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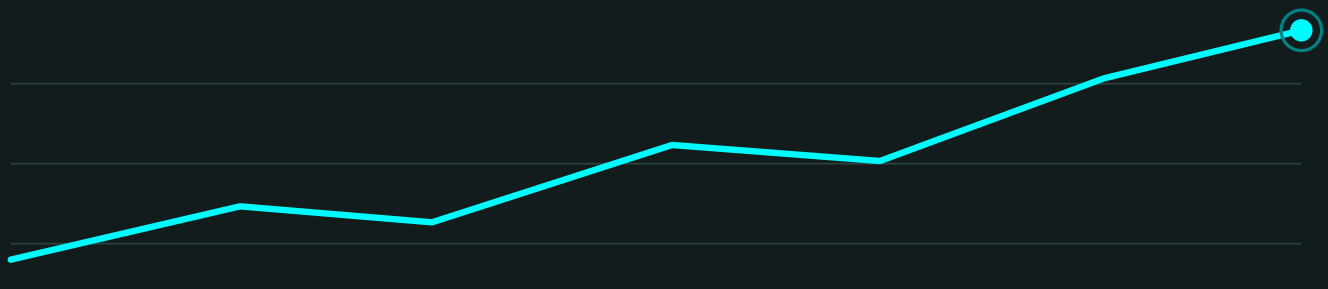
FIELD GUIDE NO. 04 · 2026 EDITION

The Med Spa Occupancy Playbook

What it takes to keep chairs full in the most crowded decade the aesthetics industry has ever seen: the utilization math, the client retention engine, and the marketing system that fills the dayparts that quietly cost the most. Written for owners of multi-location med spas and aesthetic practices.

SCORING LOCATIONS BY HEADROOM · THE REBOOKING MACHINE · MEMBERSHIPS VS THE DISCOUNT TRAP



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ABOUT THIS FIELD GUIDE

Written for the owners who watch the book

You run more than one location. One is booked out three weeks and carries the P&L. Another has Thursday afternoons that echo. Same treatments, same training, often the same injectors rotating through. This guide is about that gap, in an industry adding roughly a thousand new competitors a year.

We use the word occupancy on purpose. A med spa sells provider time and device time: a chair-hour is inventory that expires at the top of every hour, while rent, payroll, lasers, and insurance bill you either way. The average single-location med spa now produces about $1.4 million a year,[1] and the spread between the locations above and below that line is mostly a story about filled chairs.

One promise about the numbers

Every statistic here comes from a named third-party source: AmSpa industry data, KFF polling, retention benchmarks from spa management platforms, and peer research on lead response and reviews, each with a numbered citation listed at the back. Where we model a scenario, we label it an illustrative model in plain sight. If a number cannot survive being asked about on a call, it does not belong in a document with our name on it.

What's inside

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CHAPTER 01

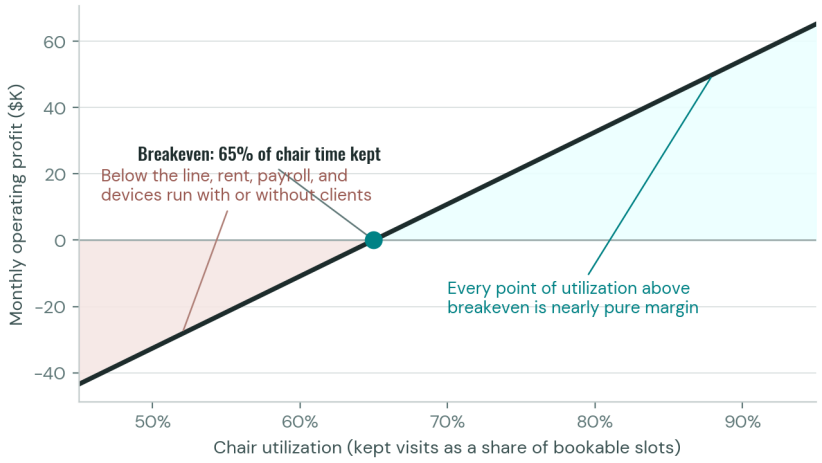
The chair is the building

01

A med spa has the cost structure of a boutique hotel with lasers: heavy fixed costs, thin variable costs. Rent in a premium retail corridor, injectors and estheticians on payroll, six-figure devices, a medical director, insurance. What changes with one more kept appointment is mostly product cost. Real estate calls the threshold the breakeven occupancy ratio;[22] in a med spa the unit is the chair-hour, and the metric is utilization: kept visits as a share of the slots your providers and rooms offer.

The math, in one worked example

Take an illustrative three-room location offering 624 appointment slots a month at the industry's average spend of $536 per visit,[3] with roughly 35% variable cost for injectables and consumables, and fixed costs set so breakeven lands at 65% utilization.



Monthly operating profit vs. chair utilization for a modeled 3-room med spa. Illustrative model: 624 slots, $536 per visit, ~35% variable cost, breakeven at 65%.

Visit value per AmSpa data. Sources 3, 22.

In this model one point of utilization is about six kept visits a month, worth roughly $26,000 a year. The leverage compounds: lifting provider utilization from 60% to 80% raises revenue about 25%[5] on the same rent, devices, and payroll. The chairs are already paid for. The question is whether demand shows up to claim them.

UPRYT POV

Owners obsess over the revenue menu: new devices, new services, new rooms. The cheaper lever is almost always the calendar you already have. Utilization has headroom, and the headroom is where the margin lives.

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CHAPTER 02

The multi-location trap

02

The pattern repeats across aesthetic groups. The flagship is booked out and carries the group. The newer location coasts at the level that keeps the lights on. Treatments are identical, protocols are identical, and half the time the same injectors rotate between the two. So why does one book fill and the other echo?

When the clinical product is consistent and the calendars are not, the variable left standing is demand capture, and at the location level that is a marketing output: map rank in that trade area, reviews for that location and those injectors, response speed on that phone and that inbox, the offers running in that market. One brand in the treatment room, a separate fight on every map pin.

How the fragmentation happens

The website came with the booking software. The ads run through a shop that reports clicks. Social lives with whoever is youngest. Reviews happen when the front desk remembers. The discipline gap is measurable: 94% of high-performing multi-location brands run a dedicated local strategy per location versus about 60% of average performers,[15] location pages convert up to 50% better than one brand homepage,[14] and 76% of near-me searchers visit a business within 24 hours.[13] The demand is there, corridor by corridor. What varies is who captures it.

94% vs 60%
high performers vs. average with a dedicated local strategy [15]

+50%
conversion lift, location pages vs. one brand homepage [14]

76%
of near-me searchers visit within 24 hours [13]

The tell

A fragmented group has a signature: every vendor's report says they are winning, and the book says otherwise. If the reporting you receive cannot name kept visits, utilization, and rebooking rate by location and by provider, it is measuring the vendor's activity, not your business.

UPRYT POV

One firm in the stack usually figured out long ago that a fragmented client never leaves. Making yourself hard to replace is a skill. It is not the same skill as filling chairs.

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CHAPTER 03

How clients choose now

03

Start with the crowd. The U.S. med spa count passed 10,400 and is heading toward 11,500-plus, with roughly a thousand new locations opening every year,[4] in an industry above $17 billion and growing by more than a billion a year.[2] The market is expanding and so is the number of hands reaching for it. Winning a trade area now means being the obvious choice on the surfaces where choosing happens.

Reviews are read per injector, not per brand

97% of consumers read reviews before choosing a local business,[11] and in aesthetics they read them one level deeper: for the specific injector holding the needle. Every provider at every location has a reputation to build or bleed, and the location whose injectors have 300 recent reviews beats the one whose brand page has 40 old ones.

The discovery layer moved again

Consumers using AI tools for local recommendations jumped from 6% to 45% in a single year,[12] and those assistants read the same structured data, consistent business facts, and review signals your human clients do. Meanwhile 46% of all Google searches carry local intent.[13] A location that is thin, inconsistent, or invisible on these surfaces is not in the consideration set, no matter how good the work is.

The demand mix is shifting under you

Women drive roughly three-quarters of med spa demand,[8] injectables account for nearly half of revenue,[7] and the fastest-moving new line is weight management: 12% of U.S. adults currently take a GLP-1 medication, double the share of 18 months earlier,[10] and 38% of med spas already offer GLP-1 programs.[6] Demand this dynamic rewards the location that can be found and booked tonight.

~1,000
new med spas opening per year into an $17B+ market [4,2]

45%
of consumers now use AI tools for local recommendations [12]

38%
of med spas already offer GLP-1 weight management [6]

UPRYT POV

Competition is the tax on a growing market. You do not outrun a thousand new openings a year with a prettier lobby. You outrun them with rank, reviews, speed, and a booking path that works at 11pm.

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CHAPTER 04

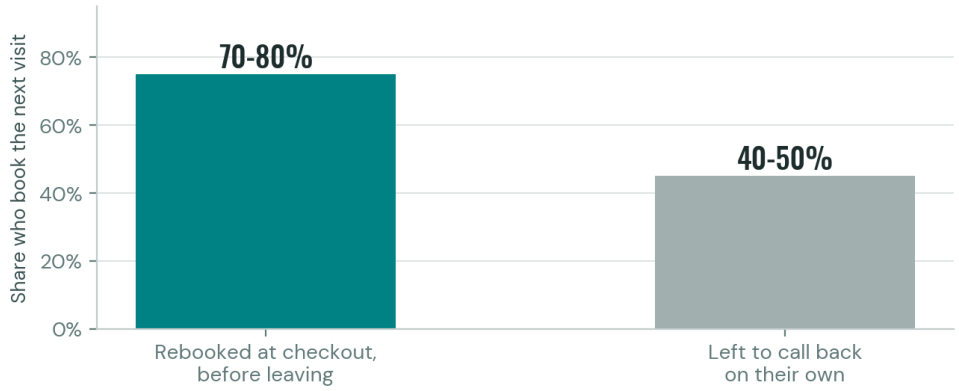
The quiet leak

04

Before buying more demand, measure what happens to the demand you already paid for. Med spa acquisition is not cheap: Meta campaigns run $18 to $42 per lead and $65 to $180 per booked consultation,[6] with marketing budgets at 8% to 12% of revenue.[6] Two leaks drain most aesthetic P&Ls: clients who leave without a next appointment, and inquiries answered too late.

The rebooking leak

The single highest-leverage habit in the industry is booking the next visit before the client leaves. Practices that rebook at checkout see 70% to 80% of clients schedule the next appointment; left to call back on their own, that falls to 40% or 50%.[9] With maintenance treatments running on 12-to-16-week cycles,[9] a client who walks out unbooked is a coin-flip, and the data is blunt about the deadline: clients who do not return within 90 days are unlikely to return at all.[19]

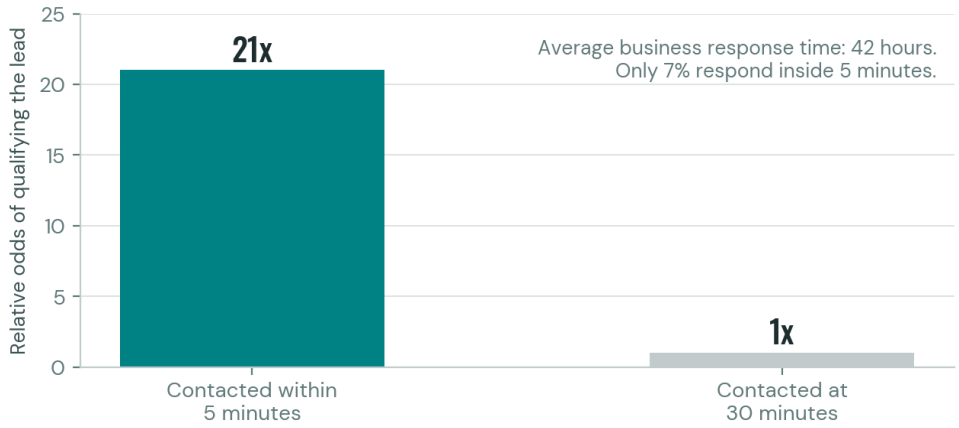


Share of clients who book their next visit, by when the ask happens.

Source 9. Aesthetic practice management benchmarks.

The speed leak

For new inquiries the window is minutes. Contacting a lead within 5 minutes makes you 21 times more likely to qualify it than waiting 30,[16] 78% of buyers choose whoever responded first,[18] and the average business takes 42 hours while only 7% answer inside the window.[17,18] In a category where half the inquiries arrive by DM and after hours, the location that answers tonight books the consult, and at $65 to $180 per booked consultation, slow follow-up is a budget line nobody approved.



Relative odds of qualifying a new inquiry by response time.

Sources 16, 17, 18. MIT/InsideSales lead response research; HBR response study; industry response-time surveys.

UPRYT POV

Groups measure marketing on new-client volume and treat rebooking as a front-desk nicety. They are the same system: demand density. A location that rebooks at checkout and answers in 5 minutes needs half the ad budget of one that does neither.

CHAPTER 05

Scoring locations by headroom

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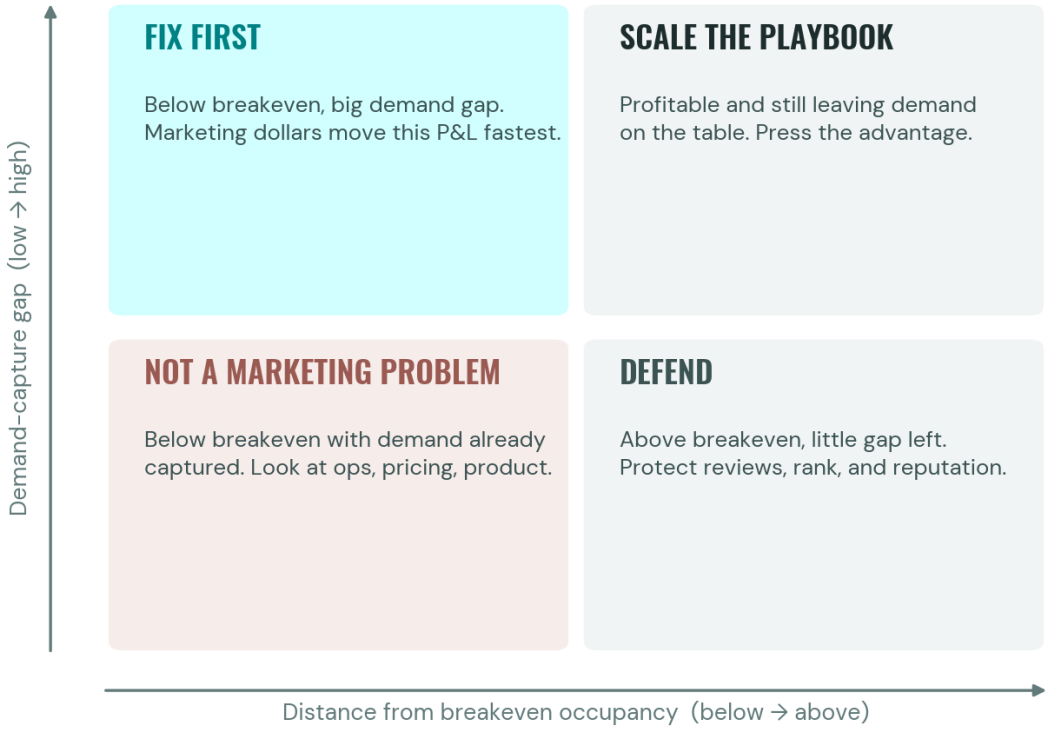
Marketing budgets in aesthetic groups get allocated evenly, because it feels fair, or loudly, toward whichever manager escalates best. Headroom scoring replaces both with two questions per location: how far is it from breakeven utilization, and how much demand is it failing to capture?



The headroom matrix. Plot every location by distance from breakeven utilization and by unclaimed demand in its trade area.

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How to run it

Signal	Where it comes from	What it tells you
Distance from breakeven	Location P&L: fixed costs, contribution per kept visit, current utilization	Urgency. Below the line, every month compounds the problem.
Local rank gap	Map pack position vs. top 3 competitors on money keywords	Visibility; 76% of near-me searches become a visit within a day [13]
Review gap	Rating and volume vs. the local leader, per injector and per location	Credibility; 97% of consumers read reviews first [11]
Answer rate and speed	Share of calls and DMs answered; minutes to first response, after hours included	Conversion; 21x qualification odds inside 5 minutes [16]
Rebooking rate	Share of clients leaving with the next visit booked, per provider	Retention engine; checkout rebooking runs 70-80% vs. 40-50% [9]
90-day return rate	Share of clients returning within 90 days	Health of the base; 60%+ is strong, under 40% is a red flag [19]

The matrix also protects you from the classic mistake: pouring ad spend into a location whose problem was never demand. A location below breakeven that already captures its trade area has a pricing, staffing, or reputation-repair problem, and more marketing will only document it faster.

UPRYT POV

We run this scoring in week one of every engagement and put the grid in front of the whole leadership team. Half the value is the budget logic. The other half is that the location managers stop arguing with each other and start arguing with the grid.

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CHAPTER 06

Memberships vs the discount trap

06

Aesthetics is a repeat-purchase business wearing a luxury coat. Well-run spas retain 60% to 70% of their active clients year over year, and locations with active loyalty or membership programs run 72% to 80%.[20] The average client visits about 4.9 times a year against an ideal of 7 to 8,[21] which means the fastest revenue in the building is usually one more visit from the clients you already won.

Three moves that fill chairs without repricing the brand

01 Build committed revenue with memberships

Membership programs raise revenue per patient by about 25%[5] because they convert a string of one-time decisions into a default. A member books ahead, shows up more, and smooths the utilization curve that Chapter 1 says pays for everything. Price them against contribution, not against the competitor's Instagram.

02 Reactivate before you acquire

The 90-day window is the deadline:[19] a standing reactivation system that catches clients at day 60 and 75, keyed to their treatment cycle, costs a message and fills a chair that ad spend would have chased at $65 to $180 a consult.[6]

03 Package the valleys, protect the peaks

Med spa demand peaks midweek,[19] so aim offers at the dayparts and days that actually echo: bundle the slow Thursday afternoon, never the Saturday morning that sells itself. Blanket discounts reprice the whole brand and train clients to wait; a deep-discount platform does it with a commission on top. Scarcity plus membership beats coupon plus hope.

UPRYT POV

Our test for any offer: would the CFO sign it after seeing the contribution math on one page, and does it protect the price integrity of the injector hour everything else is built on? If it needs a story about exposure, it is not ready.

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CHAPTER 07

The new-location calendar

07

Most groups start marketing a new location the week the build-out finishes. In this industry the clock has extra gates: the medical director, state licensing, provider credentialing and training, and device delivery all run long, and none of them fill the book. Demand work runs in parallel on one calendar that starts at lease-signed.

Window	What ships	Why it cannot wait
Day -120 (lease signed)	Medical director and licensing track underway. Location page live with a founders list. Google Business Profile created, verification started. Tracking numbers provisioned.	Licensing and search trust both take months, and neither can be bought back later.
Day -90 to -60	Injector bios, photography, and treatment content shipped. Citations locked. Founders membership presale opens to the list. Social presence for the location, not just the brand.	Presold memberships convert opening week from an experiment into a schedule, and founders pricing rewards commitment without discounting the brand.
Day -60 to -21	Online booking live. Paid local campaigns on. Phone, DM, and 5-minute web response rehearsed with real test leads, evenings included.	Inquiries answered inside 5 minutes qualify at 21x the rate of slow ones;[16] the habit must exist before the volume does.
Day -21 to open	Founders list converted to booked opening-month appointments. Opening calendar built to meaningful utilization. Review engine armed for the first kept visits.	A location that opens at real utilization resets the whole ramp, and early injector reviews compound from day one.
First 90 days	Weekly one-page readout: utilization, kept visits, rebooking rate, cost per booked and kept, answer rate, review velocity. Offers pointed at the dayparts that reveal themselves.	The first quarter sets the location's rank, review base, and habit loops every later quarter inherits.

The calendar is boring on purpose. New locations fail from sequencing, not from a lack of ideas: the license that sat, the profile that was not verified, the ads pointed at a page that was not live. A written calendar converts the opening from an event into a system, the only version that repeats at location 4 and location 14.

UPRYT POV

We treat a signed lease as the starting gun for licensing, staffing, and demand together. If any of the three starts at the ribbon cutting, the ribbon is cutting into the first year's P&L.

CHAPTER 08

Metrics that map to full chairs

08

Marketing reporting fails aesthetic groups in a specific way: it measures what is easy to count instead of what covers rent. Impressions, followers, even raw leads all flatter the vendor. The chain that matters has four links: demand captured, consult booked, visit kept, chair filled.

Cost per booked and kept

Cost per lead is the most manipulable number in local marketing. The honest unit is cost per booked and kept new client, by channel, by location. With consults at $65 to $180 on the sticker [6] and no-shows and cancellations between booking and chair, the real number runs meaningfully higher, and only the groups that measure it find out which channels actually pay.

The retention dashboard

Four numbers, weekly, per location and per provider: rebooking rate at checkout against the 70-80% benchmark, [9] 90-day return rate against the 60% bar, [19] revenue per visit against the $450-600 target, [19] and review velocity per injector. Together they predict next quarter's utilization better than any acquisition metric, and top-performing practices hold overall retention above 75%. [19]

Utilization, by provider, by daypart

The Chapter 1 curve runs on kept visits as a share of bookable slots. Cut it by injector, by room, and by daypart, and the marketing to-do list writes itself: the new injector's Thursday valley needs profile and review investment, the 2pm trough needs a membership perk or a packaged offer, and the location with strong bookings but weak keeps needs confirmation discipline, not more ad spend.

UPRYT POV

Our reporting rule: every weekly readout ends at a filled chair, and every number is per location and per provider. If a metric cannot be traced to the book, it goes in an appendix, not a headline.

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CHAPTER 09

The owner's diagnostic

09

Ten questions to put to your current marketing setup, whether it is in-house, outsourced, or a pile of both. Score one point for every confident yes.

01 **Do you know each location's breakeven utilization?**
Not the group's. Each location's. If finance cannot produce it, Chapter 1 can.

02 **Can your marketing team name kept-visit utilization by location?**
If the people spending the demand budget do not know the demand number, they are optimizing something else.

03 **Do you know your rebooking rate at checkout, by provider?**
The 70–80% benchmark [9] is the cheapest revenue in the building.

04 **Do you know your 90-day return rate?**
Above 60% is strong; under 40% is a red flag, [19] and it is invisible unless someone tracks it.

05 **Do you know cost per booked and kept new client, by channel, by location?**
It is the only acquisition number that survives contact with the P&L.

06 **Is a human answering inquiries and DMs inside 5 minutes, evenings included?**
The 21x window. [16] DM your own location on a Friday at 8pm.

07 **Does every location and every injector have its own page, profile, and review engine?**
97% of clients read reviews, [11] and they read them per injector.

08 **Is there a membership or committed-revenue program with its own weekly number?**
Members are worth about 25% more per patient [5] and they book the valleys.

09 **Does a written new-location calendar start at lease-signed, not at open?**
Medical director, licensing, and demand all have clocks longer than a ribbon cutting.

10 **Could you fire any single vendor or platform without losing your own accounts?**
If someone else owns the domain, the ad accounts, the booking flow, or the profiles, you have a landlord, not a partner.

Scoring: 8 to 10, your system is ahead of most of the market; press the advantage. 5 to 7, the leaks are findable and probably concentrated in two or three questions above. 4 or below, the good news is that nothing here requires more budget to fix. It requires an owner.

THE NEXT STEP

Ready when you are. No rush on our end.

Everything in this guide works whether or not we ever meet. Run the breakeven math, score your locations, DM your own front desk on a Friday night, and put the diagnostic in front of whoever runs your marketing today. If the answers come back clean, you are ahead of a crowded field and you should keep doing exactly what you are doing.

If they do not, that is usually not a people problem. It is a fragmentation problem, and it is fixable.

WHERE UPRYT FITS

UPRYT is the embedded growth team for multi-location operators, med spas included. We replace the pile of vendors with one team that plugs in like in-house, owns the book with you, and runs everything in this playbook as a system: the headroom scoring, the rebooking and reactivation engine, the 5-minute response machine for calls and DMs, the review engine per injector and per location, and the weekly one-page readout that ends at kept visits. When you grow, we do not tax it. Your spend going up does not make us cost more, and a new location does not restart the relationship.

THE FIRST STEP IS FREE. We audit what you are running today, location by location and injector by injector, against every benchmark in this guide, and hand you the findings. Keep them either way. **upryt.io/audit**

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The embedded growth team for multi-location operators.

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