I have a conversation with this, there's a couple ways, you know, assuming I make a change, if I have, I mean, I probably have to make a change no matter what, you know, because I just don't, I mean, can you tell me, is, is it a thing, I mean, it doesn't make sense to me, as a business owner, that Facebook, when I give them, say, okay, I want to up my,

Adspend, that they say, okay, you can't get any leads for two weeks when you increase your money.

[@12:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Nobody's going to want to increase their money. , man. As I've told you in the message, . I've showed you the campaign itself.

And, man, I'm doing changes on a daily basis. I'm telling you. Like, I've done this. I was not – I don't know if you believe me or not, but I am – I'm like – I'm in this deep, okay?

I know everything works. And I know every , every excuse. I know every tactic. And most of them are being used to mislead you to thinking, oh, wow, that actually makes sense.

That if you ramp up, it disrupts the algorithm because it shocks it, and now we need to readjust. all that .

[@12:45](#) - **Michael**

Like, I'm sorry for the word, but – Yeah, that's right.

[@12:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I mean, just – they need to stop, okay? As I've told you, everything is based on creative and funnel.

These are the main things. But, like, you need to – this is the thing, like, a belief that you

To engrave in your brain. Creative and funnel. If anyone in the future, it doesn't matter if you work with me, somebody else, if anybody tries to sell you on algorithm , you know it's .

[@13:16](#) - **Michael**

Okay. What happens when they, if there's a switchover, what does that switchover look like? I know you sent me something on this yesterday, but I need to understand it better.

Um, if let's say I, I say, okay, let's, let's go ahead with this is obviously I have some, some, uh, price concerns, questions around that.

Um, which has to do with the performance side and the, and the, and the, uh, monthly retainer. Um, and, and, and honestly, I'm, looking for this contract that I have with them just to see the breakdown of what I'm paying for what.

Um, but meaning like how much money is going to add. Um, And how much money is going to SEO, and how much money is going to retail, can you tell me, just by looking at it, how much they actually spent on ads?

[@14:06](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so SEO, there's no money going to SEO, that's organic, first of all. Yeah, but part of what I'm paying them monthly that's going towards SEO, which really means they're generating a couple blog posts.

Yeah, I've been seeing, as I've told you, this is a thing that I can give them credit for. They probably have a good SEO guy, maybe he cares about his job.

They publish, like, three to two blog posts every two months, approximately, it seems like. And it puts you on the top three.

When you search for ketamine therapy in New Jersey, it puts you on the top three in Google. Question is, as I've told you yesterday, how many patients do you get organically?

Is it like a searchable thing?

[@14:49](#) - **Michael**

You know, I'll answer that question is that the organic patients that I get are probably some of the best leads.

[@14:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That makes sense.

[@14:56](#) - **Michael**

You know, those are the best leads. They're always going to be the best leads. Yeah. Yeah. So the highest quality leads that I get, the ones that come from Google My Business, which is

probably the same way people are searching for KetaminearMe or Ryu, those are the most solid leads that I get.

It's also I don't have a lot of competition in my immediate area, so that's part of it. But basically SEO, I'm kind of going to be on my own after that.

[@15:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that's right. I'm trying to work. I'm building my stuff, you know. And I want to hire somebody that can actually take care of it as well.

[@15:32](#) - **Michael**

I do not mess with SEO. I've never liked SEO.

[@15:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I just hate doing that. If I can find a workaround with AI, I will do that because that's probably what they do.

[@15:43](#) - **Michael**

Correct me if I'm wrong. Did they tell you that? do, but they like, I mean, I'm going to have phone conversations.

They're doing some white hat things and some whatever that they don't, whatever it is, it's more lip service.

[@15:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

The answer is it's another black box for me. I don't know.

[@15:58](#) - **Michael**

Yeah, that makes sense. I think I'd understand it. I think they deliberately don't share the right amount of information.

I'll tell you, the other people who have told me about doing this is like, the best thing you can do is do it in-house, which is honestly not realistic for me.

I just don't have the personnel or my personal know-how. I'm smart. I can learn stuff, but it takes a lot of time, and I can't unwind my business while I learn how to do digital advertising.

If I'm doing it with somebody who explains it clearly and doesn't feed me , and I understand a clear KPI list, and I understand that the nod of turn, I'm creative, I can come up with good ways to get things done.

But right now, this component is not really, that part's not working. But what I need to ascertain, before I make any switches, is that the switch

ACTION ITEM: Contact Ketamine Media, request login details for WordPress site - [WATCH](#)

Which is going to be somewhat seamless. So you're saying that the website, I go online, I lock them out from it.

Right now, even if they're not on there, if they want to make changes, they're making changes to the website.

[@17:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So they do have access.

[@17:13](#) - **Michael**

I don't have to undo that access.

[@17:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So it depends on what – let me check this first.

[@17:21](#) - **Michael**

Probably through WordPress.

[@17:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I searched it up. I don't think it's through WordPress. So let me – I used something called Portal, I think, to – Well, let – – That doesn't help me with anything.

If you're interested in that Fentanyl built with or Wappalizer. Yeah. Um,

[@18:03](#) - **Michael**

I mean, the most simple way I can get them to cooperate, the clearest way I can get them to cooperate, is basically, I tell them that I hired somebody who's doing it in-house.

[@18:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, it seems like it is WordPress.

[@18:23](#) - **Michael**

Yeah.

[@18:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's interesting because usually when you go to WordPress and you have this little hack that I use and you do WP slash admin, you're supposed to have a login.

Right. That's weird. So you have to understand where it's built on for you to understand how you can lock them out of it.

Like you need to ask like, what's my details? How can I log in? Like all that. Did they provide you with these things?

Yeah. For the login details and everything? And the link to login?

[@19:03](#) - **Michael**

For the WordPress?

[@19:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I don't think so.

[@19:05](#) - **Michael**

I don't remember it.

[@19:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, they have to give it to you. Like, what? This doesn't make any sense. Like, it's not, it's just...

[@19:14](#) - **Michael**

It's just frustrating, honestly. I mean, the question is, is there's a way I can... One of the ways is that I tell them, you know, I'm making a new decision.

I mean, he's obviously sensitive around other companies, because they said when I saw his reaction last time, when I had somebody else poking around.

But if I told them that I'm hiring somebody in-house to work for the company who's going to focus on marketing and knows digital advertising, what's he going to say?

You know, like, I'm just, I decided to take the marketing in-house. And I think that's going to be an easier pill for him to swallow.

Whoa. Well, I mean, he's not making that much money off me. So I don't know. He just maybe his business isn't doing that great.

I'm not sure. But he was very, very sensitive and kind of blew up. Afterwards, he chilled out. But and and I had a conversation with him about not having this issue come up again.

But it did happen at the time. So so so this is that's his concern. Let me table that for a minute here.

We'll table out the strategy around switching. What I'm trying to avoid is the least possible headaches in this happening.

[@20:31](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Right.

[@20:32](#) - Michael

Yeah. So you're saying that for you, A2P takes a week.

[@20:36](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, if it's done right. And that's what we're going to do.

[@20:39](#) - Michael

We're going to do it right. So what about contacts within? So one of the things that they're claiming, although it hasn't shown that it's been that that they have like some more dedicated people to work with, although I think they actually all Israel to work on, like if they have a problem at Facebook, they have somebody to talk to.

[@21:00](#) - Oriel Mor (oriel.mor2001@gmail.com)

I mean, the thing is, the problem with Facebook is if they, I understand what they're talking about. They have a dedicated account manager, but I don't know if they have that because there's two levels of that.

Okay. There's a level of which you're a big company and then there's like, you know, Facebook support is good.

And then there's Facebook support. I have the good Facebook support right now. I don't have like, there's the guy, Julius.

They have a dedicated account manager that's like on A very high level of Facebook.

[@21:32](#) - Michael

Yeah, Julius.

[@21:32](#) - Oriel Mor (oriel.mor2001@gmail.com)

Because they are spending like \$500,000 a month on Facebook. So I don't know if they have that level of support.

I cannot tell you. I cannot verify that to you.

[@21:44](#) - Michael

I don't want to. they're thinking of making a jump, Julius? What are you saying? Julius, I imagine has another, it has a firm working for them or they do it in house.

[@21:52](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, I know. Julius has like four marketing people inside there and they want me basically for the, for the ads and the creative.

imagine there's all Thank you. And that's what I'm writing for them, too. Got it. So, yeah. They're doing insane when it comes to bypassing Facebook systems and all of that.

And doing that is fine, because they're spending so much money, nobody cares. Right.

[@22:19](#) - Michael

I mean, that's obviously a big component for them. Yeah. So my question is some questions around the well-thought-out transition is that I understand how it's going to work.

I know that what you sent me, I got it. I mean, whatever the – I don't have it in front of me, what you sent me.

[@22:43](#) - Oriel Mor (oriel.mor2001@gmail.com)

But I think you sent it over email. Hang on, I got the link here. The questions that you had?

[@22:49](#) - Michael

Or email? No. Well, I also want to go back. I'm trying to think. Now, you mentioned about having, let's say, \$29 per conversion as a fee.

[@22:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And then there was a – Yeah, but the conversion, the deposit fee is not paid by you, it's paid by the patient.

Correct. Yeah, then the deposit on the patient.

[@23:10](#) - **Michael**

Yeah, it's \$30 less than I'm getting.

[@23:12](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And also another thing that I thought of, because I've had this conversation with a couple of people in the past couple of days, I have an even crazier offer for you, okay?

Month two, okay, we're going to have a KPI to hit, okay? At the end of each month, if you're not happy with the results, you're not going to pay me until you are.

What does that mean? Like, there's a retainer month, if at the end of month two, you're not happy with the results, you're not going to pay me a retainer the next month.

You're not going to pay me until we hit the results and you're happy. Obviously, we're going to have to, you know, find the spot in which like, okay, this is good, this is what we want.

[@23:50](#) - **Michael**

Right.

[@23:51](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And, yeah.

[@23:51](#) - **Michael**

Well, I'm going to want to, I mean, I have data as to like, how many new patients I had of a specific

I know how many ketamine patients I had each month from what we new ketamine patients. So if it's more than that, or whatever number we come up with, the percentage of that, then we can do that.

I just want to make sure that I'm not doing the same thing where I'm just throwing money every month and just praying, usually without unanswered prayers.

[@24:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Let me, first of all, as I've told you, I understand your concerns on a very high level. I can see and I can sense on the way that you talk, you are extremely nervous.

And that's completely fine, I understand that. Because when you go through such, that's basically like, I don't want to call it trauma, but it is trauma.

[@24:42](#) - **Michael**

No, no, it's been a terrible...

[@24:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, and I can understand when you go through something like that, you're going to be cautious with every single step that you take.

[@24:52](#) - **Michael**

Because it's not like, it kind of reminds me of me being in the army because I was in the IVF.

[@24:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And there's a situation which you feel like you are... We there, but it's not like it's a job, like you can walk up and leave.

No, they're holding you by the balls.

[@25:06](#) - **Michael**

You need to do a lot of things if you want to get out of there.

[@25:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And when you get out of this kind of system, you don't want to go back there ever again. You don't want to experience anything like that ever again.

So I understand where you're coming from. But I think that, first of all, as I've told you, when it comes to the communication on our side, because I see that they're communicating mostly through email, we're not going to have that.

There's going to be Slack, WhatsApp, messages, calls, doesn't matter. You have it, and it's not going to change. It's not going to change.

I'm telling you right here, right now.

[@25:33](#) - **Michael**

Okay.

[@25:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And also when it comes to your data, I don't know if you wanted to have an agreement, but your data is your data.

I am a, I'm an ethical businessman. I say, you could say, I'm not, if you want to leave.

[@25:49](#) - **Michael**

Okay.

[@25:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I've had, I had so many clients and so many people left me. I'm basically numb at this point for that.

I'm making enough money for me to not get throttled and go, go insane by a client leaving. Okay. So.

If you do decide to leave, you have your data. You spent money for that data. This is your data. Not even legally, ethically. That's the thing that this is how I work. That's when it comes to that.

[@26:12](#) - Michael

Do you have a contact and go high level that helps you?

[@26:17](#) - Oriel Mor (oriel.mor2001@gmail.com)

At some point, I'm going to upgrade to their premium support. They have a premium support for \$500. I don't need that now though.

[@26:25](#) - Michael

But their support is extremely good. Or it should be that I should be able to move my data from one high level account to another.

[@26:32](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's the thing. You can export the data. don't know if you can synchronize it though. That's the thing that I need to check.

And I think it's, again, by design like that. But if you would want to download all the phones, all the contacts and all that stuff, you can do that.

And also have the snapshot because we're going to create a snapshot like a template that we're going to have.

And you can take that snapshot and if you want to build a go high level of your own, can just paste it there and you're going to have all the automations.

[@26:59](#) - Michael

All the My automations don't exist. have to build those, right? Currently, we don't have a really good system. We're not utilizing emails to go out automatically.

We're not utilizing some automated texts, but let's say not. I'm going to want to use the best practices.

[@27:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I imagine that's part of what you want to build, right? A hundred percent. Yeah. I'm working on training a thing called CloseBot.

It's an AI bot, basically, that talks like a human.

[@27:31](#) - **Michael**

I think we talked about that.

[@27:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. So I'm training that as well. We're going to use that too. And we're going to have all the automation set up for people that from the moment they come in until the moment that they're booked and even after the consultation, all that stuff, they're going to have automation set up.

There's, you know, everything's got, I don't know how it is right now for you, but you're going to see what I'm talking about when you're going to see it.

Like, it's a thing that you're just have to see with your own eyes, because in the end, you need to understand that I have the best incentive.

time. Bye. Art to make sure that you have the highest quality patients, because that's what I'm getting rewarded for.

If that doesn't happen, I'm in a problem. So, and also let's not talk about my brand name, my reputation, and you refer me to other people, because I've told you in the end, I want to stop with the ads on our own ads for like three, four months, get some, you know, attention, film, some content, and then create a flywheel of referrals and people that come from content and all that stuff.

I don't want to spend money on ads. That's not necessary.

[@28:28](#) - **Michael**

So, yeah, so, excuse me, we're both coughing and sick, so, the, just take me back to the transition, what that would look like, so, we have, so, it didn't sit, like I didn't get such a clear answer from you, is I have recorded phone calls and text messages.

It's from patients that, that we often . More importantly, we have what we call integration notes. So we keep – I don't love that it's this way, but because my EHR, my health records system doesn't talk to my CRM, which is go high level, we keep integration notes, which is notes about the patients, how they're doing in each session from the – we like have guides, like psychedelic guides, and they keep the notes in go high level.

ACTION ITEM: Contact Go High Level support, inquire about exporting patient notes, calls, texts - [WATCH](#)

What's going to happen to all those notes? What's going to happen to all those things? And I just didn't feel confident in that response that I know that I'm going to be able to transition those over.

[@29:40](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I need to check that out.

[@29:41](#) - **Michael**

I'll be honest with you.

[@29:42](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I need to get on a call with go high level and understand how we can do that and if there's a way to just transition all the notes.

The notes, the phone calls, and the texts because that's how we communicate with our patients and recorded calls. I think that the texts themselves, I think –

And the whole conversation, I'm not sure that can happen, actually.

[@30:07](#) - **Michael**

And the reason why it's important is something we can refer back to. It's not as bad if we have to go for a while into another system.

We have the archived version, and they have to toggle between them to see about a patient. That's okay. But I don't like that I'm handcuffed to a software for the rest of my life.

[@30:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it wasn't good to have the notes on go high-level, actually.

[@30:36](#) - **Michael**

I mean, I may be able to export.

[@30:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I have to check that out. I've never had this situation, actually, before.

[@30:47](#) - **Michael**

We have notes about the patient. The patient doesn't like this kind of music. We have different information about the patient that if somebody hasn't come in in a year, we know, oh, this person doesn't, you know, he's an orthodox person.

doesn't want female. We have that in the notes. That's going to be an important question to know. Not everything changed over last time, but that's something that I would want to see.

[@31:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Maybe you could talk to them and find out. Yeah, I need to talk to them and see if that's possible.

I've never had this kind of thing before, and I'm not sure I have to talk to them. I could not give you a definitive answer for that.

I'll completely honest.

[@31:36](#) - **Michael**

The good news is the one thing that you haven't said to me is the one thing that I hate when people tell me, but yet, and every time I tell it to me and I kick myself for working with that person is what, you know, how many patients can you handle?

[@31:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I just want to make sure I don't give you too many, right?

[@31:54](#) - **Michael**

I get that sometimes and I always know it's , but you know, in this case, it's just so much.

But I'm going to reverse that on you. How quickly can we ramp up the patient volume? Will I see a lull before I see a gain?

I mean, I'm seeing a lull right now. I say a lull. I've received a single lead in the last 24 hours.

I think I maybe received seven leads in the last five days, of which since 80% of the leads are , don't get – that's no patience.

I'm basically running on nothing. I just have – I have older patients. have patients that would sign up. We went from really high to nothing.

And this happens repeatedly. Can you tell me why that's happening?

[@32:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So it's been going up down?

[@32:46](#) - **Michael**

It's been like a rollercoaster? I would say it's like up and down. It's like – it goes from mediocre good to zero.

And it just happens randomly. They always

[@33:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I think the greatest thing to do right now is to show you the ads like that would be that would be that would make it so much better for you and for you to understand exactly why the ads are the main factor here and what actually the ad creative or the the ad the ad copy yeah creative like the ad creative is the thing that stops the scrolls.

but the thing that we need to focus on the most is the ad copy itself and ad copy can also be used for videos so that's one so I have two ads here that are wrote okay okay and they're both education based ads and I'm gonna read it to you then I'm gonna explain exactly what the ad does so education based that one okay so across the country millions of people are currently doing everything right when it comes to treating depression now notice here the main thing as to what one one one one

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

And that is not saying if you've suffered from meds and if you cannot, you know, if meds didn't help, you cannot do that.

not illegal. You cannot do that on Facebook. So you can find like an indirect way to target your audience without, you know, calling them out.

So across the country, millions of people are trying to do everything right. They're showing up to therapy, taking meds, practicing your attitude, trying to stay positive.

But still, heaviness stays like a that doesn't lift. The conventional system tells them that you just need to keep going, try harder, just dose, weigh it out.

Most people won't get it, but there's something uniquely painful about doing everything that you're supposed to do, but still not get better.

But you need to know one thing. It's not that you didn't try hard enough. It's that the system gave you the wrong tools.

So what I'm doing here right now is, in essence, feeling them, okay? I am describing their life in a way that makes them feel understood.

And if you remember the first ad that I wrote, like that I wrote for YouTube, like, you know, details for me, like the B2B ad, this is what I was talking about.

Okay, so as we know, traditional psychiatry was built to manage symptoms, not resolve them, anxious, add a meth, cannot sleep, add another, still stuck, increase the dose, but let's be honest, this approach is like turning down the volume on a smoke alarm while your house is still on fire, doesn't reset the system, it just tries to mute the signal, but thanks to modern science, it doesn't have to be like that anymore, so this is where we build the hope and the transition.

There's a new path, that's designed to work with your brain, not against it, doesn't try to numb what you feel, it helps your brain reconnect, recalibrate, and start to heal, imagine a brain like a

snowy heel, every thought, emotion, reaction, so this is basically explaining how depression works, but again, what if you could smoke the snow, open up new trails, that is possible thanks to ketamine-assisted therapy, psychotherapy, and you explain how it works, and you explain what happens, and you talk about, you know, what happens in the brain, you talk about studies, and you about know, that stuff, and then we have we

Because in the end they need to know who you are. there's no you in the picture, when you talk on the phone, nobody knows who the they're talking about.

They need to remember somebody. need to remember a character.

[@36:12](#) - Michael

Could it be the company or it has to be the person?

[@36:14](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, it could be the company too. But if we have the name itself, it's better because there's a person.

When there's a person behind it, it's just better. Or better. So I work with patients who thought they tried everything.

You may feel the same way, but I promise you it can be different. If this speaks to you, created something just for you.

It's called the mental breakthrough consultation. And another thing that I'm doing here is framing it as like telling them there's an offer here.

Okay. It's not just vague. There's FDA approved ketamine treatment.

[@36:43](#) - Michael

Leave your details below to find out more.

[@36:45](#) - Oriel Mor (oriel.mor2001@gmail.com)

No, none of that . I'm explaining exactly what it is. It's a one-on-one call with a licensed provider to explore whether this path can help you finally feel like yourself again.

No pressure, no judgment. Just a chance to explore if this can actually work for you. We're covering most of this.

So what I'm doing here is having a price anchor. can also change that. This is just a suggestion. So what I want to do here is say that the consultation is usually \$295.

We sell it for \$95. So we have the ability to have the consultation and you also book them and get them committed.

We're covering most of this consult so you can take the first step without financial pressure. Instead of \$295, you only pay \$95.

And then we give them clarity as well. By the end of this call, you will know, and this is what I need to add that to.

[@37:33](#) - Michael

Pull one, pull two, if you made it here, this is for you.

[@37:36](#) - Oriel Mor (oriel.mor2001@gmail.com)

Let's take the first step together and then they click on the link, go to the website and do the steps there.

So that's ad number one. Then we have ad number two, which is talking from a different angle. It's the same thing, but from a little different angle.

It's a different hook. We're going to try out different images. And it's also going to be, we're going to do that on video too.

Something strange happens when the person, you know, and then you label what it feels like. And then you talk about what they tried.

Here I put a stat as well. That is true, but it's insane. Only one in three people fully recover after their first antidepressant.

And even after multiple rounds, nearly half don't find relief, which is insane. Basically, you make it us versus the system.

This is not you. This is the system. You know, then you educate them. The person is not low mood.

It's a pattern. Your brain gets into a pattern. And then you explain it with an analogy basically. And then you talk about what most treatments try to do, you know, by staying in the same, you know, universe of the analogy.

And then you say brain stays frozen. And you have this. And I'm probably going to delete that too. But, you know, but what if there was possible to smooth the snow, open up new trails, all that stuff.

And then again, this is possible thanks to, kind of, it's therapy. And then we explain it's the same. It's basically the same, like the other, just the start of the ad is way different by the way that we built it up, you know, but you can see that you.

Obviously, I'm assuming you can see the main difference here. The patient, the potential prospect, and the person goes through a journey in which he feels understood, you talk about the problem, you educate him about the problem, then you show him there's another way, you talk about the way, you explain why it works, okay?

And then you have your offer.

[@39:20](#) - Michael

And what about, like, shouldn't it be some kind of, like, image to stop them?

[@39:24](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, obviously, yeah. This is just a copy. We have to have an image. And this is where we can go wild.

We can create a bunch of different images. thought about, like, insane things like notes, a person writing a note to himself saying that he's fatigued and tired.

iMessage, for example, like a person sending a couple of messages for a person that doesn't respond, which usually happens when a person is depressed and doesn't respond to other people.

Like, you know, we're gonna get to these people without getting to them, you know? They're just gonna identify with the image itself, which is extremely important.

It's not gonna be like, ketamine-assisted therapy and this Spravato nasal spray. Like, who can resonate with that? Like, what the...

, you know, it's just not, it's not psychology. That's not marketing. That's . And I hate that.

[@40:07](#) - Michael

Well, I mean, there's different components. I mean, there's proximity for Spravato, for Ketamine. Being close to a location also helps because people can't drive afterward.

So you're limited in a radius to who you can target, you know, no matter how good your ad is.

If we're targeting an hour and 15 minutes away, they're just not going to drive, not going to have a ride to do 20 treatments.

[@40:30](#) - Oriel Mor (oriel.mor2001@gmail.com)

We're going to figure that out before as well. I'm going to look at what, like, do you have a problem with radius right now with people that come?

[@40:37](#) - Michael

Yeah, I do. I do. Right now. And I've been back and forth with Ketamine Media on this is that we're getting people who are an hour away.

And then they're just saying, okay, I can't make it. I'm going to find a place closer to me.

[@40:47](#) - Oriel Mor (oriel.mor2001@gmail.com)

So we're basically advertising for our competitors. Yeah. So you just need to lower the radius. That solves it. And I don't know why they didn't do that.

So, I mean, or target individual zip codes. area. t, try You you. Yeah, that's also possible. can have like a, we can bulk upload like 20, 30 zip codes and just target these areas.

[@41:08](#) - Michael

Okay. Do people read all this?

[@41:14](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's a good question. Do you read books?

[@41:18](#) - Michael

I do. don't know if I'm a good example.

[@41:21](#) - Oriel Mor (oriel.mor2001@gmail.com)

So the thing is people read what relates to them and if they find it interesting. And a concept that is being done here is that you take people through a journey and every line connects to the next line, which keeps them reading.

[@41:35](#) - Michael

That's the whole process.

[@41:36](#) - Oriel Mor (oriel.mor2001@gmail.com)

That's what marketing is in a sense. That's what copywriting is. No matter how long the copy is. Okay. I want to show, I want to show it to you.

Okay. So, um, oh wait, no, you know, the best, I don't know if the best example is me, but for example, my ads, you know, people read my ads.

[@41:52](#) - Michael

read my whole ad and it wasn't a book. Correct. Correct. I read your ad. I'm, very, you, I don't know if it was the.

Timing, because I'm very frustrated. could also be the timing.

[@42:05](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, so this is the point. When there's a need, you're going to read. So it's very simple, and they have a need.

It's basically, Matt sells it, I guess.

[@42:17](#) - Michael

I hear that. So there are a couple of questions I have. I get what you're saying regarding pricing. I know you put here \$95.

I don't know if there's a right price for the consultation fee or not. One of the things that are different about what we often do, I mean, this could be once they're on the phone, so it doesn't really matter, is that often we're doing the consultation with the provider.

It's happening at what we try to do, a consult infusion. They come in, they get a consultation, which usually takes an hour to see, 45 minutes to see what it is.

And if they say, okay, if you're ready to go ahead, we do the infusion right then and there, at least for IV.

Spravato is different. So because you need insurance approval, so it would have to be a little tailored. Do you see like a different approach for each of those?

Or is that something that we would kind of flesh out later on?

[@43:12](#) - Oriel Mor (oriel.mor2001@gmail.com)

So we can basically build out different, like the ads can be different, the offers can be different based on the product itself.

Question is, if you want to focus on one specific offer and specific treatment, we can do that too. Like I believe that the most, the best thing that you can have as a business owner in general is to have focus.

And if we, like these two treatments are very much similar, but you, if there's a one that you want to focus on, and you believe that it's going to be good for you, you know, and that you think it's going to be more efficient to you, and you would like it more maybe because of the way that it's handled, the speed of which, you know, things happen, and the efficiency of things, we should just focus only on that.

[@43:59](#) - Michael

Let's see. Let's hope.

[@44:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Let's go. Right. And maybe, you know, here's an example just for you to understand how creative you can be.

You can offer ketamine on the front end. People say, oh, I'm sorry. This is too expensive. Oh, no problem.

We have another thing. It's Pravado. It's covered by insurance. It's the same thing from a different molecule and maybe covered by insurance.

Would you want to hear about that more? You can just downsell, basically.

[@44:20](#) - **Michael**

That's Pravado.

[@44:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So it's not black and white. You just need to play with it. Understand, first of all, what you want and then tailor it to your market.

You know?

[@44:31](#) - **Michael**

So. Okay. So there are a couple. So I think one question that I need an answer from is the go high level question.

Yeah. 100%. Before we do anything else. I'm wondering about the wisdom of telling these people at Kennedy Media that, listen, I'm hiring somebody in-house.

You play that role. And what are they going to say? Unless I've decided that, you know, you're doing marketing for me in-house.

You're focused on, you know, B2B. Yeah. Marketing, you also know SEO, not SEO, you're doing all this, I'm hiring it, I'm starting to take it to the house, help me with the transition.

That might be the simplest way to get the most out of them because I don't know if they'll be sensitive losing the business no matter what, but he's not making that much money off of me.

I mean making money off of me, he's not making that much because he has five people, I don't know how much time they're spending on my account each month.

But, you know, there's one guy for meta ads, there's another guy for Google ads, there's another guy who handles the phones and the go high level support.

You know, all these people are on a call each week, you know, there's four or five people on a call, it's adding up for them.

And I'm not paying them that much, but also they may be spending pittance I don't know, were you able to see yesterday how much they're actually spending on the ads and how much is?

[@45:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

We saw how much money they spend on the ads. saw that it was \$2,500 for Google last month and it was \$1,200 for Facebook, so it was in total \$3,700.

[@45:58](#) - **Michael**

Okay, so if I'm paying them \$5. So, yes, I'm paying them basically – if I'm giving them five grand or that's what it was last month, then they're making \$1,500, which is similar to what you're doing, right?

[@46:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm very interested as to what – this is weird, you know, because if they have five people on the account, their profit margins must be .

[@46:21](#) - **Michael**

Yeah, I don't think – I mean there are five people. Do they spend a lot of time on it?

I think they're spending, you know, they're spending 30 minutes a week with me on the phone. So you're adding up those guys.

What are they doing in between? I'm getting – I send them an email. I get a response within 24 hours usually.

[@46:40](#) - Oriel Mor (oriel.mor2001@gmail.com)

This is extremely weird. I don't know. is – I don't know. This is – this whole setup is just – doesn't make any sense to me.

[@46:46](#) - Michael

don't know.

[@46:46](#) - Oriel Mor (oriel.mor2001@gmail.com)

Well, it's not working, so – Yeah, it's definitely not working. I don't know what they're doing there. But I can tell you one thing.

There's a thing called Pareto, okay? And, you know, that the Pareto will – and I believe that if we focus on 20% of the things that drive you, 80% of the results, we don't need

So if you just make the creative better, make the funnel better, make the follow-up system better, keep your organic the same way, pump your Google My Business with reviews as well, and just improving it, adding more photos, adding more things to make Google understand, hi, I'm here, it's also going to boost it.

And focusing on these three core pillars while running a Google Ads campaign that is not for search, but for, because I saw your Google Ads results, they're horrible.

ACTION ITEM: Review current ad spend allocation, consider pausing Google Ads (\$400/lead) - [WATCH](#)

Okay, they're not good. Okay, if it's per lead, if it's the \$400 per lead, that's not good at all.

You should turn it off now. Like, I'm dead serious. So focusing on Google would be great for a branding campaign.

So for example, when a person sees us on Facebook, they're like, who is this guy? They're searching Ryuketamine. Then we have our keyword of your website just pop up and they're going to pop up first, you know?

Right. And we can do that as well. And we can also spend like way less money on Google itself.

And Google can actually act as a Remarketing campaign, you know, and as a as a as a thing that places you as a person.

Oh, I exist. I'm not just the person that advertises on Facebook. And I believe that if you because there's a thing.

I told you that but there's a thing called a concept called market awareness levels. It's been invented 100 years ago by an advertiser called Eugene Schwartz.

Okay, that concept basically means that every market has different stages of awareness. So for example, if I would talk to if I would advertise to to ketamine practices that I've never done marketing before, and they've never known what marketing is, I need to approach them with Oh, there's a new way to advertise your clinic, come do Facebook ads with us.

And that's how it's been like, that's how it was nine years ago. Okay. But there's also a level in which you need to talk to people on a different because they have different awareness levels.

So with ketamine itself, and the whole the I mean, there's a lot of education that needs to be done on this because people are not aware of this, I believe, as they can be.

And correct me if I'm wrong, so we use Facebook to educate people on what they can do different, you know, compared to what they're doing right now.

So we have this audience on Facebook, which is problem aware, this audience is problem aware, but it's not solution aware.

So an audience that's solution aware is going to search up ketamine therapy near me. They're like, oh, I know that the ketamine can help me.

Let me search that up on Google. So it depends on, you know, where our audience is, like how many people are actually searching for ketamine therapy and how many people are just problem aware.

They know that they have a problem. Their antidepressants are not happy. They're, you know, they have all this going on.

So we need to understand that, too. And we can actually we can do research about that. You know, you can do research in your area.

See the search volume for ketamine therapy. See what's going on in there, and based on that, understand whether Google should be a good asset or not, but right now, I don't know if it's the ads, if it's the funnel, if it's the website, \$400 per lead does not cut it.

[@50:12](#) - Michael

It's just not. It doesn't.

[@50:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's a thing that needs to be turned off right now, burns you money. So, yeah. And another thing, one last thing that I didn't touch upon is the fact that, I don't know how I didn't tell you that, but when you close people right now, if you do close people, you do not have any idea which ad they came from, correct?

[@50:38](#) - **Michael**

I know what stores they came from. ad. No, I don't.

[@50:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's the thing, you know? Right.

[@50:45](#) - **Michael**

You need to understand which ad people come from. Right. I think that they're doing the video, they're coming more from video now, but again, they're not sitting there on a weekly meeting saying, this ad did this many leads.

This ad did this. I'm not getting that.

[@51:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so it's not even about the leads. It's about understanding because, you know, different ads can give us different quality leads.

So, for example, we could test, for example, my ad versus their ad, and their ad could get you 20 leads, and 80% of them are garbage.

But my ad will get you seven leads, but five of them are relevant. Which would you rather have? Obviously, my ad.

So, you see, it's not about the leads themselves. need to understand what type of leads are coming from what ad, so you know which one is better for you to invest based on your goals, and your goals is to close patients, not leads.

[@51:39](#) - Michael

Should we be... I think I asked you this yesterday. Is there a way to start advertising? Like, I start giving you like a budget where you start advertising, and then I translate.

Start to transition out of them so that there's no, like, lag?

[@51:57](#) - Oriel Mor (oriel.mor2001@gmail.com)

It's actually possible, but we need to... I mean, if you can get, I can show you that right now if it's possible, if you can get access to your MetaAd account, not from GoHighLevel, but the proper MetaAd account.

[@52:08](#) - Michael

Did we not get access yesterday?

[@52:10](#) - Oriel Mor (oriel.mor2001@gmail.com)

I forgot. No, we did it on GoHighLevel. We couldn't, there's something wrong with Facebook.

[@52:16](#) - Michael

I know that I have access. It's business.facebook.com, right?

[@52:20](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, and, like, the account that we signed into did not have, like, there was no ads on there, on any of the accounts.

[@52:31](#) - Michael

So... Let me just quickly check.

[@52:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that's, like, if you could show me that, I could tell you, because there is a way to start advertising without them knowing that I am advertising.

[@52:42](#) - **Michael**

Right. I'm just having these internet issues, and I don't know, had a guy here last night working on it.

Hold on. Did you live in the States and then move back to Israel, or...?

[@52:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, I met my girlfriend a year and a half. I was living... Israel. I was in the States a month ago, as I've told you.

But no, I never lived in the States.

[@53:05](#) - **Michael**

How did your English get so strong?

[@53:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Just practice? It's just, I don't know. I actually don't know. Where do you live in Israel? Next to Tel Aviv, 15 minutes from there.

It's a called Kiha Ono.

[@53:18](#) - **Michael**

That's where you grew up?

[@53:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I grew up here, yeah. There's a city nearby called Oriyuda. They're basically like one on top of another.

[@53:26](#) - **Michael**

So yeah, I can basically say I grew up here. Hold on. Let me see if I have this handy.

Meta account update. This was in February. said we transition meta ads over to our agency account. take the campaign time to warm back up in less than two weeks a lot.

[@53:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's another email I got from them. Wait, wait, wait. No, no, no, no. This is important. Wait, what did he say there?

[@53:54](#) - **Michael**

What? What did he say here? Hi, Michael. You know, wait. There Where we transition the meta ads over to our agency account, this is in February, it will take time to warm back up with it being less than two weeks live.

In the instance that we are able to get access back to the Ryu ad account, we will keep the agency account.

This is because what happened was that my account got flagged. So they started running ads from their agency account until my account got unblocked.

[@54:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So you have your account now, right?

[@54:28](#) - **Michael**

What?

[@54:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You have your account back, right?

[@54:31](#) - Michael

No, I have it back.

[@54:32](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay, great, great. We don't want them running ads on their agency account. No.

[@54:37](#) - Michael

Big no. Yeah, that was only because I got flagged for ketamine.

[@54:44](#) - Oriel Mor (oriel.mor2001@gmail.com)

Okay.

[@54:46](#) - Michael

Let me see here. Why don't I have this access? It's something that's so, like, not clear to me. Let me see if I have info.

Let's see here. I'm Good. Thank I have, no I don't have this one, um, log in with manage meta account, maybe that's the way I gotta do this.

[@55:30](#) - Oriel Mor (oriel.mor2001@gmail.com)

I have a, oh wait, you're not from the computer, all right.

[@55:33](#) - Michael

I know, I computer, now I'm logged into my computer through my phone, because I don't have, I don't have internet right now.

Let's see if this works. Um, although I know I have access to my analytics. Uh, oh here, meta business suite, Facebook manager, and Instagram, let see if this takes me there.

Okay. Okay. Okay. I want to get access to this so at least we can see, hold on, are you still with me?

[@56:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm, yeah, of course.

[@56:09](#) - **Michael**

All right, on, only because my, I just gotta, let's see here, I'm gonna log in with Facebook, this should have worked, which one is good here, when we logged in yesterday we didn't see anything, that was working, right?

[@56:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, there was no, there was no ad account, no, nothing.

[@56:36](#) - **Michael**

Uh, advertise, learn, support. I'm just logging into this ads manager, so I've already had this old stuff that I used.

We tried all these, make life better, zero accounts, um, I'll have to find a way to access it, but I know that I had.

I had access in the past, so I'm going to reach out to them and see what I can get access to and see.

ACTION ITEM: Send Michael scripts for potential video ad shoots - [WATCH](#)

You also mentioned about doing video shoots. Where's that happening?

[@57:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm going to send you the scripts. We can also hire a company to do that. I think that would be the best choice because when they come there, have professional cameras, they know where to film it.

But honestly, we can also do it from...

[@57:28](#) - Michael

Do you have an iPhone?

[@57:30](#) - Oriel Mor (oriel.mor2001@gmail.com)

I do. Okay, yeah.

[@57:32](#) - Michael

So we can do that from an iPhone. I have an iPhone. I have an SLR camera also.

[@57:38](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, so we can definitely do that in your clinic or in your home if you have a nice view as well.

It can be authentic. It doesn't have to be filmed. What I would want to be in a professional shooting is testimonials.

That's where I would want to have like a content, a person that films videos and that's what they do.

Like they do shooting videos.

[@58:00](#) - Michael

I have something that I know who has been given access to make life better. This was back in 2023, but this I don't think is what we kept in the end.

You already have access to the Google Ads account on the rest of your team, those are Yaakov on the Google Analytics side.

You also have access to Google Search Console. Be sure to log in with the browser. Okay, so I asked them about this.

[@58:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is Keramin Media's logo blue and green? Sorry? Is Keramin Media's logo blue and green?

[@58:54](#) - **Michael**

I don't recall.

[@58:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yes, blue and green. Yeah, I their website. Here. You're talking to Chris and Casey and all these people?

[@59:06](#) - **Michael**

Yeah. Here, I just want to see this here. Live. I don't know about the meta account. You have insights to updates to your meta account.

ACTION ITEM: Call Sam Cassidy to get access to Meta ad account, share with Oriel - [WATCH](#)

Within your account, I've made a few changes. But it doesn't give me a link to that. When I hang up, I'm going to call Sam Cassidy, who handles the meta side.

Let's see if I can reach him after five and see if he can give me access to the meta account, which I can share with you.

[@59:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that would be great because then I can tell you, based on who has access to what, we can actually do a very kind of little sneaky thing in which we can log into your phone.

ACTION ITEM: Research possibility of creating new Meta ad account without Ketamine Media's knowledge - [WATCH](#)

If account, create a new ad account, they won't be able to see that and then advertise from your new ad account without giving them any access to it.

So they can't see what's happening. Right.

[@1:00:09](#) - Michael

I think that that's what I would do is I feel much more comfortable like transitioning. First of all, I need an answer for them to go high level question.

I mean I can't be stuck with them forever. So if it means that I'm going lose my data at some point, I have to make decision and bite the bullet because I don't want to have that happen.

[@1:00:27](#) - Oriel Mor (oriel.mor2001@gmail.com)

How many patients do have that you need to download their data?

[@1:00:33](#) - Michael

A couple hundred.

[@1:00:34](#) - Oriel Mor (oriel.mor2001@gmail.com)

A hundred?

[@1:00:35](#) - Michael

A hundred? No, more than that. More than that. I've had, let's see.

[@1:00:40](#) - Oriel Mor (oriel.mor2001@gmail.com)

And all of them will go on a level or go high level?

[@1:00:43](#) - Michael

Yes. Okay. I mean I have electronic health records somewhere else.

[@1:00:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I the thing that, I think that if they cannot download the notes, it's not possible, which is, I think that's very likely.

What needs to be done? You have... I have to tell your nurse practitioner or somebody, or maybe even you, just go, you know, one by one, you know, get the data one by one, like it is, like, and before, and that's the thing, we need to do that before you tell them, okay, I'm leaving.

So we have everything, like, you know, secure. So, yeah, it's going to take you, I believe it's going to take you, like, four hours of work to download every single patient's data.

[@1:01:24](#) - **Michael**

I can see right now, I'm going to go into this, I have a patient here. If I go into their notes, tasks, notes, they're individualized notes, so it's not like I can just, excuse me, every visit, they're having a separate note, so.

[@1:01:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, it's not, I know that there's a note tab for every single contact, is it, is it not, there, I know there's a notes tab for every single contact and go high level.

[@1:01:56](#) - **Michael**

So, that's where we keep information, that's where we keep the information.

[@1:01:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so you have it, you have. I didn't know what in that notes tab of the single contact, so it's like in one place.

[@1:02:03](#) - **Michael**

Okay, great.

[@1:02:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I thought it's like separated or something.

[@1:02:07](#) - **Michael**

No, no. So I have this one patient here, Moshe. He had a treatment on May 6th today. Here we share how amazing it is, etc., etc.

Then I have another note for his ninth treatment, another note for his eighth treatment, etc.

[@1:02:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, you just need to copy every single patient's one, unless we have the ability to do so. In which, yeah, I'm not very confident in that.

[@1:02:36](#) - **Michael**

I just need to hop on a call with them now to understand if that's possible. It'll be helpful if you can give me some clarity.

[@1:02:42](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'll do that as soon as possible. I'm to hop on a call with them now, see if there's someone available, see if that's possible.

But yeah, I think this is the main pain point, I guess you could say, in the transition. And if it's going to take you four hours of work, I mean...

[@1:03:01](#) - **Michael**

I don't think it's four hours of work. I mean, even if I'm just gathering data from patients for the last year and a half, which is how long I'm working with Ketamine Media, and we've had 250

new patients or something like that, 250 patients in that time that would do that, and it could be more than that, but I'm just picking a number that's about close, then it's still going to take time.

have to go to each one, each note, copy it, move it, copy it, move it. It's going to take days of work.

I don't know. Maybe days, maybe not. A few people working on it. But also, what about the text messages and voice notes and voice calls?

[@1:03:51](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I'm not confident we can move that, actually. I'm just not. I know you can export data. Like, of the contacts, names, and phones, and everything, I just don't think it's possible to transfer all this data.

I don't think it is. And that's . Like, no, it's very , but...

[@1:04:13](#) - **Michael**

Can we find out?

[@1:04:15](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'll hop on a call. I'm just telling you, like, don't get your hopes up. Like, just be, you know...

[@1:04:21](#) - **Michael**

The question is, can I have an archive of it so at I can refer back to it? Because there's going to be so much information that is lost, you know, patients, you know, said, you know what, I mean, look, not every company has to record all their phone calls and text messages, so it's survivable, but it helps us to look back and see what we're up to.

ACTION ITEM: Discuss transition strategy with COO, plan data extraction from Go High Level - [WATCH](#)

We have their insurance cards, so it's not... At some point, I just hired an operations person, a COO. She would have to have some, you know, because I'm not a good person to run a transition like this.

I'm not organized like that. So before that... We'd have to have a conversation with her so that we make sure that we're all on the same page.

But I also just – and then on the financial side, it's not something we touched on because some other questions that I had before we really dive into it.

I want it to be apples to apples that some kind of pay for performance and not that where I'm paying more than I was before and I still yet have to hire other services like somebody to handle the SEO or the website management, et cetera, which is something – I don't think I need a lot of that work because it's there.

Eventually, I want to change the website anyway, but there are some questions around that also. I'm willing to continue this conversation to work it, but I think there's still some open questions here to solve.

And I'm happy to grow with you and I'm more than happy to be generous. So if we're making money and we go from doing X patients to X plus, you know, whatever, five, ten, you know, we can come up with a tiered approach or something like that for the rewards you based on performance without, you know, over-performing, et cetera.

[@1:06:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm. A hundred percent. Yeah. So, okay, so what do you want to do? What do you want to do next?

I need to hop on a call with GoHighLevel. What do you want to do?

[@1:06:26](#) - **Michael**

I guess the first question is, what can GoHighLevel do?

[@1:06:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm going to try to get meta access.

[@1:06:31](#) - **Michael**

Okay, no problem. That's going to be my next step. Let me get access to meta. I'm going to give him a call and see if I can still reach him.

Awesome. Okay. No problem, man. All right. Thank you. Bye-bye. Thank you. Bye-bye.

Transcript 10:

Impromptu Zoom Meeting - May 14

[VIEW RECORDING - 67 mins \(No highlights\)](#)

[@0:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

This meeting is being recorded. Hi, Chris.

[@0:04](#) - **Chris Shepard**

Just a second. Yeah, no problem.

[@0:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

David. I'm trying to teach my brothers to work with the campaigns, and they're just, they're not focused. That just leaves me off.

Anyways, I wanted to go over the ads with you. need to finish. Did you see the ad priorities that I sent yesterday?

[@0:46](#) - **Chris Shepard**

Yeah, so great job on those pictures for the thing.

[@0:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That last was awesome. Just a second. Wait, I'm about to lose my . Thank you.

[@0:57](#) - **Chris Shepard**

Thank you. Thank you. Thank you. you. Thank you. Thank you. you. Thank you. you. Thank you. you. you. Thank

Let grab my book.

[@1:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so you love the creatives?

[@1:40](#) - **Chris Shepard**

Yeah.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

[@1:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Let me share my screen. So I'm going to show you what I've built here. Okay. Can you see my screen?

[@1:59](#) - **Chris Shepard**

Yes, it it started. I don't know why.

[@2:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

There it goes. Perfect. Awesome. So what did you say? You were about to say something?

[@2:06](#) - **Chris Shepard**

Nope.

[@2:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, you said just something. I thought you were going to say something.

[@2:12](#) - **Chris Shepard**

Oh, I just said it was sharing.

[@2:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So now I have some questions. I looked at the targeting that you did here. And I did some research as well.

And I have a couple of questions. So first question is, so there's a zip code. That's nice. That's good.

I saw that here. Like, is there a specific reason as to why there's only women? Why the age targeting is from 18?

Why do we include all these interests?

[@2:46](#) - **Chris Shepard**

And just like, you know, I was just kind of experimenting, seeing how it was go.

[@2:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I'm open to doing anything. So, okay.

[@2:54](#) - **Chris Shepard**

So the one thing is what we saw. So in our clinic, of I'll kids. So schedule, Um, there's just, it seems like women are easier to target, but I think I should take that off and do both.

[@3:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I mean, I really, like, have you, did you notice a pattern with men in general, or?

[@3:18](#) - **Chris Shepard**

No, it's just that women are more likely to really seek intervention.

[@3:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Yeah, that makes sense.

[@3:26](#) - **Chris Shepard**

I understand. Again, like, when you look at our client for the last three years, like, 70% are women. So I was just like, you know, for the time being, because we're just so, you know, trying to keep costs down.

I was like, let's just find women with the marketing until we kind of get, like, going. So, but now I'm open to, you know, targeting both.

[@3:55](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So let's see what's going on here. So I can see that there was, yeah. Okay.

[@4:00](#) - **Chris Shepard**

No, there's also males here.

[@4:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Like males left a lot of details here, like \$11. Here you can see that males, for example, like it's a women video too, \$122, not good.

Female, two here, men, didn't really spend a lot of money. So there's one ad that really spoke to men.

Seems like it's a how to beat the oppression one.

[@4:22](#) - Chris Shepard

I'm assuming that- That's something that's a picture. It's a super simple ad too, like that one.

[@4:27](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. You don't need to complicate stuff. Yeah, exactly. So what we're going to do now, I wanted to ask you, like, I think that targeting based on zip codes and income based on zip codes is going to be a better way to go, in my opinion.

[@4:47](#) - Chris Shepard

That's what I did too.

[@4:49](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. So I added like a bunch of zip codes in here. Yeah. As well. Um, as I said, like I upped the age range from 26 to 65.

[@4:58](#) - Chris Shepard

Do you guys get 65 plus? Yeah, we get a lot.

[@5:02](#) - Oriel Mor (oriel.mor2001@gmail.com)

Awesome. Okay. And I think that we should, we should remove all the targeting options. Honestly. Yeah, let's try it.

If you notice, if you notice like a pattern with people that are like broke, can't pay deductibles, all that stuff, we can always change it back.

But because we're in a local area, like just for you to get some context. In Israel, for example, when we advertise to the whole nation, and it's like eight, nine million people, I don't do targeting.

Yeah, but all health is a different animal, though, too, right? Yeah, 100%. But in a local area, the thing is, because it's so small, Facebook can really figure out who you want really, really fast, too.

They have insane amounts of data.

[@5:43](#) - **Chris Shepard**

Okay.

[@5:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And so for example, in Israel, what we, yeah, let me show you, like the most perfect example of an Israeli client.

[@5:52](#) - **Chris Shepard**

Yeah.

[@5:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So yeah, there's these guys. Okay. Okay. how about DJ course? Yeah, remember, I don't remember me telling you that, but basically, this is the main campaign that we've been running.

I tried also landing page, as you can see, I upped it in like two last two days, because it didn't work at all.

Probably gonna turn that off. So you can see that with all of these, all of these are open, open audiences, and you need to like, say, Oh, wait, who, who the wants to be a DJ?

Like, know, it's like a very small audience.

[@6:28](#) - **Chris Shepard**

Yeah, it's still, I still put it open.

[@6:30](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. And Facebook somehow got the audience. It depends on the creative and the messaging that you have, and not necessarily on the on the technical things that you do in the ad itself, like the target and all that stuff.

[@6:42](#) - **Chris Shepard**

Let the Facebook algorithm learn. Exactly. Find it.

[@6:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

yeah, I mean, yeah. And also your messaging, your messaging is going to dictate like, you know, your, it's going to dictate your results.

If your ad is good, it's gonna work. If it's not good, it's not gonna work.

[@6:56](#) - **Chris Shepard**

Hey, one thing can you put in the ad, like, so at the At the of the ad, can you say something about, can you please share so people will share the ad if they see it?

[@7:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, I would rather not do it because if it's a person that has depression, he wouldn't want to share it with other people because it would make him seem kind of weird, like, what's going on with you?

[@7:23](#) - **Chris Shepard**

That's a really, really good point.

[@7:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You're right. Yeah, it's dangerous. So that's what we're doing. We have these two ones. We can also duplicate this.

And this is like stupid simple, but this just works. I think this will work. Also, I want to create you the ad scripts as well.

You can technically take this script and film it. If you want to, you can do that. If you need any help from me, let me know.

I can also send you... Oh, I actually have a... be tell tell want, tell You're I Video Ad Mastery, so you can use that too, put in the Zoom like, you already know how to talk.

Where the is my, wait, how do I go back to Zoom here? What is going on? Oh, okay. So I sent you the doc info for that.

Super simple, not very complicated, just going to give you like a baseline for that. I need, the last things that I need to do is I need to have the submit application event on the landing page.

Because what I did is that I cloned the funnel step. I cloned the funnel step and I basically had this new landing page instead of changing the one that we already have.

[@9:06](#) - **Chris Shepard**

Perfect.

[@9:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So let me... Did you go over the landing page?

[@9:12](#) - **Chris Shepard**

No.

[@9:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So let's go through it now. I looked at the... Also, I analyzed the stats from the past as well, and I put less emphasis on desktop because 97% based on your data in the past, 97% of traffic.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

came from mobile.

[@9:31](#) - Chris Shepard

So... Good call.

[@9:33](#) - Oriel Mor (oriel.mor2001@gmail.com)

So I'm going to show you the desktop just so you see the messaging and stuff. So this is the new hook.

Obviously, if 370 grand reputation got their life back in 21 days with TMS therapy and how you can too, even if you've tried meds and all that stuff, I need to change that.

Then we're going to change this to a new form. That's why I need to change that. And then I put this here to create some trust, credibility, then covered by insurance.

Then I put gene store here just as... It's way shortened for them to understand, like a person that actually did it.

Then we go and explain why nothing ever worked. We have this, we have a bunch of copy here, a bunch of copy.

This is from the guy that I showed you from Alpha Omega Wellness. I really like this picture. So I used it too.

And basically what I do here, if you notice, is I have pictures here, every like three or four sentences to break the, break the eye.

So it's easier for people to read. So, and then I add this again here with the Harvard, Mayo, and Stanford and all that stuff.

Then we have call to action. Then we explain how the process works. So free consult, mental health evaluation and custom plan.

And then the treatment begins, then another call to action. And there's frequently asked questions here in case people have questions, you know, and then we have the picture here.

need to move this picture over here, but it's not, it's not that important, honestly. And then we have again, apply below and all that stuff.

So I just need to change some stuff on desktop, even though it's not important at all, in my opinion, like mobile.

So yeah, that's basically a landing page. I can also do a test here. I'll do a test between the two hooks and have like how to feel normal again within 21 days with TMS therapy and all that stuff.

Try some shorter stuff and all that too. There's also three bullet points here, by the way. I want to maybe, just let me show it here.

I don't know why I opened up the page like that in another way.

[@11:32](#) - **Chris Shepard**

Did you see how that looked on mobile too?

[@11:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yep, on the top, yeah. Of course. So this is how it looks on mobile. You have these three bullet points here, tell me more info, then it takes them again.

This, this, this, this, all that, call to action, process works, questions, meet the doctor, another call to action, then the address.

So extremely simple. has all the, all the, all the stuff that it needs. I believe that this compared to the last.

I So the last page will convert better. also saw your conversion rates. So a cool thing that you can do here.

No, that's not what I want. A cool thing that you can do here. Let me just reshare my screen.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

Okay. So what you can do in general just for you to understand is that if you go, for example, let's take, let's take this month.

Okay. So we have not a lot of data. So you have 16 website appointments applications and you have 166 clicks.

What does that mean? That means that from 166 clicks on the link, only 16 people submitted their application, which is, which is kind of, kind of good.

We can do it better. It can become better because the offers, there's not a lot of friction. We want to push it to 15, 20%.

And I believe that's possible. So, and when, and if we push it to 15, 20%, what's going to happen is our cost per booking, our cost per appointment schedule is going to go down to \$17.

it. look And then imagine that we also get the click-through rate up to 1.5%, then it's going to go down to \$12.

[@13:07](#) - **Chris Shepard**

Yeah.

[@13:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's where the real money begins. You know, that's where the real stuff begins. So, and also I look here, I wanted to ask you like, did this audience get like lower quality leads?

Because the price per, you know, the cost per result was way lower here.

[@13:24](#) - **Chris Shepard**

Yeah, I've had a lot of people come through with a certain insurance that, well, there might be some changes though.

So it's, it's good that like our cost per lead is gone. Well, we've seen some fake profiles too. I don't know.

[@13:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm not sure. I'll have to look at it. Yeah. Yeah. So the thing is, depending, like, let's see where this, when was this turned off?

This was turned off on February 11th. So do you remember? Or like it being a problem since the start of the year or something, so let's say.

[@14:04](#) - **Chris Shepard**

think, well, I just thought the other ads were working better, so I think I just was like, let's run with the other ad.

[@14:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, wow, you turned this off last year. Wasn't even this year.

[@14:15](#) - **Chris Shepard**

Yeah, maybe it was last year, yeah.

[@14:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it was last year. Okay. I got you.

[@14:21](#) - **Chris Shepard**

Now, look at how crazy this is. landing page. So the 21 days, I'm trying to think through the verbiage of that.

[@14:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, if you're. Do you want. Yeah, sure.

[@14:37](#) - **Chris Shepard**

I'm with you. So, yeah, most of it's, you go five days a week for six weeks. Now, there's some people that are late responders, so.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

[@14:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I believe that, I believe that's the thing, like, because we, we see the, we have the stat here. 92% of people achieve.

Significant improvement within 21 days.

[@15:03](#) - **Chris Shepard**

Well, some of those people, it takes a little bit longer than 21 days. might be at treatment 28 or 30, you know what I'm saying?

[@15:10](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is that another thing that you think you can set an expectation with them, like before the treatment begins?

[@15:15](#) - **Chris Shepard**

Like literally 90 plus percent of patients are getting better within that 21 days.

[@15:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so you just need to set an expectation with them. I don't think that's going be a problem on the front end, correct me if I'm wrong.

[@15:27](#) - **Chris Shepard**

Let's run it.

[@15:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome, okay. So, yeah, this is supposed to be a converting machine, converting monster. This is all my foyers are poured into this.

Yeah. So we have this. The only last things that I need to take care of, basically, is I want us to run.

Can you see? Oh, my God. did that. It's like in different profiles. I always need to unshare and reshare.

It's annoying me. Let's see if I can change that. Just switch screens. Okay. Okay. Okay. you. No, I always have to un-share and then re-share.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

[@16:05](#) - **Chris Shepard**

So that one, that's for like the generalized public, and then we got it for adolescents.

[@16:12](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, we can. Okay, so there's two options here.

[@16:15](#) - **Chris Shepard**

I need to finish with adolescents.

[@16:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So there's two options. One, we can just choose because there's these two ads, and there's four more ads, ad creatives, and there's also one more text as well.

Okay. So we have like way more stuff to test. So the question is, is there, we can go through, you can go through Slack real quick and tell me which one you love the most because there's also the notes ad, in which I like the notes ad a lot because it's also dynamic, like it's animated because I took a recording of a screen when I wrote, so that also hooks people more to see what I'm writing.

And there's also like the more, there's the more, what's it called?

[@16:54](#) - **Chris Shepard**

These are the attachments.

[@16:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, and there's more of the design that's too, like with the whole. And sitting down and with the brain, with the person inside the brain, which is like red, you know, so that's also a thing that we can test out.

[@17:09](#) - **Chris Shepard**

Show me Slack real quick.

[@17:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Show me which one you're talking about. Yeah, the thing is, I need to log into Slack on my computer.

I only have it on my phone right now. Maybe. Yeah, I only have it on my phone.

[@17:52](#) - **Chris Shepard**

Are you there?

[@17:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, yeah, of course.

SCREEN SHARING: Chris started screen sharing - [WATCH](#)

[@17:55](#) - **Chris Shepard**

You want to share a screen? Oh, yeah. Yeah. So, share, share, share, share, share screen, share screen. Okay. Can you see my screen?

[@18:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@18:22](#) - **Chris Shepard**

Okay, so here, the add creatives.

[@18:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So this is, like, these are two. These two are two. edited them. It's just the raw one. I edited it.

Just look at it. I wanted you to understand the concept. play it. So this is, like, edited and all that stuff.

[@18:47](#) - **Chris Shepard**

Fast forward it to the end.

[@18:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So basically, this is, like, a one in which I just hooked. them to wait until they watch.

[@19:01](#) - **Chris Shepard**

And if it's relevant to them, they're going to read it.

[@19:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Another one, I just did a different headline. Yeah. Same thing, different headline. Oh, I think that, oh, that's the same one.

Wait.

[@19:15](#) - **Chris Shepard**

Yeah, they were both the same.

[@19:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

In the other one I wrote.

[@19:22](#) - **Chris Shepard**

Awesome.

[@19:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

In the other one I wrote, there's a new way to work with treatment-resistant depression. Read this post to learn what it is.

So that's the second one. It's basically the same thing. That's the headline. And there's also these four creatives here.

So there's the woman one, the brain one, and basically the same, just a different picture. One. So that's one.

And then you, if you move to the right, there's also another one here. So basically the same thing. Which ones do you like the most?

That's the question. And, like, how much do we want to test, you know?

[@20:04](#) - **Chris Shepard**

Yeah. I mean, that's good. I mean, why don't we just run all three to see which ones convert better?

[@20:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Budget.

[@20:21](#) - **Chris Shepard**

Okay.

[@20:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So what do you think? Is there a specific one, specific ones that you're, like, you like the most?

[@20:34](#) - **Chris Shepard**

That last one?

[@20:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You like this one?

[@20:38](#) - **Chris Shepard**

Man, they're all good.

[@20:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

mean... Yeah, the thing is, it depends on, like... Because we don't have a lot of budget, we should test, like, more carefully.

[@20:48](#) - **Chris Shepard**

I can increase the budget a little bit to run it for, like, a week.

[@20:52](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@20:53](#) - **Chris Shepard**

Because let's just test it, because we need to test this out for not only me but the other clinics, so...

[@20:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@20:58](#) - **Chris Shepard**

Yeah, that makes sense. I agree. I'll increase the

[@21:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. I can also increase the budget from now on if you want. can just talk about it before and I can alert you.

Or if you want to increase it, can also do it yourself if you want more control.

[@21:11](#) - **Chris Shepard**

Depends on you, though. Why don't I just do all four and then run like \$100 for the next week?

[@21:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. With that budget, we can also run the notes ad. Or did you like that less?

[@21:27](#) - **Chris Shepard**

I like that. So you basically will place that recording?

[@21:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Obviously, I'm going to edit it. It's not going to be from the moment in which I start typing.

[@21:42](#) - **Chris Shepard**

Let's just try it. Again, this is where we got to experiment to figure out, out of all these, which works best.

So let's just, I think we've got to start trying all of them and see what, again, let the market decide what's best.

[@21:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, 100%. I also wanted to try Gene's new ad. Well, it'd be. I also added like subtitles. I started from her talking about I've struggled for 34 years with depression.

So it's like way more on point. It's like half the time that it was before. I just read to understand.

But the thing is, I already put her video on the landing page too. So that's why I'm like, I'm not sure whether we should put her because it's going to be like repeated, repetitive, you know, the thing that the only thing that we can do is specifically for Jean's ad, I could edit Katrina's ad, like Katrina's video and then show them Katrina's story instead.

Yeah, we can do that. But do we want to do that?

[@22:40](#) - **Chris Shepard**

I'm not sure. Yeah. I mean, I think again, I like your idea getting it shorter would be good. And then again, I just, I don't know, we just got to test them all and see.

[@22:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, 100%. Okay, so let's start with these ads. We're gonna, we're not gonna do Jean you know. And based on the results, we're going to see what works best, and we're just going to, you know, stop things, keep on going with things.

I also added the UTM into the text itself, like what I told you, remember, the thing that tracks the URL.

So we're going to be able to understand which campaign to come from, from now on. And, oh, and one last thing, I looked at the high level, and man, your funnels are confusing me, like your pipelines.

Oh, the pipelines. Yeah, there's so many pipelines, I don't understand what's supposed to go where.

[@23:30](#) - **Chris Shepard**

Okay, I can help you go through that.

SCREEN SHARING: Oriel started screen sharing - [WATCH](#)

[@23:33](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so let's go, let's do that for a second. So, okay, so we have like a bunch of pipelines here.

[@23:44](#) - **Chris Shepard**

So the main one right now, so this is the one I use, so this one right here, TMS pipeline.

[@23:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@23:51](#) - **Chris Shepard**

And then all the leads are coming through the external lead.

[@23:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, so you want to put it in the external lead opportunity when they... Okay, no problem. I got you.

Cool. With the automation, is there any resources that you want me to send them, like right then and there when they get the message?

[@24:18](#) - **Chris Shepard**

What do I currently have?

[@24:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You have the snippets and all that stuff. We can take links from the snippets if you want.

[@24:30](#) - **Chris Shepard**

I think I just have something like, thanks a lot for filling out the form. Someone from BrainStim TMS will be following up with you.

[@24:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I think they just get a text and an email. Okay, yeah, I'm going make it way more personalized though.

I'm to say like, hi, it's Chris from BrainStim TMS. I appreciate you for filling out the form and taking a step towards feeling better.

I'm going to call you, me or someone from my team is going to call you in the next couple of, I'm in between treatments, so I'm going to call you in the next.

Lesley Sure, I've tried. You a couple of minutes or, you know, I'll call you as soon as possible, ideally in the next couple of minutes.

But if not, just expect a call from this number.

[@25:09](#) - **Chris Shepard**

Yeah. And then that's where I was thinking from, I guess it's good just to send them up just a typed out text.

You don't need a video for that.

[@25:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Wait, what's your idea? What do you have in your hand?

[@25:28](#) - **Chris Shepard**

So, remember how you can, so actually it's in that video that I sent you on Slack?

[@25:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, the iPhone video?

[@25:37](#) - **Chris Shepard**

Yeah, where you can like, again, so it showed how the lead came in, Ohio takes the info, it creates the personalized video to send back to the.

So I was thinking of like sending a personalized video through HeyGen, like, hey, it's Chris. Hey, you know, so like Patty, hey, Pat, it's Chris with BrainStim.

Thanks a lot for filming. We were going to give you, you know, again, whatever the talk track is.

[@26:06](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

This could be good. Do you want to do that? I mean, I can, I can look into that.

[@26:10](#) - **Chris Shepard**

Yeah. And again, that, remember, it's about developing a relationship. So the, the, the patient's going to be like, wow, they sent me a personalized video.

[@26:19](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Does it look, does it look realistic though?

[@26:22](#) - **Chris Shepard**

Do you think it's going to be realistic? Again, I've seen some that looked really realistic, some that have it.

[@26:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I got, it's got to try it and see. Okay. So I'll work on that. I'll work on that.

[@26:33](#) - **Chris Shepard**

And then meanwhile, we're just going to have the automation set up, you know. we go to Heygen, which account should I sign up for, for Heygen?

So there was a couple of different plans here. Can you go to Heygen real quick?

[@26:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. So, okay, so there's also API pricing, which API is what we need.

[@27:07](#) - **Chris Shepard**

I was thinking one is like \$80 US a month because it gives you two people, I think it was the scale.

[@27:36](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Do we need two seats though? We can just use the same account. don't see a reason to. Unless there's something else here.

[@27:44](#) - **Chris Shepard**

There's 4K, 30 minutes. But it says you have to have two seats. You can't just do \$39.

[@27:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

But what's the difference between this one and this one?

[@27:58](#) - **Chris Shepard**

30 minutes.

[@28:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's 30 minutes here, too, no? Where do you see that we need two seats minimum in the creator? Oh, no, that's in team.

But do we have to get team?

[@28:14](#) - **Chris Shepard**

Scroll up a little bit.

[@28:20](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Video generation is the same thing. The main difference here is that you can get two custom video avatars, two custom interactive avatars, unlimited avatar photo avatars.

Edit.

[@28:32](#) - **Chris Shepard**

So I want to clone myself and then clone Dr. Singula.

[@28:38](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, you need the team one if you want that.

[@28:41](#) - **Chris Shepard**

I want to clone myself, but I also want to clone Dr.

[@28:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Singula. Yeah, I get it. So yeah, you should get the team then.

[@28:48](#) - **Chris Shepard**

Yeah.

[@28:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No problem.

[@28:52](#) - **Chris Shepard**

Yeah, I'll get that one.

[@28:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, and I'll look into the API and then I'll ask my friend.

[@29:00](#) - **Chris Shepard**

I'll ask my friend if you can help us. Should I do a background with a green screen, or what do I need to do, or should I just film it in the clinic?

[@29:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, in the clinic, man.

[@29:10](#) - **Chris Shepard**

Right.

[@29:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That is a reason not to, like, have a white coat on, look authoritative, and all that stuff. Very simple.

If you have, like, in your clinic, like, a nice background, like, there's green, like, trees in behind you and all that stuff, like a window, you can do that, too.

[@29:26](#) - **Chris Shepard**

Cool, so, okay. Alright, I'll work on that.

[@29:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. So, I, what I have to do is change the form on the landing page, change the, like, create the automation.

I'll put it in the external, like, in the, like, external leads and all that stuff. I hope that you're going to be able to, like, deal with this, because it's like, ah, this looks so overwhelming.

Yeah. We have the UTMs and all that stuff. And, yeah, that's basically it, I think, like, and then we can go live.

I'm finishing with that and we go live, basically. good. I'm basically.

[@30:00](#) - **Chris Shepard**

So a couple of things. So we think we've got some accounts that don't need the call center. So just like fine tune.

think we're going to, we want to basically Yeah, in a week we'll be able to see which ads are working.

We can just copy and paste them already. You and I need to go through like our presentation. I already have a presentation built out to go through with the customers.

So we can go through and re-customize that.

[@30:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Do you think we need a presentation?

[@30:37](#) - **Chris Shepard**

Yeah. Yeah, you need to walk through the doctors and show them exactly what we're doing.

[@30:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@30:44](#) - **Chris Shepard**

Guys have high anxiety, convert like signing up.

[@30:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, no problem.

[@30:53](#) - **Chris Shepard**

Yeah, I don't think you can just call and say, hey, we're just there. Everyone's such visual learners and understand.

sorry. not. see. I'm We're, All

[@31:00](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And what I'm doing, what I'm doing, actually, is I just, you know, I hop on the calls, I talk to people, they're just telling me, you want to see how my brain works?

Yeah, sure. And I'll just open up the Google Docs, throw them examples of ads. I show them how we track the stats.

I show them how we set goals. I show them, like, creative examples. I show them campaigns that are running.

And I tell them, yeah, this is basically it.

[@31:21](#) - **Chris Shepard**

This is, like, super simple. So, but have you, okay, so how many accounts have you, I mean, how many accounts have you signed up so far?

[@31:30](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I have about six more. Currently, like, there's one that needs to pay me, another one that needs to complete the onboarding form, another one that wants to leave his marketing agency.

There's, like, there's a bunch of people there, like, in different stages, basically.

[@31:44](#) - **Chris Shepard**

Okay. And so, and then the price point, I mean, has it been over \$5,000?

[@31:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it hasn't been.

[@31:51](#) - **Chris Shepard**

You're right. So, the thing is, like, when you start saying you're going to spend \$5,000 or \$7,000, they want to know every...

So we need to spend time just to kind of, and again, we, we can just go with it and try it.

But again, everyone that I've talked to, they really like going through and understanding everything.

[@32:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that makes sense.

[@32:18](#) - **Chris Shepard**

Agreeable. Very organized fashion, step one, step two, just slide by slide.

[@32:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I get that.

[@32:27](#) - **Chris Shepard**

I get that. It's easy when you're like saying, Oh, I'm only going to charge you like this much, like very little this month.

[@32:35](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Like everyone just goes with it.

[@32:37](#) - **Chris Shepard**

But when you start asking for like a big payment, they want it to be like a big plan.

[@32:44](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that makes sense. I agree.

[@32:50](#) - **Chris Shepard**

So the other thing, so this is to change subjects a little bit. So I've got a huge opportunity and this is like I was telling you, like we got to, well,

Focus on the mental health and the TMS and ketamine area, but my really, really good friend, he's an interventional radiologist.

He wants us to help him with his practice. My question to you is, so I basically told him it's going to be between \$5,000 and like \$8,000 a month.

[@33:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@33:28](#) - **Chris Shepard**

But so he needs a whole new website built out.

[@33:33](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@33:35](#) - **Chris Shepard**

Like how much would we charge to build out a website if he signs like a 12-month contract with us?

[@33:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I need to talk to my colleagues. Okay. There's a bunch of people that can do that on Pfizer.

[@33:52](#) - **Chris Shepard**

They do a very good job. So the thing is, is like, I've got like six other websites that we basically need to clone this morning.

Just... You know, repurpose and create his own. So it's like an easy build, whether AI can help build the website or we just outsource that to somebody.

But I've got all the samples of the websites. So the great thing is they actually, it's a pretty high ticket item for their clinic.

[@34:24](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@34:25](#) - **Chris Shepard**

It's usually \$1,000 to \$6,000 of treatment. So I think this is going to be a really good niche for us once we get through the mental health stuff.

And he's like, I'll be like, he wants to help us like with his other friends that are doctors across the country.

[@34:45](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So. Okay. Sounds interesting. Yeah. I mean, that's possible. I think that if you want to like add somebody else into the mix, this should be the last one.

Yeah. Like, I understand like the value that. If he gets a good job, then he's going to offer some more people, more clients, and there's nothing that I myself cannot craft because I know marketing.

So that's like a good point. Then fine. Yeah, sure. We just don't want to complicate it too much. This should be the last like avenue that we expand upon, in my opinion.

[@35:22](#) - **Chris Shepard**

All right.

[@35:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So back to this.

[@35:27](#) - **Chris Shepard**

Yeah, we can go live. I'm going to double check all that. Can you go into the, or do you want to do the, want to double check the workflows right now with the lead coming in or you just want to do that later?

[@35:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I can do that now if you want.

[@35:48](#) - **Chris Shepard**

mean, let's go through it now. I got time.

[@35:51](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So no problem. So which one is the Grand Rapids? Mm-hmm. Bookly, Workflow, is this the one?

[@36:08](#) - **Chris Shepard**

Last update.

[@36:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm assuming that that's Facebook, no, that's the Facebook survey submitted. Calls are no, educational videos, brainstem, appointment confirmation, no, and Workflow.

Do they get a message currently when they leave the details from the landing page?

[@36:28](#) - **Chris Shepard**

Yeah, go to Facebook marketing.

[@36:30](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Is that the one? No, that's not the one. I actually started building this, so it's the one I'm working on.

[@36:36](#) - **Chris Shepard**

Yeah, I'm sorry, .

[@36:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, yeah, it's not obviously that complicated, you know, it's not that hard. There's a bunch of things here.

[@36:46](#) - **Chris Shepard**

Yeah, no, it's not in that. So wait, go to, okay, go to brainstem. Wait, go to that one right there.

What's that? Oh, I don't even know what that is.

[@37:01](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Let's see if there's something here, I mean, so I think it's, I have no idea which one it is, wait, wait, go, okay, do this, go open, open another tab.

think that's this one. Another tab?

[@37:19](#) - **Chris Shepard**

Yeah, so go to opportunities and right-click, yeah, and then, oh, see where they left the details from, okay.

[@37:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, you can see the automations, yeah, that's right.

[@37:39](#) - **Chris Shepard**

So, with that one came in on the 13th, so on the bottom left over there, it'll say, see workflow created bottom left.

[@37:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, . I'll keep going down it. Yeah, yeah, yeah.

[@37:53](#) - **Chris Shepard**

Yep. Yeah, workflow. That's really nice they did that.

[@38:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so that's the one. So SMS internal notification, what's this one? Oh, they don't get a message here.

[@38:14](#) - **Chris Shepard**

Yeah, click on that.

[@38:18](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So do you want me to work on this one or create a new one?

[@38:28](#) - **Chris Shepard**

I don't care, whatever you think.

[@38:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Depends on what feels more comfortable for you, like what's going to give you more clarity, because that's the main consideration here.

[@38:42](#) - **Chris Shepard**

Will there be a way of filtering it to know where that leak came from?

[@38:50](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, 100%, of course.

[@38:53](#) - **Chris Shepard**

So, yeah, if you think it's fine just using this one, we can use this one.

[@38:57](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Or if we just want to create a separate one. . heavily you. Okay. No problem. I'll figure that out.

I'll see if I want to use this or not.

[@39:07](#) - **Chris Shepard**

I'll update you. Yeah, click on the SMS.

[@39:09](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

What's the notification say? Click on that. That's for you.

[@39:12](#) - **Chris Shepard**

Yeah, click on it, though.

[@39:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

For instance, new assessment lead, all that stuff.

[@39:17](#) - **Chris Shepard**

Oh, yeah. I get a text. That's actually not working for some reason. know why, but I'll do it. So, yeah.

[@39:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And then... Should you use a notification? You don't need to use that. You can also add like the things that they...

I don't know if you know how to do that. I see you didn't do that here. You can just add the...

You can have like a notes thingy here, and we can have all the information about the client that he responded with.

[@39:46](#) - **Chris Shepard**

I just... So I just text message on my phone because like when the lead comes in, then I lap on the app and I actually call the patients really quick.

[@39:54](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, I know. But in general, you can keep the notes there. Like it doesn't escape.

[@39:59](#) - **Chris Shepard**

Usually when I'm... On the phone, I just log in to their contact card and see all their stuff.

[@40:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, no Versus that I'm getting a text message.

[@40:08](#) - **Chris Shepard**

Because I'm actually taking, so when I call the patient, I'm actually taking notes.

[@40:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, no problem. Makes sense. Okay, no problem. So, yeah, that's it basically. We work with that and then we can go live.

Do you have any more questions I think you want to ask?

[@40:31](#) - **Chris Shepard**

No, I think we're good.

[@40:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome, no problem. One thing that I wanted to make sure is that what we're doing with the model itself, because we don't have a paid booking.

Well, there's no way for me to take any deposits for the first month. So what do you want to do with that?

[@40:52](#) - **Chris Shepard**

We just have to, we just need to like set up a, what's the account, the online. very much. it.

Oh, you're saying for the patients?

[@41:05](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, for the patients, too. Like, we don't take a deposit for the patients. And also for my model, like working with you.

Because as I told you, I have this model in which I take the deposits for the first month. We don't take deposits right now.

So that's on my end, also, the thing we need to take care of. So what do you think? Like, what do you think about that?

[@41:22](#) - **Chris Shepard**

So within GoHighLevel, it can accept payments through that, right?

[@41:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it can accept payments.

[@41:29](#) - **Chris Shepard**

So why don't we just do it within the system? Or, again, I don't have a lot of expertise in next. I've never done it. But whatever we need to do, we can set it up.

[@41:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, no problem.

[@41:43](#) - **Chris Shepard**

Do you have Stripe? Yeah. Yeah.

[@41:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So we just, we need to connect Stripe to, we need to connect Stripe to GoHighLevel. then the question is, if you want to charge for...

... .. The deposit from people after you get on the phone with them to book the consultation in the clinic.

That's a question.

[@42:08](#) - **Chris Shepard**

Yeah, I don't think I want to, but I guess. Yeah, let's let's not charge the. Like, so, man, I don't know, I'm kind of split on this.

I've just had a lot of patients where they're like, they didn't want to pay for the consultation.

[@42:38](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@42:40](#) - **Chris Shepard**

And I felt like when we did, but we tried this a long, long time ago, and the numbers improved dramatically when we didn't do a, when we did a no charge consultation.

[@42:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay. Okay. If that's your data point, then fine, you know, I get that. So I don't want to. sense.

Okay, 100%.

[@43:02](#) - **Chris Shepard**

Ketamine clinic and stuff, yeah, we'll try it, but again, the numbers were so much greater with no charge consultations.

[@43:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That makes sense. Okay. So what do you want to do with our model of working then, when it comes to that?

[@43:31](#) - **Chris Shepard**

So you're saying when we have a brand new account?

[@43:34](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, also a brand new account. With a brand new account, like we're taking money from them. For example, when I work with you guys, the way that I positioned my model is I take the deposits from the patients when they book the call.

We don't have deposits now. So what do you want to do like for this payment model that we have set up, me and you?

That's the main question. So for example, with the ketamine. ketamine. ketamine. And I'm ordering right now, she's going to do a \$29 consultation, I'm going to take the deposit for that.

Another one is doing the same thing. Another one is just pay me, flat out simple. So what do you want to do like with me and you?

That's the question.

[@44:15](#) - **Chris Shepard**

Can you just hold on one second?

[@44:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh, never mind.

[@44:22](#) - **Chris Shepard**

So we would have to put it through our Skype account?

[@44:27](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

What do you mean?

[@44:30](#) - **Chris Shepard**

So we have a brand new practice and then we want to charge all the new leads, consultation, appointment charge, right?

[@44:39](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, we can do that. No, that's not the question. That's not the thing that I'm talking about. I'm talking about like myself here, not about the brand new accounts.

Yeah, I'm about myself because we, yeah, so that's what I was, yeah, okay. I think we had a miscommunication there.

[@44:56](#) - **Chris Shepard**

Yeah, sorry. I thought we were talking about like the patient charges. So So Yeah, we just got to set up Stripe, make sure you have access, and I have access, and then we need to create a bank account.

I wonder if there's a way where it can just get automatically divided. So maybe we need to jump on a call with Sarah to talk through that.

[@45:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, that makes sense.

[@45:28](#) - **Chris Shepard**

Yeah, let's get Sarah on the account because she's good at some that stuff. And then we can, again, just create a Stripe account.

[@45:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I mean, I think that between us, with the patients, can also, like, we can have, like, automatic payouts or something.

We can figure that out. That's not a problem. So that, we're going to figure that out. That's okay. And what about, the last thing I think is about your clinic as well.

What do you think we can do in that part? Because we don't have Deposit payments and all that stuff and that's my model in the first month with people.

So what do you think is going to be like the most thing for us to do? You know, did invest a ton of RNG into all of that.

So what do you think on your side?

[@46:16](#) - **Chris Shepard**

So like what, like what the clinic is going to, I'm confused by the question.

[@46:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, we, we are running ads for your clinic, right? Getting the ads, bid all that, the landing page, all that stuff.

What do you think a good compensation model for me would be because we don't have this \$30 deposit thing based on what we work together, you know?

[@46:46](#) - **Chris Shepard**

Yeah. What do you think? I pay you?

[@46:51](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Depends on you. It really depends on you. Like I want to, I want to feel like this is like, you know, I get the worth from our job, even though like I take way more money from other people.

[@46:59](#) - **Chris Shepard**

doesn't matter. That's I want to build something else here. Yeah.

[@47:02](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

In some way, I do feel like there's a lot of value that I do bring to the table here.

[@47:07](#) - **Chris Shepard**

have worked a lot on this, a lot. Absolutely, yeah.

[@47:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So it really depends on, like, what you think is going to be fair when it comes to that?

[@47:16](#) - **Chris Shepard**

Again, feel like we're creating the product and we're beta testing it, but I want to make sure that you get some money coming in.

[@47:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So why don't you just pay, like, \$1,000 right now? Okay, that sounds good. No problem. You don't have to do that now.

I want to set up Stripe as well. If you want, I can talk to my payment processor. The main problem with them is that they don't accept American credit cards, from what I understand.

So we can try that out if you want. But if you want to wait for Stripe, we can do that too.

So it all depends on you. Yeah, let's set up the Stripe.

[@47:52](#) - **Chris Shepard**

Two is, it'll be nice that everything's all vertically integrated in GoHilo. GoHilo! I mean, the Stripe?

[@48:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

You talk about Stripe? Yeah, 100%.

[@48:07](#) - **Chris Shepard**

So like the contracts to the clients will be in, go high level. So we actually need to build an agency account, right?

[@48:21](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, 100%. I mean, it's a thing that we build as time goes on as well. We see we get feedback from the patients.

not going to be that hard, honestly. I think like the contract stuff and the onboarding, I think that's like the easy stuff.

We can also at some point, I have a lot of SOPs and automations, how to automate the onboarding process completely.

You know, as I told you with creating the Google Drive folders, creating the cell accounts automatically and all that stuff too.

So that can happen as well.

[@48:50](#) - **Chris Shepard**

And so we need to build out a brand new, well, do I already have an account like for P2P for clients?

That's it. So again, where, you know, we call the client, we set up the appointment, they're like, yeah, I want to move forward, we basically, within GoHighLevel, we activate them, it sends them the contract, all the payment processing will be done through Stripe, which connects into GoHighLevel.

So basically, we need to build out an agency account within GoHighLevel for our customers, right?

[@49:30](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, maybe there's going to be a more efficient way to do it, I'll ask my coach. I don't think we need to use GoHighLevel with a Stripe integration for everything.

I think we can also set up an automation that if like, for example, some people get deposits, we can take the deposits, we can have an automation taking the deposits from their Stripe to our Stripe weekly, like it's going to be automatic.

[@49:53](#) - **Chris Shepard**

Yeah, most of the customers, most of the doctor's offices and doctors aren't going to have a Stripe account.

[@49:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it's not that much. It's a great one. It takes, I believe, day or two at max.

[@50:04](#) - **Chris Shepard**

So you're talking about when they take the deposit for the patients?

[@50:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@50:10](#) - **Chris Shepard**

Yeah, we'll definitely need to make them a Stripe account.

[@50:13](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, it's not that difficult.

[@50:14](#) - **Chris Shepard**

It's very simple. Very simple.

[@50:18](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, 100%.

[@50:19](#) - **Chris Shepard**

We create their, the customers go high-level account, yeah, we'll have to sign them up for Stripe so they can take the patient deposits and everything's run through their account.

[@50:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm.

[@50:34](#) - Chris Shepard

Yeah.

[@50:34](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah, of course. Yeah, we need to. It's not, it's also not very legal.

[@50:38](#) - Chris Shepard

It's not, you should not do that legally.

[@50:40](#) - Oriel Mor (oriel.mor2001@gmail.com)

Yeah. You cannot take, like, use one Stripe account to take all the deposits from all the patients. It's not, it should be through the doctor's office Stripe.-hmm.

Yeah. And then we funnel it through, like, we funnel it through their Stripe. get deposits to our Stripe. So.

Yeah, does that make sense?

[@51:01](#) - Chris Shepard

You're talking about their monthly or their initial setup fee and then their monthly fee?

[@51:09](#) - Oriel Mor (oriel.mor2001@gmail.com)

No, I mean, if there's, for example, a ketamine clinic that takes a \$29 deposit for every consultation, we're going to take the deposit on top of a retainer.

Yeah, but when you say we take it, I mean you're just saying... The deposit that patients pay, the deposit that patients pay for the consultation is going to go to us.

For example, they book a \$29 consultation to patients, that deposit is going to us.

[@51:39](#) - **Chris Shepard**

Okay. Why is that? Why wouldn't it go to the doctors?

[@51:47](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Basically, I don't know, it's just a model that my coaches use and works phenomenal. So, if we don't want to do that, we don't have to, though.

Yeah, that's the thing. Do you think that they're paying too much money already in that table?

[@52:01](#) - **Chris Shepard**

Yeah, get that. That makes sense. Okay. Well, again, med spas and stuff like that are totally different than mental health.

I think that model is going to work well.

[@52:11](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Okay. That makes sense. You know better than me when it comes to that.

[@52:14](#) - **Chris Shepard**

Yeah. We'll have to jump on a call with Sarah to talk a bit, but I don't think so.

[@52:17](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. I don't think. Okay.

[@52:21](#) - **Chris Shepard**

Because, you these patients already have depression. They have major anxiety.

[@52:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

They freak out about that stuff. Okay. That makes sense.

[@52:32](#) - **Chris Shepard**

Okay. When you're getting facelifts, know, jobs, you know.

[@52:37](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I'm saying because this Alpha Omega guy is charging like a \$21 consultation. And it works. I guess it works.

A hundred percent. So I know.

[@52:47](#) - **Chris Shepard**

Well, maybe strictly for ketamine. I don't know. Again, we can try it.

[@52:53](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah. Yeah. That also thing that I thought about. That's a thing that I thought about too. So, yeah. All right.

So we have that settled. We're also going to look into that like when things happen. It's not a very big thing to stall about.

So I have the things that I'm going to do with the automations and all that stuff. I need to get my bank account approved.

Hopefully that's going to happen today or tomorrow. Then after that, I need to open up a Stripe account.

[@53:26](#) - **Chris Shepard**

Yeah, because I think it's a really good idea of like, again, when the monthly deposits come in, they'll just be an automation at the end of the month or whatever on it getting divided up or whatever.

[@53:40](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay.

[@53:41](#) - **Chris Shepard**

Yeah, that's possible. The you're protected, everyone's protected, it's automated. So yeah, I think it makes sense.

[@53:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm-hmm. Okay. Awesome. So do you want me? So I'll wait on my end between like me and you, me and your clinic.

Do you... Do want me to wait on sending you the Stripe link, or do you want to try it with my payment processor, too?

Like, what do you feel most comfortable about?

[@54:09](#) - **Chris Shepard**

Can I send it through, like, Chase Bank in my clinic account?

[@54:14](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

If you, yeah, actually, if you want to do, like, a wire transfer, that's possible, too.

[@54:19](#) - **Chris Shepard**

Well, wires usually charge you a lot of money.

[@54:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Oh. So, Chase, I actually don't, yeah, okay, so I just need to get my bank account approved, and then I can give you, like, the, hmm, what do say?

[@54:33](#) - **Chris Shepard**

Have you ever heard of Zelle, Z-E-L-L-E?

[@54:36](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I don't think we have that in Israel, actually. If my, hopefully, my bank account is going to get approved tomorrow, I don't see a reason why not.

And if it does get approved, which I don't see why not, then I would be able to give you, like, the details of this bank account, and then we can have, like, a ACH transfer, I believe, or whatever that is.

So, and if that's not also a thing, we can also use Stripe as well. When I get Stripe approved, so yeah.

[@55:04](#) - **Chris Shepard**

What about, what bank are you by the way?

[@55:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's 1-0, that's an Israeli bank. For the US though, it's Mercury, that's their name. Okay, you haven't heard of them?

Yeah, they're mainly for people that are outside the US. Okay. So yeah, that's why I applied to them. You don't need to go to physically to the US and open up a bank account and all that stuff.

Which I probably should have done when I was in the US, I don't know how to do that. But yeah, so that's basically it.

[@55:31](#) - **Chris Shepard**

Cool.

[@55:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome, man. No problem. So I'll update you on the bank account details once it's ready. We're going to figure that out, the payment stuff.

I'll update you when the campaigns go live. Once the campaigns go live, that's where the retainer or whatever we decide.

Like we have this first month, I know what we're going to do for the next month. We need to figure something out when it comes to that.

So the retainer cycle starts from the moment that the campaigns go live. We'll time We're So, for example, they go live on the 15th.

A month after that, that's like the next retainer.

[@56:05](#) - **Chris Shepard**

So that's basically about that. Do you have any questions when it comes to that? No, I mean, once we build it up and running, I just thought like, after we really build this out, we've got 20 accounts.

Like, Sarah and I account, we shouldn't be charged.

[@56:22](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

A hundred percent, that's not problem.

[@56:24](#) - **Chris Shepard**

We want to get you money because you're putting a lot of work. I mean, we're just getting this going.

Like, absolutely. Yeah, a hundred percent.

[@56:30](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I agree with you. Of course. Yeah, we're partners. I'm not going to charge you for running ads.

[@56:38](#) - **Chris Shepard**

So, yeah. And if you need more money or whatever, dude, I got you.

[@56:41](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, awesome. And I appreciate that so much.

[@56:44](#) - **Chris Shepard**

Thank you. If need, like, more money for next month, whatever, like, just let me know.

[@56:49](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. Like, I mean, once we get the accounts rolling, I have like a bunch of people that need to pay me too.

I need to, I want to get some more cash flow, you know, to invest back more money, more ads, more content, like, you know, build stuff out.

And, you know, if I do, like, in Israel terms, I could technically, you know, technically in Israel, I could invest, like, 20, 30 hours in getting clients in Israel that would pay me no matter, like, no matter what, because I have a name already.

But here I'm, like, building something else. So if the compensation is going to be lower, I don't care. I just need some cash flow as well, you know.

So that's basically it. I'm going to update you when it comes to that. And, yeah, if you have any questions, let me know.

I'll just tell you. I'll let you know when the whole thing is ready. Like, when the whole landing page is ready, automations, ads, and all that stuff.

And do I have an approval to pump the ad budget to \$100 once it's all ready?

[@57:39](#) - **Chris Shepard**

Yeah, go ahead.

[@57:40](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome.

[@57:40](#) - **Chris Shepard**

No problem. I'll try it for, like, five or seven days at \$100 just to get – it'll learn a lot faster.

[@57:46](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, 100%. I like that mindset, too. Awesome. So I'll update you. If you have any questions, let me know.

Anything else just, you know, send me as usual, like, resources and all that stuff that you find.

[@57:57](#) - **Chris Shepard**

Yeah. Let's jump on a call tomorrow morning with Sarah.

[@57:59](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Mm Sounds good.

[@58:02](#) - **Chris Shepard**

I'll shoot you a text on times, and yeah, I'm available if anything pops up today when you're going through stuff.

[@58:08](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So I'm just working on a bunch of patient stuff. That's cool. Okay, no problem.

[@58:13](#) - **Chris Shepard**

Also, the same thing that I didn't tell you.

[@58:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

The same thing that I didn't tell you. You want to go first?

[@58:18](#) - **Chris Shepard**

I was just making sure I had my list of to-dos. Is there anything else that I needed to get done?

[@58:28](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Get pictures of Dr. Singla in the office if you're going to go there today. If you can, just have a clarity for yourself if there's patients in which you can film testimonials for, so we have that locked and loaded, and that we can have a filming and shooting day.

Another thing, I'm going to send you the ad scripts. Be ready on me sending you ad scripts for you to film in the clinic itself too.

[@58:54](#) - **Chris Shepard**

Yeah, I could shoot probably next week.

[@58:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Okay, yeah. We have the ads running now. Also, it's So it's better to run these ads first, see which ones work best, and then you just can convert that to video.

[@59:09](#) - **Chris Shepard**

That's going to work way better, you know? I don't know if you remember doing this, but someone – I thought there were some tips and tricks on filming for Haygen.

Like, they wanted you to talk a certain way. They wanted you to, like, move your head. Like, did you ever come across anything like that?

[@59:32](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

No, but I'm pretty sure that when you – if you get the team plan, I think they're going to have, like, a call with you.

can contact their support. They have a whole, I believe, university of that. Like, there's no way that they don't.

Yeah, it's extremely simple. There's also, I believe, tutorials online, but I believe that Haygen, the company, should give you, like, the proper, proper, like, instructions to get good videos going.

Because if they – if you don't get good videos, they don't have attention. So, yeah. So write that down, too.

Anything else that I forgot?

[@1:00:01](#) - **Chris Shepard**

No, I can't think of anything right now.

[@1:00:03](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. Okay. And one last thing that I wanted to tell you, which is insane, which is insane. I went on a call.

I went on a call yesterday with the first ever person in the U.S. to beat the government in a federal court when it comes to psilocybin treatments.

So what he did, he has an organization now that is basically classified under religious ceremonies. And what he can do, basically, because of that, he can treat psilocybin legally.

And remember the guy who told you from Utah? He can treat people legally with psilocybin. And not only that, because his organization now is legal by federal court, he can train clinicians under him throughout the whole U.S.

and give them the ability to treat people with psilocybin. Yeah. Yeah. That's insane. That's crazy.

[@1:01:04](#) - **Chris Shepard**

I might have to jump on a call and meet this guy.

[@1:01:07](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

It's insane. Insane. Like, yeah, I want to do that. I was boggled.

[@1:01:14](#) - **Chris Shepard**

I want to learn how to do that at our clinic.

[@1:01:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, so he's working right now. had a call with him yesterday. We agreed to hop on a call in like two, three days.

[@1:01:22](#) - **Chris Shepard**

I need to go through all his resources and all that stuff.

[@1:01:25](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

He wants to promote a course. wants to start like a training program for clinicians to learn how to practice.

[@1:01:30](#) - **Chris Shepard**

Yeah.

[@1:01:31](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So yeah, there's a lot. There's like crazy things that may be coming on the way.

[@1:01:36](#) - **Chris Shepard**

So that's the thing is we could probably help him too. Again, like we're going to be talking to all these practices and then we can say, hey, also we have an add on course for you to bring on psilocybin like me.

Like I want to bring on this, this treatment program to my clinic with psilocybin. So I want to learn from this guy.

[@1:01:56](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that's definitely possible. I think that's not going to be a problem. I just want to see, I don't know.

When he starts the course though, that's the thing. I need to talk to him, get more details and all that stuff too.

So yeah, I watched, he has like a webinar on his website. I watched that. He has like a good direction, but he needs more, needs more polishing.

And I think that like, I need to help him a lot with polishing, like the messaging and all that stuff.

[@1:02:19](#) - **Chris Shepard**

So that's going to be on my clinical end. I mean, I run, is he a doctor?

[@1:02:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

I actually, I didn't ask him. I don't know why, but he's an MD.

[@1:02:30](#) - **Chris Shepard**

Yeah. Tell him about me and my clinic. Cause I can, we can help mold this for him.

[@1:02:38](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So let's see. You mean like offering like the TMS clinics to input that too?

[@1:02:47](#) - **Chris Shepard**

Well, no, I'm more of like, again, I want to bring in if it, cause I have patients that I wanted to treat with psilocybin.

Uh huh. We can like beta test. Like rolling out his program to clinics like mine, get it going in my clinic, prove the concept, and then we actually will help other clinics get psilocybin as well.

[@1:03:16](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Like a partner with him. Yeah, that sounds good.

[@1:03:21](#) - **Chris Shepard**

I'll hop on a call with him. I'll tell you what you said.

[@1:03:23](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

See what he says about that too.

[@1:03:25](#) - **Chris Shepard**

Tell him I'm the clinical director at BrainStim TMS. We have patients that we want to treat with psilocybin. I'm very interested in meeting and talking to him about this whole process.

[@1:03:36](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

That's awesome. Okay, no problem. I'm supposed to hop on a call with him on Friday, I believe, depending on his availability.

So, yeah, I mean, that's like a very big thing that could happen now. A huge thing. Like not even huge.

That's like revolution type . So, yeah, so that's about that.

[@1:03:59](#) - **Chris Shepard**

Just want to tell you that too. And once we build this out, and hopefully maybe we can get a little bit of revenue from helping other, like when we sign up 10 clinics to do P2P marketing, or our marketing, whatever, we can say, hey, doctor, not only do do it with TMS, but do you want to learn how to have psilocybin as a treatment option for your patients?

Here, we have a course for that.

[@1:04:29](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, a hundred percent. Like, it's going to be a whole training program. We can have a partnership with the guy, telling that we're going to get commissions based on people that we give them to the program.

[@1:04:38](#) - **Chris Shepard**

Yeah, there's insane stuff that we've done here. Exactly. We get a commission for every account we bring to him.

[@1:04:43](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Yeah, that's going to be very cool. It's awesome. Yeah, it's all like in babies, all very, very fresh, new, nothing's guaranteed.

I need to see this guy more, meet him more, know him more. He seems like a very good guy.

Yeah. But so. I just need to talk to him like this is my this is a thing that I'm extremely extremely excited about because with my marketing knowledge, and my understanding of like human psychology, I can help him like reach people because there's a way that he talks in which it applies to people like me and maybe you that are super hyper aware of what psilocybin is.

And he talks about like, it's a mystical experience. And it's like something that's like, different and all that stuff.

But he doesn't. It's hard to it doesn't it doesn't do a very good job at like, how's it called?

Yeah, articulating how psilocybin really is different that it's not dangerous or some hippie trippy . That's like the main challenge here.

[@1:05:45](#) - **Chris Shepard**

Yes, I think I can help out with that part.

[@1:05:48](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So yeah, that's basically it. So I'm gonna update you when I hop on a call with this guy. And I'll talk to him tell it tell him like what we talked about.

And all that stuff too. So yeah, he's a very he's a very great guy. He's a guy. So.

[@1:06:02](#) - **Chris Shepard**

Okay, cool, man.

[@1:06:04](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Awesome. So, yeah, let me get you on a call in the morning with Sierra to go through more of the back end agency stuff.

[@1:06:13](#) - **Chris Shepard**

Building that out and then just going through the details of that and all the Stripe stuff.

[@1:06:18](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

And awesome. No problem, man. Cool. So I'll update you when everything's ready.

[@1:06:25](#) - **Chris Shepard**

I'll update you on the bank account, all that stuff, too.

[@1:06:26](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

So, yeah. Awesome. And thank you so much, Chris.

[@1:06:29](#) - **Chris Shepard**

I'll update you soon. job.

[@1:06:31](#) - **Oriel Mor (oriel.mor2001@gmail.com)**

Bye. Bye, man.