APERTURE METHOD™

THE APERTURE METHOD™ · CLIENT ENGAGEMENT

Lumina Medical Aesthetics

A Complete Business Intelligence & Strategy Engagement

Understand · Quantify · Reveal · Navigate · Perform

Lumina Medical Aesthetics · illustrative example

Prepared by **Fenwick How** · The Aperture Method

July 2026

FROM THE FOUNDER

What this engagement delivers

Dr. Marchetti,

Enclosed is the complete Aperture Method engagement for Lumina Medical Aesthetics. It follows a single, deliberate arc — Understand, Quantify, Reveal, Navigate, Perform — and each part builds on the one before it, so the whole reads as one continuous story rather than five separate reports.

The short version: Lumina is a strong business that has been growing without getting more profitable. Revenue rose 61% over three years while profit stayed essentially flat, because roughly half of new patients never return. Fixing that — before opening a fourth location — is worth an estimated $200K–$400K in additional annual profit, and it is the thread that runs through every deliverable here. When the time comes to expand, your own patients point clearly to the Energy Corridor.

Every number in these documents is drawn from Lumina's own data and reconciles to it. The analysis behind them is the same graduate-level business science used by big-company strategy teams — applied, in plain language, to your business. That combination is the point of The Aperture Method.

It has been a privilege to look at Lumina this closely. I look forward to walking you through it.

Warm regards,

Fenwick How
Founder & Principal · The Aperture Method

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OVERVIEW

Engagement at a glance

The engagement is organized in five phases, each a named product with a distinct question it answers.

Phase	Deliverable	The question it answers
1 · Insights™	Business X-Ray™ + Aperture Score™	What is happening?
2 · Analytics™	Profit Map™ + scenario model	Why is it happening?
3 · Intelligence™	Customer & Market Map™ + GIS package	What opportunities does it reveal?
4 · Compass™	Opportunity Matrix™ + Focus Plan™	Where should we go next?
5 · Live™	Scoreboard™ + KPI system	How do we sustain and improve results?

Companion data (delivered alongside the reports)

- **Financial statements** — 3-year P&L, balance sheet, and cash flow (Excel).
- **Profit Map workbook** — the live, editable scenario model (Excel).
- **Aperture GIS package** — six ArcGIS-ready map layers plus the layer guide.
- **Scoreboard data feed** — 36 months of KPIs to drive your live dashboard.

Read the reports in order for the full story or jump to any phase — each opens with an executive summary and closes by handing off to the next.

APERTURE METHOD™

THE APERTURE METHOD™ · ENGAGEMENT KICKOFF

Company Profile

The business at a glance — our starting point

PREPARED FOR

Lumina Medical Aesthetics

Physician-led medical aesthetics · Houston, TX

July 2026 · The Aperture Method™

ILLUSTRATIVE / DEMONSTRATION — Lumina Medical Aesthetics is a fictional company created to demonstrate The Aperture Method. All figures are synthetic and internally consistent; nothing here represents a real client or real results.

ENGAGEMENT KICKOFF

Lumina Medical Aesthetics — the business at a glance

This profile is where the engagement begins: a shared, factual picture of the business as it stands today, the pressures on the table, and the question we will test first. Everything that follows — the diagnostic, the numbers, the maps, the plan — builds on this starting point.

	Snapshot
Business	Lumina Medical Aesthetics — physician-led medical spa
Owner	Dr. Elena Marchetti, MD — medical director & majority owner
Founded	2015 (River Oaks flagship); Katy 2022; The Woodlands opened Oct 2024
Market	Houston, TX metro
Locations	River Oaks (flagship) · Katy (ramping) · The Woodlands (newest) · online store
Team	~40 — 2 MDs, 3 NP/PA injectors, 5 laser/RN techs, 8 aestheticians, admin & GM
FY2025 revenue	$6.44M
FY2025 EBITDA	~$0.97M (15%)
Core services	Injectables · laser & skin · body contouring · memberships & facials · skincare

The business

Lumina is a premium, physician-led medical aesthetics practice in some of Houston's most affluent neighborhoods. Over three years it has grown quickly — from $3.99M to $6.44M in revenue — on the strength of a strong brand, an excellent injectables practice, and a founder who is still the top-producing injector. It has added locations on instinct and built a real membership base. It is, by most measures, a success story.

Why we're here — what's on the table

Four pressures are converging, and they are really four views of the same business:

- **Growing, but not more profitable.** Revenue rose 61% over three years while EBITDA barely moved ($878K → $966K) and margins slipped from 22% to 15%.
- **Scaling on instinct.** Two locations added in three years, both still ramping, and a fourth already under consideration — so far decided by gut, not data.
- **Profitable on paper, tight in the bank.** Despite healthy EBITDA, year-end cash was only $185K with a heavily drawn line of credit.

- **An eye on the future.** The founder is 53, is the key person in the business, and wants to build toward a sellable, professionalized platform.

Our starting hypothesis

> **The question we test first**
>
> **New-patient retention is likely the binding constraint.** The pattern suggests Lumina is very good at winning patients and not yet good at keeping them — which would explain the flat profit, the margin slip, and the cash strain at once. The first phase, Aperture Insights™, will confirm or revise this with the data.

What we'll examine

The engagement looks at the whole business through seven lenses, and grounds every finding in Lumina's own data.

- Operations & service delivery · financial performance · leadership & organization · customers & retention · process & systems · data & technology · market & competitive position.

Evidence base: three years of financial statements, appointment-level transactions, a patient list with home locations, and marketing spend by channel — all reconciled to one another so every number ties back to source.

Revenue & economics today

By service line (FY2025)

Service line	Revenue	% of revenue
Injectables (tox + filler)	$2.79M	43%
Laser & skin	$1.19M	19%
Memberships & facials	$0.90M	14%
Body contouring	$0.76M	12%
Skincare — retail + online	$0.79M	12%
Total	**$6.44M**	**100%**

By location & three-year trend

	FY2023	FY2024	FY2025
Revenue	$3.99M	$5.24M	$6.44M
EBITDA	$878K	$943K	$966K
EBITDA margin	22%	18%	15%

	FY2023	FY2024	FY2025
River Oaks · Katy · Woodlands	—	—	$4.04M · $1.64M · $0.59M

Revenue grew 61% while EBITDA grew ~10% — the pattern this engagement exists to reverse.

The engagement roadmap

Phase	Deliverable	The question it answers
1 · Insights™	Business X-Ray™ + Aperture Score™	What is happening?
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APERTURE METHOD™

APERTURE INSIGHTS™ · UNDERSTAND

Business X-Ray™

A whole-business diagnostic & Aperture Score™

The question this answers: ***What is happening?***

PREPARED FOR

Lumina Medical Aesthetics

Physician-led medical aesthetics · Houston, TX · River Oaks · Katy · The Woodlands

July 2026 · The Aperture Method™

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EXECUTIVE SUMMARY

The business is growing — but it isn't getting healthier

Lumina has done the hard part: in three years revenue climbed 61%, the brand is strong, and the injectables engine is excellent. Yet almost none of that growth is reaching the bottom line. Profit is essentially flat, cash is tight, and the reason is quietly consistent across every location — the business is very good at winning new patients and not yet good at keeping them.

$6.44M	+61%	15%	58/100
FY2025 revenue	3-year revenue growth	EBITDA margin (was 22%)	Aperture Score™

Revenue grew from $3.99M to $6.44M, but EBITDA moved only from $878K to $966K — up 10% while revenue rose 61%. Margins compressed from 22% to 15%. The growth is real; it is simply leaking out faster than it comes in.

The leak has a single dominant source. Of the roughly 1,350 new patients Lumina acquired in the past year, **only about half returned for a second visit**. Because a retained patient is worth roughly four times a one-and-done ($2,818 vs. $663 in lifetime value), that retention gap is the most expensive problem in the business — far more valuable to close than chasing more new leads.

> **The one thing to fix first**
>
> **New-patient retention is the binding constraint.** Lumina is buying growth it cannot keep. Fixing this is worth an estimated $200K–$400K in additional annual profit within 24 months — more than a fourth location would add in its first year, at a fraction of the risk.

HOW WE LOOKED

The seven lenses of the Business X-Ray™

The Business X-Ray is a whole-business diagnostic. Rather than looking only at the financial statements, it examines seven interconnected lenses — because the reason profit is flat usually lives in the relationships between them, not in any one number.

- **Operations & service delivery —** capacity, provider productivity, scheduling, and how consistently the experience is delivered across locations.
- **Financial performance —** revenue quality, margin structure, unit economics, and cash conversion.
- **Leadership & organization —** decision-making, key-person dependence, and the systems that let the business run without the founder.

- **Customers & retention —** acquisition, repeat behavior, lifetime value, membership, and segment concentration.
- **Process & systems —** the repeatable workflows (rebooking, follow-up, treatment planning) that turn a first visit into a relationship.
- **Data & technology —** what the business measures, how decisions are informed, and whether the tools produce insight or just records.
- **Market & competitive position —** brand strength, demographics of the trade area, and where Lumina sits versus alternatives.

Evidence base: 3 years of financial statements, 45,800 appointment records, 9,000 patient profiles with home locations, and marketing spend by channel — all reconciled to one another.

The Aperture Score™

Each lens is scored 0–100 and weighted into a single Aperture Score. It is a baseline, not a grade — we will re-score it in Aperture Live™ to measure progress. Lumina scores **58 of 100 — "Developing"**: a fundamentally strong business with two clear soft spots dragging the whole score down.

Dimension	Score	Band	What the score reflects
Market & competitive position	72	**Strong**	Premium brand in an affluent, growing Houston trade area.
Operations & service delivery	70	**Strong**	Excellent clinical delivery; capacity underused at newer sites.
Financial performance	62	**Developing**	Strong top line, but compressing margin and tight cash.
Leadership & organization	58	**Developing**	Capable, but heavily dependent on the founder as lead injector.
Marketing & growth engine	55	**Developing**	High spend, high volume — but low-quality, one-and-done acquisition.
Customers & retention	48	**Weak**	~50% of new patients never return; value concentrated in a few.
Data & technology	45	**Weak**	Decisions made on instinct; no rebooking or analytics system.
Overall Aperture Score™	**58**	**Developing**	**Strong core; retention and data are the anchors to lift.**

WHAT WE FOUND

What's working

- **A premium brand in the right market.** River Oaks, Katy, and The Woodlands sit in some of Houston's most affluent, aesthetics-friendly ZIP codes. The brand commands full price for injectables.
- **A best-in-class injectables engine.** Injectables are 43% of revenue at the highest margins in the business and are the natural anchor for lasting patient relationships.
- **A real membership base to build on.** About 34% of active patients are members — a foundation for recurring revenue and retention that most med-spas never establish.
- **A flagship that proves the model.** River Oaks runs at a 24% location EBITDA margin, showing exactly what Katy and The Woodlands can become.

What's costing you

1. A leaking bucket: new patients don't come back

Only about half of new patients return for a second visit, and the value that does exist is concentrated — the top 20% of patients drive 51% of revenue. Lumina is refilling a bucket with a hole in it.

2. Marketing buys volume, not loyalty

Marketing spend nearly doubled, from $322K to $626K. More than half of it — about $345K — goes to paid social at a $235 cost per new patient, and those patients are the least likely to return. The spend is optimized for first visits, not for relationships.

3. Margin is compressing as the business scales

EBITDA margin fell from 22% to 15% as the mix shifted toward discounted, price-shopped services and as two ramping locations spread fixed costs over too little volume. The Woodlands (open nine months) runs at a planned loss of about $199K; Katy is thin at a 13% margin versus the flagship's 24%.

4. Profit isn't turning into cash

Despite $966K of EBITDA, year-end cash was only $185K. Equipment financing, the Woodlands build-out, working capital, and owner distributions consumed it — leaving the line of credit heavily drawn. Lumina looks healthy on the P&L and feels tight in the bank account.

5. The business runs on instinct, not instruments

Location decisions, marketing allocation, and pricing are made by feel. There is no rebooking system, no lifetime-value view, and no dashboard — so problems like the retention leak stay invisible until they show up in the margin.

THE BINDING CONSTRAINT

If you fix one thing, fix new-patient retention

Every business has one constraint that limits everything downstream. For Lumina it is retention — and it is binding because it sits at the intersection of all three soft spots above: it is a customer problem, amplified by where the deal-seeking patients come from, and it shows up as margin and cash strain.

Retention signal	Reading	Why it matters
New-patient 2nd-visit conversion	~50%	Half of acquired patients never return — the core leak.
One-and-done rate — River Oaks	14%	The mature flagship keeps patients best.
One-and-done rate — Katy	17%	Ramping location, weaker rebooking discipline.
One-and-done rate — The Woodlands	19%	Newest location, no retention system yet.
Value of a loyal vs. one-and-done patient	$2,818 vs $663	A retained patient is worth ~4× a one-time visit.
Revenue from the top 20% of patients	51%	The business already lives on its loyal minority.

Retention worsens exactly where Lumina is investing to grow — the newer locations — so scaling without fixing it multiplies the leak.

What it's worth — the prize

Because margins are high, the upside math is dramatic. Retention improvements drop almost entirely to the bottom line.

- Lumina acquires ~1,350 new patients a year; today ~675 return for a second visit.
- A disciplined rebooking-at-checkout and first-visit membership offer typically lifts second-visit conversion from ~50% to ~65% — about **+205 retained patients every year**.
- Each newly-retained patient adds roughly $1,350 in lifetime value (the gap between a one-and-done and an occasional/loyal patient).
- 205 × $1,350 ≈ **$277K in additional lifetime revenue per annual cohort ≈ ~$200K in gross profit** — recurring and compounding as cohorts stack.

> **The prize, in one line**
>
> **Closing the retention gap is worth an estimated $200K–$400K in additional annual profit within 24 months** — larger than a fourth location would contribute in year one (The Woodlands lost ~$199K in its first nine months), and it de-risks every expansion that follows.

Risks & watch items

- **Key-person dependence.** The founder is still the top-producing injector; capacity and enterprise value are tied to one person.
- **Cash and leverage.** A heavily drawn line of credit leaves little cushion for a slow quarter or a new equipment purchase.
- **Expansion before fundamentals.** Opening a fourth location before fixing retention would scale the leak, not the profit.

RECOMMENDATION

Where this goes next

Lumina does not need more leads — it needs to keep the patients it already wins and to make smarter decisions with data it already generates. The diagnostic gives us the *what*. The next phase gives us the *why*, in numbers precise enough to act on.

We recommend proceeding to **Aperture Analytics™** — to quantify the profit drivers, model the retention fix against a fourth-location scenario, and build the Profit Map™ that shows exactly where every dollar is made and lost.

> **Next: Aperture Analytics™ — Quantify the Business**
>
> *The question it answers:* ***"Why is it happening?"***
>
> Delivers the Profit Map™ and a scenario model: profitability by service, location, and patient segment; the retention-fix vs. new-location comparison; and the break-even and forecast that turn this diagnosis into a plan.

APPENDIX

Scope, method & data

The Business X-Ray combines a structured executive assessment across the seven lenses with quantitative analysis of Lumina's own records: three years of financial statements, 45,800 appointment-level transactions, 9,000 patient profiles (with home location, acquisition channel, and lifetime value), and marketing spend by channel. All datasets are reconciled to one another, so the figures in this report tie directly to the underlying data.

The Aperture Score weights the seven lenses toward the dimensions that most drive enterprise value for an owner-operated practice — financial performance and customer retention carry the most weight.

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APERTURE METHOD™

APERTURE ANALYTICS™ · QUANTIFY

Profit Map™

Where every dollar is made and lost — and the model behind the decision

The question this answers: ***Why is it happening?***

PREPARED FOR

Lumina Medical Aesthetics

Physician-led medical aesthetics · Houston, TX

July 2026 · The Aperture Method™

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EXECUTIVE SUMMARY

The profit is real — it's just concentrated, and being spent to chase the wrong growth

The diagnostic told us what is happening: growth without profit. This phase explains why. Two facts drive almost everything: profit is concentrated in a few services and a few loyal patients, and the fastest path to more profit is keeping patients — not opening a fourth location.

40%
of profit from injectables alone

77%
of revenue from just 52% of patients

$4.61M
3-yr EBITDA if retention is fixed

$3.75M
3-yr EBITDA if a 4th location opens

Fixing retention produces **more three-year profit than opening a location** — $4.61M vs. $3.75M — while requiring roughly a third of the cash and far less risk. That is the central finding of the Profit Map.

> **The quantified verdict**
>
> **Fix retention first; expand second.** The highest-return, lowest-risk path is to close the retention leak now (Scenario B), then open the fourth location once the model is proven (Scenario D). Opening first (Scenario C) scales the leak and strains cash.

WHERE PROFIT IS REALLY MADE

Profit Map™ — by service line

Contribution is revenue minus direct product and consumable cost. It reveals which services actually fund the business — which is not the same as which generate the most revenue.

Service line	Revenue	Contribution	CM %	% of profit
Injectables	$2.79M	$1.90M	68%	40%
Laser & Skin	$1.19M	$1.07M	90%	23%
Memberships & Facials	$0.90M	$0.76M	84%	16%
Body Contouring	$0.76M	$0.65M	85%	14%
Skincare Retail	$0.79M	$0.35M	44%	7%
Total	**$6.44M**	**$4.72M**	**73%**	**100%**

- **Injectables are the engine —** 43% of revenue but 40% of all profit, and the natural anchor for a lasting patient relationship.
- **Laser and memberships punch above their weight —** the highest contribution margins in the business (90% and 84%); worth actively selling into the loyal base.
- **Skincare retail is the margin drag —** 44% contribution margin. A candidate to reprice, bundle into memberships, or reposition as a retention tool rather than a profit center.

WHERE VALUE CONCENTRATES

Profit Map™ — by patient segment

The single most important number in this report: a small group of loyal patients carries the business. This is exactly why retention — not acquisition — is the profit lever.

Patient segment	Patients	% of patients	Avg lifetime value	% of revenue
VIP Loyalist	1,369	17%	$4,510	39%
Loyal Repeat	2,937	36%	$2,030	38%
Occasional	2,460	30%	$1,040	16%
One-and-Done	1,469	18%	$663	6%
Total	**8,235**	**100%**	**$1,903**	**100%**

The concentration, in one line

VIP + Loyal patients are 52% of the base but ~77% of revenue. One-and-Done patients are 18% of the base but only 6% of revenue. Every patient moved up one loyalty tier is worth several times a newly-acquired one.

THE DECISION, QUANTIFIED

Scenario model — fix retention vs. open a fourth location

We modeled four paths through FY2028 on a single transparent engine (each year's revenue = prior × growth; EBITDA = revenue × margin). The full, editable model is in the accompanying Profit Map workbook.

Scenario	3-yr EBITDA	FY28 margin	Cash / capex	Risk
A · Status quo	$3.44M	16%	~$0.3M	Low (but slow)
B · Fix retention	**$4.61M**	**20.5%**	**~$0.3M**	**Low ✓**
C · Open 4th location	$3.75M	16.8%	~$0.65M+	**High**
D · Both (retention → expand)	**$4.95M**	**20.8%**	~$0.65M+	Medium

Retention (B) delivers more three-year profit than expansion (C) — for a third of the cash and none of the ramp risk. “Both” (D) is the destination and the highest-value path, but it only works if retention is fixed first, so the new location inherits a working patient-retention system instead of repeating The Woodlands’ slow, loss-making ramp.

How much retention is worth — and what a location must clear

Second-visit conversion lift	Added retained patients / yr	Added annual gross profit
+5 points	~68	~$67K
+10 points	~135	~$133K
+15 points (base case: 50% → 65%)	**~205**	**~$200K**
+20 points	~270	~$266K

For comparison, a new location must clear roughly **$0.9M in annual revenue (~$74K/month) just to break even**, typically 12–15 months in. The Woodlands is on that path but not there yet. Fixing retention first shortens every future ramp.

RECOMMENDATION

Where this goes next

The numbers point in one direction: keep the patients you already win, sell your highest-margin services into your loyal base, and prove the retention model before spending cash on a fourth location. To act on that, we now need to know *where* the high-value patients are — and where the next location should go.

> **Next: Aperture Intelligence™ — Reveal Customer & Market Intelligence**
>
> *The question it answers: **“What opportunities does it reveal?”***
>
> Maps where Lumina’s most valuable patients actually live, turns online-order and patient addresses into trade areas and drive-time, overlays demographics, and builds the data-driven case for the fourth location — the GIS layer that turns this quantification into a place on the map.

APPENDIX

Method & reconciliation

Service-line contribution is summed from FY2025 appointment records (revenue minus direct product/consumable cost). Segment economics use each patient’s actual lifetime revenue, with a 73% gross-margin assumption applied to estimate contribution. The scenario model is a transparent growth-and-margin engine; every assumption is an editable cell in the accompanying workbook. All revenue figures reconcile to the appointment data and to the financial statements.

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APERTURE METHOD™

APERTURE INTELLIGENCE™ · REVEAL

Customer & Market Map™

Where your most valuable patients are — and where to grow next

The question this answers: ***What opportunities does it reveal?***

PREPARED FOR

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EXECUTIVE SUMMARY

Your patients have already told you where to grow

We mapped every patient and online customer to where they live, then turned those points into trade areas, drive-time, market penetration, and a site-selection model. Two things stand out: Lumina's value is tightly clustered around its flagship, and a specific, affluent gap in the map is full of patients already driving past two clinics to reach it.

8,235	4.7 mi	90%	3.7%
patients mapped to home location	average drive to nearest clinic	of patients within 10 miles	penetration of affluent households

Ninety percent of patients live within ten miles of a clinic — Lumina is a local, drive-time business, exactly the kind of pattern where geographic intelligence pays off. Penetration of the affluent households in its trade areas is only 3.7%, so there is substantial room to grow inside the footprint it already has.

> **The opportunity on the map**
>
> **The Energy Corridor is the fourth location the data is pointing at.** Roughly 500 patients and ~$843K in revenue already come from that district, each driving about nine miles to River Oaks or Katy — a proven, affluent pocket of demand sitting in the gap between the two. This is a location decision made with evidence, not instinct.

HOW WE MAPPED IT

From addresses to intelligence

Every patient intake and online order carries an address. Geocoded and layered, those points become a strategic picture no single dashboard shows:

- **Trade areas & drive-time —** how far patients travel to each clinic, and the realistic catchment around each location.
- **Value mapping —** where the high-lifetime-value patients actually live, not just where visits happen.
- **Market penetration —** patients as a share of affluent households by ZIP, to see where the trade area is full and where it is wide open.
- **Site selection —** an opportunity score combining proven demand, distance underserved, and affluence, to rank where the next clinic should go.

Built from 8,235 active patients and 1,812 online customers with home locations, aggregated to 28 Houston-area ZIP codes. The underlying GIS datasets accompany this report (see final section).

Where your patients are — the trade area

Lumina's demand is concentrated and local. Two-thirds of patients live within five miles of a clinic, and the richest ZIPs cluster tightly around the River Oaks flagship and Katy.

ZIP · area	Patients	Revenue	Avg LTV	High-value %	Miles to clinic
77019 · River Oaks	595	$1.26M	$2,118	60%	0.7
77027 · Highland Village	508	$1.13M	$2,229	58%	2.4
77494 · Katy	508	$1.13M	$2,228	58%	2.0
77005 · West University	455	$0.99M	$2,197	61%	2.9
77024 · Memorial	457	$0.97M	$2,126	60%	6.7
77450 · Katy	422	$0.88M	$2,079	54%	1.3

Drive-time distribution: 68% of patients within 5 miles · 90% within 10 miles · 97% within 15 miles.

WHAT THE MAP REVEALS

Value concentrates near the flagship — and the newest clinic is still building its base

Mapping high-value patients (VIP + Loyal) by their nearest clinic connects the spatial picture directly to the retention story from earlier phases.

Nearest clinic	High-value patient share	What it tells us
River Oaks	54%	The mature flagship has the deepest loyal base.
Katy	51%	Ramping well; loyal base approaching the flagship.
The Woodlands	48%	Newest clinic — still converting first-visits into loyalty.

The Woodlands' lower high-value share is not a market problem — the surrounding ZIPs are affluent — it is the retention system not yet being in place. This is the same leak the diagnostic found, now visible on the map: fix retention and the newest locations' maps fill in with loyal, high-value patients.

Room to grow inside the current footprint

Overall penetration of affluent households is just 3.7%. Even the best ZIPs sit near 6–10% — meaning the trade areas Lumina already serves are far from saturated. Deeper penetration of the existing footprint is a lower-risk growth lever than new geography, and it compounds with the retention fix.

WHERE TO GROW NEXT

The site-selection case for location #4

The site model ranks every ZIP on proven demand, how far that demand currently travels, and affluence. One district rises above the rest.

Candidate area	Patients today	Revenue today	Miles traveled	Affluence	Opportunity
77079 · Energy Corridor	**275**	**$488K**	**9.3**	**5**	**Highest ✓**
77441 · Fulshear	234	$434K	8.7	5	High
77433 · Cypress	255	$409K	10.4	4	High
77077 · Energy Corridor	232	$355K	9.0	4	High
77546 · Friendswood	136	$208K	21.0	4	Frontier

Recommendation — location #4: the Energy Corridor

Why here: the 77079/77077 district already sends ~500 patients and ~$843K in revenue to Lumina, each driving ~9 miles from an affluent gap directly between River Oaks and Katy. The demand is proven, the affluence is top-tier, and a clinic here shortens the drive for hundreds of existing patients while capturing new ones.

Sequence: open it after the retention fix (Analytics, Scenario D), so the new clinic inherits a working retention system instead of repeating The Woodlands' slow ramp. Fulshear (west) and Pearland/Friendswood (south) are the identified frontier for a fifth location.

FOR YOUR GIS

The datasets behind this map

All analysis is delivered as clean, geocoded datasets ready to load into Aperture GIS for live maps, heat maps, and drive-time layers.

- **gis_patient_points.csv —** one row per patient: latitude/longitude, ZIP, nearest clinic and distance, segment, value tier, lifetime value. The point layer for heat maps and clustering.
- **gis_zip_summary.csv —** per-ZIP aggregation: patients, revenue, average lifetime value, high-value share, average drive distance, and penetration of affluent households. The choropleth layer.
- **gis_clinic_locations.csv —** the three existing clinics plus the recommended fourth site, for drive-time and trade-area rings.
- **gis_site_candidates.csv —** the ranked site-selection candidates with opportunity scores.

Where this goes next

We now know what is happening, why, and where. The remaining question is sequencing — which moves, in what order, for the greatest return with the least risk.

> **Next: Aperture Compass™ — Determine the Strategic Direction**
>
> *The question it answers:* ***"Where should we go next?"***
>
> Scores every opportunity — fix retention, deepen penetration, reprice retail, open the Energy Corridor — on value, complexity, risk, and impact, and sequences them into a Now / Next / Later Focus Plan™.

APPENDIX

Method & data

Patient and online-customer addresses were geocoded and aggregated to ZIP level. Drive distance is measured to the nearest of the three clinics. Market penetration uses an illustrative estimate of affluent households per ZIP. The site-selection opportunity score weights proven demand (revenue) most heavily, then distance underserved, then affluence. All patient figures reconcile to the appointment data.

Important disclaimer

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APERTURE METHOD™

APERTURE INTELLIGENCE™ · REVEAL

Aperture GIS — Layer Guide

ArcGIS-ready layers, and the analyses that make them powerful

The question this answers: ***What opportunities does it reveal?***

PREPARED FOR

Lumina Medical Aesthetics

Geographic intelligence package · Houston, TX

July 2026 · The Aperture Method™

ILLUSTRATIVE / DEMONSTRATION — Lumina Medical Aesthetics is a fictional company created to demonstrate The Aperture Method. All figures are synthetic and internally consistent; nothing here represents a real client or real results.

OVERVIEW

A load-and-go geographic intelligence package

This package turns Lumina's customer data into six ready-to-map layers for ArcGIS Pro or ArcGIS Online. Each is standard GeoJSON in WGS84 (EPSG:4326) — drag them in, apply the suggested symbology, and the maps in the Customer & Market Map come to life. This guide is the key to the layers and the recipe for five analyses that turn points on a map into decisions.

6	8,235	28	EPSG:4326
ready-to-map layers	geocoded patient points	ZIP trade-area polygons	WGS84, ArcGIS-native

To load: in ArcGIS Pro use **Map** → **Add Data** and select the .geojson files; in ArcGIS Online use **Add** → **Add layer from file**. The accompanying CSVs (patient points, ZIP summary, clinics, candidates) support the "Add data from CSV / XY table to point" workflow if you prefer tables.

WHAT'S IN THE PACKAGE

Layer catalog

Layer	Geometry	Features	What it's for
01_patient_points	Point	8,235	Heat maps, clustering, value hot-spots.
02_zip_choropleth	Polygon	28	Revenue, LTV, penetration by trade area.
03_clinics_and_candidate	Point	4	Existing clinics + recommended 4th site.
04_trade_area_rings	Polygon	12	3 / 6 / 10-mile catchment bands per site.
05_competitors_illustrative	Point	18	Competitive density & gap analysis.
06_site_opportunity	Point	28	Scored ZIP opportunities for site selection.

All layers share the ZIP field, so any two can be joined. Competitor locations and median-income estimates are illustrative.

Key fields

01_patient_points

patient_id · zip · nearest_clinic · miles_to_clinic · segment · value_tier (Bronze/Silver/Gold/Platinum) · member · visits · lifetime_value.

02_zip_choropleth

zip · area · active_patients · revenue · avg_ltv · pct_high_value · avg_miles_to_clinic · penetration_pct · affluence_tier · est_median_income · est_households.

06_site_opportunity

zip · area · opportunity_score · revenue_today · patients_today · miles_underserved · affluence · flag (Whitespace/candidate vs. Core/deepen penetration).

MAKE IT POWERFUL

Five analyses to run in ArcGIS

The layers are the raw material. These five analyses are where the geographic intelligence — and the story — comes from.

1. Customer value heat map

Symbolize 01_patient_points with **Heat Map** weighted by lifetime_value, or run **Optimized Hot Spot Analysis** on lifetime_value. Reveals where Lumina's revenue actually lives — tight clusters around River Oaks and Katy.

2. Trade areas & true drive-time

Drop in 04_trade_area_rings for instant 3/6/10-mile catchments. To upgrade to real drive-time, run **Network Analyst → Service Area** from 03_clinics_and_candidate at 10/20/30-minute breaks. Confirms the ~90%-within-10-miles pattern and sizes the Energy Corridor gap.

3. Market-penetration choropleth

Symbolize 02_zip_choropleth by penetration_pct (graduated colors). For real demographics, **Join** to the ArcGIS Living Atlas "ACS Median Household Income" ZIP layer on the zip field and recompute penetration against actual affluent-household counts. Shows the 3.7% overall penetration and where the footprint is far from full.

4. Weighted site-selection suitability model

The pre-scored 06_site_opportunity layer graduates every ZIP by opportunity. To build it yourself, run **Weighted Overlay / Suitability Modeler** combining demand (revenue), distance-underserved, and affluence at 55 / 25 / 20 weights. The Energy Corridor rises to the top — a data-defensible location #4.

5. Competitive gap / white-space

Overlay 05_competitors_illustrative on the patient heat map and trade-area rings. Look for affluent, high-demand areas *outside* competitor coverage and outside Lumina's current rings — the white space. The Energy Corridor and the southern belt (Pearland/Friendswood) surface as the clearest gaps.

> **The payoff**

RECOMMENDED SYMBOLOGY

Styling for impact

Layer	Symbolize by	Style
Patient points	value_tier	Graduated dots; Platinum = maroon, larger.
ZIP choropleth	penetration_pct	Sequential ramp, white → maroon.
Trade-area rings	band	Hollow fill, graduated outline by radius.
Clinics & candidate	type	Existing = black pin; candidate = maroon star.
Competitors	type	Small gray triangles.
Site opportunity	opportunity_score	Graduated symbols; flag drives color.

Keep the palette restrained — black, white, and the maroon accent (#500000) — so the map reads as premium and the signal stands out. Let one maroon element (the candidate site, or the hottest opportunity) carry the eye.

GO FURTHER

Layers to add — external data that sharpens every decision

The six layers in this package are built from Lumina's own customers. Overlaying third-party data turns description into prediction: who the best prospects are, where lookalikes live, and which specific corner to open on. Most of the demographic and spending variables below can be attached automatically with **ArcGIS Business Analyst → Enrich Layer** on the provided ZIP and point layers (they already carry a zip field to join on). The rest come from ArcGIS Living Atlas, government open data, or commercial providers.

> **Highest-priority adds for a med-spa**

Demographics & population — U.S. Census / ACS (via Living Atlas or Enrich)

Layer	Source	Why it matters for Lumina
Total population & density	Census / ACS	Sizes the addressable market in each trade area.
Median household income	ACS	Core affluence filter — aesthetics demand tracks income.
Female population, age 30–64	ACS (age × sex)	The primary aesthetics customer; target and site-select on it directly.

Layer	Source	Why it matters for Lumina
Household composition (kids vs. no kids)	ACS	Discretionary time and spend differ; shapes offers and messaging.
Educational attainment (bachelor's+)	ACS	Correlates strongly with cosmetic-service adoption.
Age bands (25–34, 35–54, 55+)	ACS	Match services to areas — injectables skew 30–55, laser broader.
Homeownership & home value	ACS	Wealth proxy beyond income; signals trade-area stability.
Population growth / projections	Esri	Favor growth (Katy, Cypress, Fulshear); avoid chasing decline.
Daytime / workday population	Esri	The Energy Corridor's large daytime workforce = lunchtime/after-work demand.

Consumer spending & lifestyle — Esri Business Analyst / Tapestry

Layer	Source	Why it matters for Lumina
Personal-care & cosmetic spending potential	Esri Consumer Spending	Direct demand signal for services and retail skincare.
Health & wellness / medical spending	Esri	Sizes body-contouring, wellness, and membership demand.
Tapestry lifestyle segments	Esri Tapestry	Psychographic lookalikes of your VIP/Loyal patients — find more of them.
Disposable-income index	Esri	Where premium pricing holds vs. where discounts are needed.

Health & demand indices

Layer	Source	Why it matters for Lumina
Health indicators (obesity, activity)	CDC PLACES (Living Atlas)	Demand signal for body contouring and wellness services.
Health-insurance coverage	ACS / CDC	Cash-pay propensity — aesthetics is elective and largely cash.
Cosmetic-procedure propensity index	Esri / MRI-Simmons	Likelihood to use Botox, filler, or laser by area.

Mobility, visibility & access

Layer	Source	Why it matters for Lumina
Traffic counts (AADT)	TxDOT open data	Site visibility, billboard value, and ease of access.

Layer	Source	Why it matters for Lumina
Billboard / OOH inventory	Geopath / OOH vendors	Where to buy out-of-home near affluent, high-traffic corridors.
True drive-time service areas	Esri Network Analyst	Replace the ring buffers with real travel-time catchments.
Commute flows (home vs. work)	Census OnTheMap (LODES)	Site near the paths your customers already travel.
Road network & access / turn lanes	OSM / DOT	Real-world accessibility of a specific candidate parcel.

Competition, co-tenancy & real estate

Layer	Source	Why it matters for Lumina
Competitor med-spas, derm & plastic surgery	Esri Business / SafeGraph / Places	Saturation and white-space — upgrade the illustrative competitor layer.
Complementary businesses (salons, gyms, luxury retail)	Esri Business	Co-location and referral adjacency; foot-traffic halo.
Shopping centers & retail anchors	Esri / CoStar	Preferred med-spa real estate (grocery-anchored, luxury retail).
Retail vacancy / available lease space	CoStar / LoopNet	The actual sites available in the target area.
Foot-traffic / visit patterns	Placer.ai / SafeGraph	Validate a candidate location's real-world traffic before signing.

Base & boundary layers

Layer	Source	Why it matters for Lumina
ZIP / ZCTA, tracts, block groups	Census TIGER (Living Atlas)	The join level for every demographic layer (join on the zip field).
City / county / place boundaries	Census	Licensing, tax, and marketing geography.

Tip: run Business Analyst "Enrich Layer" once on 02_zip_choropleth and 03_clinics_and_candidate to attach most demographic, income, spending, and health variables in a single step — then re-symbolize and re-run the site-suitability model with real inputs.

Where this goes next

These layers and the Customer & Market Map hand a prioritized set of geographic moves to the next phase.

> **Next: Aperture Compass™ — Determine the Strategic Direction**
> *The question it answers: **"Where should we go next?"***

> Scores and sequences every opportunity — including the Energy Corridor and deeper penetration of the current footprint — into a Now / Next / Later Focus Plan™.

APPENDIX

Technical notes

Coordinate system: WGS84 / EPSG:4326 (decimal degrees). Trade-area rings are geographic distance buffers approximating drive-time; replace with Network Analyst service areas for true travel time. Median-income and competitor layers are illustrative placeholders — swap in ArcGIS Living Atlas demographics and a real competitor dataset for production analysis.

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APERTURE METHOD™

APERTURE COMPASS™ · NAVIGATE

Opportunity Matrix™ & Focus Plan™

The prioritized roadmap — what to do now, next, and later

The question this answers: ***Where should we go next?***

PREPARED FOR

Lumina Medical Aesthetics

Physician-led medical aesthetics · Houston, TX

July 2026 · The Aperture Method™

ILLUSTRATIVE / DEMONSTRATION — Lumina Medical Aesthetics is a fictional company created to demonstrate The Aperture Method. All figures are synthetic and internally consistent; nothing here represents a real client or real results.

EXECUTIVE SUMMARY

From analysis to a sequenced plan

The first three phases told Lumina what is happening, why, and where. This phase turns that into a decision about order. The principle is simple and it is worth more than any single tactic: fix the leak before you pour in more water. Seal retention and sharpen the current footprint first; expand geographically only once the model is proven.

10	4	58 → 72	15% → 20%+
opportunities scored	quick wins to start now	targeted Aperture Score™	targeted EBITDA margin

Sequenced correctly, the same opportunities that looked like a scattered to-do list become a compounding plan: the retention fix funds and de-risks everything after it, deeper penetration raises the value of every location, and the fourth clinic — the Energy Corridor — opens into a working system instead of a slow, loss-making ramp.

> **The navigating principle**
>
> **Now:** stop the leak and tune the engine (retention, marketing quality, retail margin, cash). **Next:** deepen the footprint and reduce key-person risk. **Later:** expand to the Energy Corridor and build toward a sellable platform.

HOW WE PRIORITIZED

Four lenses on every opportunity

Each opportunity from the diagnostic, the Profit Map, and the Customer & Market Map was scored on four dimensions. The combination — not any single score — determines sequence.

- **Value —** the size of the profit or enterprise-value impact.
- **Complexity —** how hard it is to execute, in effort, time, and coordination.
- **Risk —** the chance and cost of it going wrong, including cash exposure.
- **Impact —** how much it de-risks or amplifies everything that comes after it.

The pattern that falls out is intuitive: high-value, low-complexity, low-risk moves (the “quick wins”) go first; high-value but capital-heavy moves (the “big bets”) wait until the quick wins have funded and de-risked them.

The Opportunity Matrix™

Opportunity	Value	Complexity	Risk	Type	When
Rebooking + first-visit membership (retention fix)	**High**	Low	Low	Quick win	Now
Rebalance marketing to referral / CRM	**High**	Low	Low	Quick win	Now
Reprice & bundle retail skincare	Med	Low	Low	Quick win	Now
Cash & working-capital discipline	Med	Low	Low	Quick win	Now
Deepen penetration of core trade areas	**High**	Med	Med	Major project	Next
Cross-sell laser & memberships to loyal base	**High**	Med	Low	Major project	Next
Reduce founder key-person risk	Med	Med	Med	Foundation	Next
Stand up the Scoreboard & data discipline	Med	Med	Low	Enabler	Next
Open the Energy Corridor (location #4)	**High**	**High**	**High**	Big bet	Later
Frontier #5 + exit-readiness / professionalize	**High**	**High**	**High**	Big bet	Later

Quick wins are high-value, low-complexity, low-risk — they go first and fund the rest. Big bets are high-value but capital-heavy — they wait until the model is proven.

THE FOCUS PLAN™

Now — the first 90 days

Stop the leak and tune the engine. These four moves need little capital, carry little risk, and start compounding immediately.

Initiative	What it involves	Expected outcome
Fix retention	Rebooking-at-checkout, a first-visit membership offer, and a 14/30/90-day follow-up sequence.	+$200K–$400K annual profit as second-visit conversion climbs 50% → 65%.
Rebalance marketing	Cut discount paid-social; redeploy to referral, CRM/email reactivation, and retention.	~$120K redeployed to higher-quality, higher-retaining patients.
Reprice & bundle retail	Move skincare into memberships and bundles rather than one-off discounting.	Higher retail contribution margin; another retention hook.
Cash discipline	A line-of-credit paydown plan and membership deferred-revenue management.	Rebuilt cash cushion; less balance-sheet fragility.

Next — months 3 to 9

With the leak sealed, grow the value of what already exists and remove the fragilities that would cap it.

Initiative	What it involves	Expected outcome
Deepen penetration	Target lookalikes of VIP/Loyal patients in current trade areas using the GIS layers.	More high-value patients inside the footprint you already serve (penetration 3.7% → higher).
Cross-sell high-margin services	Structured pathways from injectables into laser, memberships, and skin.	Higher lifetime value per existing patient.
Reduce key-person risk	Build an injector bench; standardize protocols and the patient experience.	Added capacity and materially higher enterprise value.
Stand up the Scoreboard	Launch the Aperture Live™ dashboard and weekly operating rhythm.	Decisions made on instruments, not instinct.

Later — months 9 to 24

Only now — with retention fixed, the footprint deepened, and a dashboard in place — does geographic expansion make sense. The new clinic inherits a working system instead of repeating The Woodlands' ramp.

Initiative	What it involves	Expected outcome
Open the Energy Corridor (#4)	Site, build, and staff location #4 on the data-backed recommendation.	Capture ~$843K of demand already driving 9+ miles; expansion into a proven model.
Frontier & exit-readiness	Scope location #5 (Fulshear / Pearland); professionalize for a future sale.	A multi-location, systemized, sellable platform.

What success looks like

Executed in sequence, the plan moves the numbers that matter — and the Aperture Score™ that summarizes them.

Marker	Today	After "Now"	After "Next"	After "Later"
Aperture Score™	58	~65	~72	78+
EBITDA margin	15%	~17%	~19%	20%+
2nd-visit conversion	~50%	~62%	~68%	70%+
Locations	3	3	3	4 → 5

Targets are illustrative and sequence-dependent; they are tracked live in the next phase.

Where this goes next

A plan only creates value if it is executed and measured. The final phase makes the roadmap live — turning each target above into a tracked metric with an owner and a cadence.

> **Next: Aperture Live™ — Manage & Improve Performance**
>
> *The question it answers:* ***"How do we sustain and improve results?"***
>
> Delivers the Scoreboard™ — executive dashboards, KPIs, and automated reporting — plus a re-scored Aperture Score™ so progress against this plan is visible in real time.

APPENDIX

Method

Opportunities were drawn from the Business X-Ray, the Profit Map, and the Customer & Market Map, then scored on value, complexity, risk, and impact. Sequencing favors moves that de-risk and fund those after them. Financial and score targets are modeled and reconcile to the scenario model in Aperture Analytics.

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APERTURE METHOD™

APERTURE LIVE™ · PERFORM

Scoreboard™ & KPI System

Making the plan live — measure, manage, and improve

The question this answers: ***How do we sustain and improve results?***

PREPARED FOR

Lumina Medical Aesthetics

Physician-led medical aesthetics · Houston, TX

July 2026 · The Aperture Method™

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EXECUTIVE SUMMARY

The plan, kept honest by numbers

Improvement that isn't measured quietly fades. Aperture Live™ turns the Focus Plan into a living Scoreboard: a short list of vital metrics, each with a target, an owner, and a cadence, so leadership can see progress in real time and act before problems reach the P&L. This is what keeps the other four phases from becoming a binder on a shelf.

14	58 → 72	Monthly	36 mo
KPIs on the Scoreboard	Aperture Score™ target	core review cadence	of KPI history in the feed

The Scoreboard is deliberately short. A handful of metrics that move the business — retention, margin, cash, acquisition quality, and the Aperture Score that summarizes them — beat a dashboard of fifty numbers nobody acts on. Every metric below is already computed from Lumina's own data and delivered as a monthly feed, ready to drive the live dashboard you build.

THE SCOREBOARD™

The vital few — with targets and owners

Retention & loyalty — the #1 focus

KPI	Current	Target	Cadence	Owner
2nd-visit conversion (new patients)	~50%	**65%**	Monthly	Front desk / GM
Returning-visit share	~92%	93%+	Monthly	GM
Membership penetration	34%	**45%**	Monthly	GM

Financial health

KPI	Current	Target	Cadence	Owner
Revenue	$6.44M/yr	+12%/yr	Monthly	Owner
EBITDA margin	15%	**20%+**	Monthly	Owner
Cash / LOC drawn	$185K / $410K	$350K / <$200K	Monthly	Owner

Growth, acquisition & efficiency

KPI	Current	Target	Cadence	Owner
New patients	~1,350/yr	+ quality	Monthly	Marketing

KPI	Current	Target	Cadence	Owner
Blended CAC	$118	<$110	Monthly	Marketing
Referral share of new patients	—	30%+	Monthly	Marketing
Paid-social share of spend	55%	**<40%**	Monthly	Marketing

Operations, spatial & overall

KPI	Current	Target	Cadence	Owner
Average ticket	$350	+5%	Monthly	GM
Provider utilization	—	80%+	Weekly	GM
Penetration of affluent households	3.7%	5%+	Quarterly	Owner
Aperture Score™	**58**	**72**	Quarterly	Owner + Aperture

THE DASHBOARD

Scoreboard™ dashboard — layout & data

The live dashboard is organized into five views, each answering a question an owner actually asks. It is driven by the accompanying data feed and refreshed on the cadence shown.

- **Executive tiles —** revenue, EBITDA margin, cash, and the Aperture Score, each shown against target with a red/amber/green status. The 10-second health check.
- **Retention funnel —** new patient → second visit → member → loyal, with conversion at each step. The single most important view, tracking the #1 constraint.
- **Location comparison —** revenue, margin, and new patients for River Oaks, Katy, and The Woodlands side by side, so the ramp of each is visible.
- **Trends —** monthly revenue and EBITDA margin over 36 months, so seasonality and trajectory are obvious.
- **Spatial view —** the Aperture GIS map embedded: patient heat, penetration by ZIP, and the candidate site — decisions in geographic context.

> **Refresh cadence**

The data feed

Everything on the Scoreboard is delivered as clean, ready-to-connect data:

- **scoreboard_kpi_monthly.csv —** 36 months of every headline KPI: revenue, visits, new patients, average ticket, returning-visit share, membership transactions, marketing spend, CAC, and estimated EBITDA & margin.

- **scoreboard_kpi_by_location_monthly.csv —** revenue, visits, and new patients by location by month, for the comparison view.
- **scoreboard_kpi_definitions.csv —** the KPI catalog: definition, current value, target, cadence, and owner for each metric.

MAKE IT STICK

The operating rhythm

A dashboard changes nothing without a rhythm around it. Aperture Live™ pairs the Scoreboard with a simple review cadence:

Cadence	Who	Focus
Weekly (15 min)	GM + front desk	Bookings, provider utilization, rebooking rate — the leading indicators.
Monthly (60 min)	Owner + GM	The full Scoreboard vs. target; what moved, what to adjust.
Quarterly (half day)	Owner + Aperture	Re-score the Aperture Score™, review the Focus Plan, reset targets.

Closing the loop — the re-scored Aperture Score™

Every quarter the Aperture Score is recomputed on the same seven lenses from the Business X-Ray. Watching it climb from 58 toward 72 is the clearest single proof that the plan is working — and where it stalls tells you exactly which lens needs attention next.

> **The method is a loop, not a line**

APPENDIX

Method & data

All KPI values are computed from Lumina's appointment, patient, marketing, and financial data, and reconcile to the financial statements and the Profit Map. Estimated monthly EBITDA applies the operating-expense model from the financial statements (60% fixed, 40% revenue-variable). Targets are drawn from the Focus Plan and the scenario model.

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