

The v13 Talk Track: say exactly this

One green block per screen — say it as written, then go quiet and let them tap the gate. Orange blocks are the things you must capture on screen, with where they come back. Quote the screen, not your memory: the deck computes every number live, and the screen always wins. Names (Emma, Priya, Maria) are stand-ins. July 21, 2026. **What changed from v12:** the three battles on screen 2 are now *weight / muscle / a health condition you pick on screen* (hunger retired); screen 3's willpower chain is now a click-through story with one draining engine gauge; screen 4's second click is a "grow the engine" dial instead of the two-futures panel. **Every dollar figure is unchanged** — the money screens are identical to v12.

The three silences (if you remember nothing else): ① count three seconds after every story answer — the second answer is the real one · ② after the money number lands, the patient speaks first · ③ after "which feels right," nothing until they answer.

Setup BEFORE THEY SIT DOWN

one minute · they never see this screen

- **Name, weight, goal, height, why, their Tuesday** — verbatim from intake. Their words print on their plan.
- **Insurance status · how they found us** (searchers auto-get the compare screen; doctor-sent gets the clinical frame) · **doctor-flagged conditions** (they light up the health rows on screen 6 *and* pre-fill the health battle on screen 2) · **medication comfort · age + sex** (powers the resting-burn and fat/lean estimates, and picks the male or female illustrations deck-wide).
- The **Build this visit** → button is pinned to the bottom of the screen — it never scrolls away. Miss a starred field and it warns once, then builds anyway on the second tap.

NEVER

Fill this in front of the patient, or guess a field. A wrong medication-comfort answer routes the whole visit wrong.

1 WELCOME

feel: safe

SAY EXACTLY THIS

"Most people think about booking this visit for months — you did the hardest part already. Here's our thirty minutes: first your story, then your numbers on this screen, then the plan I'd build for you, and at the end every price we have, on paper. And if we're not the right fit, I'll say that too."

GATE

"Your story, your numbers, your plan, prices at the end. Fair?" — let them tap it. If they ask about price first: "All published — lobby wall and the last screen. I just won't quote you a guess."

2 THREE BATTLES

the listening screen · 8 minutes · you talk 30%

ASK EXACTLY THESE, IN ORDER

1. "What made you book this — and why now instead of last year?"
2. "What have you tried? Tell me what you liked about each one, not just what went wrong."
3. "Say it's six months from now and this worked. Walk me through a normal Tuesday."
4. *[now the slide]* "People come in fighting one of three battles — **the weight** that keeps coming back, **the muscle** that left with every diet, or a **health number** the weight is driving: blood pressure, sugar, sleep, joints. Which one is yours?" **[they tap the card]** "Tell me why that one."
5. "This matters how much, one to ten?" **[they pick]** "Why a 7 and not a 4?" ... "What would make it a 9?"

IF THEY PICK "MANAGE <A CONDITION>" — ONE EXTRA TAP

The word in that card is live. Tap it and a small fan of five opens — **blood pressure · blood sugar · sleep · joints · cholesterol**. Tap the one they named. The card, the gate line, and their printed profile all update to that exact condition. (*Doctor-sent patients: the condition their doctor flagged is already showing — just confirm it's the right one.*)

CAPTURE ON SCREEN — THESE COME BACK LATER

- Their Tuesday, verbatim → **prints on the last screen, in their words**
- **Battle + their why** (tap the card, type the why; for health, pick the condition) → **the gate line, the close screen, Care Notes**
- **1–10 + "what would make it a 9"** (type it in the strip) → **this is the real obstacle, known 20 minutes before the money screen; prints on Care Notes**

GATE

"So the fight is [the weight / gaining muscle back / getting your blood pressure under control], because [her words]. Did we get that right?" If "Not quite": type their correction while they watch. (If no why was captured, the gate reads clean without one — but capture it; it's the close.)

ONE EXTRA QUESTION BY HISTORY

On GLP-1 now: "Who decides your dose? Who checks what the weight you're losing is made of?" · Took it before: "When you stopped, what was the exit plan?" **[there wasn't one]** "Remember that." · First-timer: "What did every plan you've tried have in common?"

3 IT WAS NEVER WILLPOWER

feel: absolved · a click-through story, one beat at a time

SET IT UP, THEN WALK THE FOUR BEATS — TAP THE BUTTON ONCE PER BEAT, WATCH THE GAUGE

"Here's the piece nobody showed you, and I want you to watch one thing while I walk it: this gauge — that's your engine, the muscle that burns calories while you sit."

BEAT 1 — "THE CRASH DIET"

[first beat is already showing] "It starts with a crash diet. Big cut, no protection, no oversight. Engine's still near full here." [tap: "Then what happened →"]

BEAT 2 — "MUSCLE GOES TOO"

"As much as a third of what you lose isn't fat — it's muscle. [the gauge drops] Watch it fall." [tap: "And then →"]

BEAT 3 — "YOUR ENGINE SHRINKS"

"Less muscle means a lower burn — fewer calories used just sitting here. [gauge drops again] Smaller engine than you started with." [tap: "Which means →"]

BEAT 4 — "THE REBOUND"

"Then normal life comes back — and see the gauge just turned amber? ['your engine, after'] That smaller engine can't keep up, so the weight returns, mostly as fat. Five diets in ten years is five engine downgrades." [tap: "And that's the trap →" — the line lands]

THE LINE THE SCREEN REVEALS — LET IT SIT

"You weren't weak. The plan was. That's not us being nice — that's the mechanism."

THEN THE CALLBACK, FROM THEIR SCREEN-2 ANSWER

"Your keto year? Lost twenty, got back twenty-five. Now you know why the twenty-five."

GATE

"Does this sound like your story?" Never advance on a polite nod. If "Mine's different": type what didn't fit — it becomes the provider's first question at visit one.

IF YOU NEED TO GO BACK A BEAT

Tapping any revealed step re-points the gauge to it — use that to re-walk a beat if they got lost.  steps the story back one beat at a time before it leaves the screen.

4 EMMA, MEET YOUR BODY

feel: seen — then hopeful · the two-click screen

THE TILES, HONESTLY — WEIGHT IS REAL, THE REST ARE ESTIMATES TODAY

"Weight, 212 — the number you already knew, and the least interesting one up here. Fat mass, about 104 — that's the target. And see the little est. marks? Fat, muscle, and your resting burn are estimated from formulas today. At your first medical visit the body-composition analyzer and the breath test measure the real ones — free — and most people are surprised which side of the estimate they land on. That gap is exactly why we measure instead of guess."

CLICK 1 — THE SCREEN FADES TO THE TWO THAT MATTER

"Now the good news, because there is real good news on this screen. See the two tiles marked *your engine* and *engine output* — that's about 108 pounds of muscle, quietly burning around fifteen hundred calories a day for you, even at rest. Nothing here is broken. That strength is what we build the whole plan around."

CLICK 2 — THE "GROW THE ENGINE" DIAL

"And here's what that engine is worth. This dial is your resting burn *at your goal weight*. [tap +5 lbs muscle — the number climbs] Add five pounds of muscle and it climbs about thirty calories a day — roughly three pounds a year, burned while you sleep. [tap +10] Ten pounds, six. That's the difference between a diet you repeat and an engine that keeps working after the weight's gone. It's example math — your real numbers get measured here, week by week."

GATE — THEY SAY IT, NOT YOU

"Look at the screen and tell me: what's the real mission here?" [silence until they land near "lose the fat, keep — or grow — the muscle"] "Exactly. You just described your program."

IF THEY GO QUIET OR EMOTIONAL

Stop presenting. "Take a second. Most people have never actually been shown this." Don't talk over it — it's the bond. · **Switcher:** "Months on the medication, and nobody's ever shown you what the loss is made of. Your first visit here measures it."

5 THE MEDICATION GETS YOU STARTED

feel: this finally makes sense

SAY EXACTLY THIS, TRACING THE THREE CARDS, THEN THE CURVE

"Here's how it works. First: the medication quiets the hunger noise, so a real deficit finally feels doable — that's biology, not weakness. Second: because you can finally eat enough protein and move, your engine grows while the fat leaves — the weekly body comp is us standing guard on that. Third: [trace the curve] see the shape? The medication comes off gradually, medically — not on a cliff — and the habits stay. Each phase earns the next. This isn't the easy way out — it's the one you won't have to do again."

READ THE BOX THAT APPEARS — WORD FOR WORD, DON'T IMPROVISE

The screen reads their numbers and shows one honest box: *medication likely isn't your tool* (read it warmly — that honesty closes \$199 starts) · *the exam decides* · *the three-phase journey* (big goals). Never override it to keep a GLP-1 sale alive.

GATE

"Which matters more: losing it fast, or keeping it forever?" Both answers win — the panel answers "Both, honestly" for you.

PREFERS NO MEDS

Read the box WITH them: slower pace said plainly, week-4 revisit, their call always. The respect IS the persuasion. · **Restarter:** point at the line: "The medication wasn't the problem. There was no plan for after it. That plan is this."

LEFT SIDE FIRST — THE PACE, POINTING AT THE BIG NUMBER

"Here's the pace, and I'm quoting our middle patient, not our poster. **[the big number]** That's your first five percent, by about week five. Half of our patients beat it; I'd rather promise the middle and watch you beat it. **[the WK-4 card]** And hold onto this part: week four is a real visit. We read your first month like a lab result. On pace, stay the course. Off pace, the plan changes that day. Nobody stalls quietly here."

THEN THE RIGHT COLUMN — WHAT LEAVES WITH IT

"And your bathroom scale will never show you this column. **[read THEIR rows — the screen already picked them]** Every pound you lose is four pounds off your knees, every single step. None of this is a promise about you: your own baseline gets measured free, re-checked weekly, and shared with your doctor if you want. Improvement becomes something you can prove, not just feel. So — which of these would change the most for you?" **[3-count]**

CAPTURE

The health win they name, in their words → **Care Notes; progress on it opens every care call**

GATE

"First 5% in about five weeks with a Week-4 Review — plus these health wins along the way. Deal?" If "I've been promised before" — that's gold: "What did they promise you?" **[let it all out, type it in]** "That's exactly why we quote the middle and put a review date on it."

CAPTURE

What they were promised before → **Care Notes; the provider makes the Week-4 Review visibly happen — it repairs old trust**

MED-FREE START · DOCTOR-SENT

Med-free: the pace line on screen says it plainly — about half this, week 4 is when we look together. · Doctor-sent: open the health column with the referral: "Your doctor flagged these — this column is why you're here." The report back to their doctor IS the close for this patient.

7 THREE THINGS, ALREADY HANDLED

feel: relief, with an ending built in

SAY EXACTLY THIS — ONE FULL ROW, THEN THE MEDICATION OFF-RAMP

"Now the part everybody dreads: figuring out food, medication, movement. You won't. Your meal plan starts done FOR you — your kitchen, your cuisine, on your phone today. Then done WITH you, adjusted weekly with your coach. And by the end it's just how you eat. Same shape for the medication — and see this: a supervised off-ramp. It ends by design, and the result is built to outlast it. **[the band under the grid]** First we carry it, then we hand it to you, and then you won't need us. That's the plan working."

GATE

"So what does dinner look like at your house?" Whatever they answer: "We can work with that."

CAPTURE

Their food world (allergies, shift work, cooking for five) → **their meal plan is built around it before day one; prints on the plan**

8 20 MINUTES A WEEK

feel: held, not managed

SAY EXACTLY THIS, THEN HAND THEM THE SCREEN

"Here's the whole commitment, drawn honestly: one short drive, one protected 20-minute slot, once a week. That's the medicine. Inside it: a provider who knows your chart and your name, your muscle checked every visit. Something comes up on a Tuesday night? You ask a real person and get a real answer. Rough week with side effects? Walk in, we see you that day. **[the day picker]** Go ahead — tap the day that could actually hold."

GATE — SOLVE IT NOW, NOT AT WEEK 3

"Could your week hold 20 minutes, same day, same time?" If "It'd be tight": "That's most people. One fixed slot that defends itself — early morning or lunch. Which day is most realistic?"

CAPTURE

Their day, tapped on screen → **flows to Care Notes and the close checklist — this exact slot gets booked; a cadence solved here never becomes a cancellation**

55+

"Real medical oversight — the same discipline as any specialist you see, applied to weight." That sentence is the whole close for this patient.

9 SAME MEDICATION, DIFFERENT CARE

auto for GLP-1 history + searchers - press 9 to summon

SAY EXACTLY THIS — CREDIT FIRST

"Same molecule — that's true and I'll never tell you otherwise, and the apps deserve credit for what they do offer. What you're choosing is everything around the molecule: nobody examines you, nobody watches your muscle, and a stall doesn't get caught at week 4 — it gets caught when you quit. **[the price row]** Their number runs \$294 to \$648 plus fees, depending on whether it's compounded or brand and what the membership adds at checkout. Ours is published: \$399, one number — \$549 on tirzepatide — and the whole next screen is that math in the open. People don't fail on these medications. Unsupported programs fail them."

GATE (SWITCHERS — THEIR TESTIMONY)

"You've tried the mail-order version, so you tell me: how many of these did it give you?" **[they answer]** Say nothing else. Advance.

NEVER

Bring this screen up first with a first-timer who hasn't shopped. Never mock the apps — they chose one once.

10 975 PATIENTS, TRACKED RIGHT HERE

60 seconds, then the money screen

SAY EXACTLY THIS

"You shouldn't have to take my word for anything today. Not national claims — these clinics: 975 patients tracked in Central Texas. Seventeen pounds is the median by week thirteen for people who keep the rhythm. Same medical director, Dr. Dawson, since 2011 — that's fifteen years of the same doctor signing off on this program. 84 percent of the people who keep the rhythm reach the five percent mark. **[the cards]** Mandy — 46 pounds, blood pressure finally moving. Virgilio — 70 pounds, dad of three. Renate — 86 pounds, from knee pain to ten thousand steps a day."

GATE

"Thirteen weeks from now, would you want your own before-and-after?" If they squint at the photo small print: "Good catch — the faces are Medi patients nationwide; the numbers above them are ours, measured in this building." The honesty builds more trust than the photos.

BEAT 1 — THE LINE, LEFT TO RIGHT, UNHURRIED

"As promised — every number, shown the way I'd want it shown to me. Three points on one line. **[left stop]** The brand shot alone — Wegovy, mailed to your door — \$349 a month, and that's all you get: a box. **[right stop]** Build everything we do yourself, around town — the same brand shot, a provider every week, the scans, the coaching — about \$890 a month. **[the big one]** And here: \$399. Fifty dollars more than the naked shot. About four hundred ninety dollars a month less than building it yourself."

BEAT 2 — THE TABLE, ROW BY ROW

"And here's exactly what that fifty dollars buys — line by line, with the street price next to each. The brand shot itself, dosed on site — \$349 on its own. Four provider visits a month, face to face — about \$300 if you hired that separately. Body-composition scans every visit — \$140. Weekly meal and exercise coaching — \$99. Every row: included. Add-ons like vitamin shots and supplements stay optional — priced on the lobby wall, never required."

BEAT 3 — THE ONE NUMBER, THEN STOP

"So the whole program is one required number. **[point at \$399]** No middlemen, clinic-volume medication, no per-visit billing. We trade margin for patients who stay. **[STOP. Hands off the table. They speak first.]**"

THEN, IN THIS EXACT ORDER

1. "Before we look at insurance: if this were the plan, does that number work for your life?" **[wait]**
2. Only after a yes: "Now hand me your card — for most people it gets better from here. Whatever we find comes off the number you just approved."
3. The first visit: "One-time, \$199 — around town that runs \$150 to \$300."

TIRZEPATIDE PATIENT

Tap the toggle, top right. Same story, same deltas: brand Zepbound alone \$499 · here \$549 · built yourself about \$1,040. Still fifty dollars over the naked shot, still about \$490 a month staying in their pocket.

"BUT I SAW A \$99 SHOT ONLINE"

Never argue. "That's real — and it's a different product: compounded, not the brand drug, and that market is shrinking fast since the settlements. Brand to brand, the gap is fifty dollars. And even a compounded do-it-yourself build — medicine plus any actual care around it — runs five to six-fifty a month. It's on the screen." **[the small line under the table]**

IF THEY TAP "ONE QUESTION FIRST" — THE DETOUR HAS YOUR THREE OPTIONS

Read them as written: ① the 90-second insurance check usually shrinks the number · ② the \$199/mo no-GLP-1 program is real — steadier pace, same weekly care · ③ "not this month" is an answer we respect. And the reframe if it helps: "\$399 is about \$92 a week — everything inside it." What you never do: stretch them thin.

IF THE HONEST-READ BOX SHOWED ON SCREEN 5 (LOWER BMI)

Lead with the \$199 program cell — it's on this screen, bottom right: "Which means your number today is a lot smaller than the one I just showed you." Watch the relief. That patient refers three friends. Never walk the honest read back.

CAPTURE

Their pricing question, word for word (the detour input) → **Care Notes flags "Budget care — protect the core plan, no add-ons on this chart"**

12 THE CLOSE

silence #3 lives here

SAY EXACTLY THIS

"Last screen, nothing to sign. Both sides of the deal in plain sight. Us: a provider who knows your chart, your muscle protected, the Week-4 Review, your meal plan, every price published, and the truth even when it's not what you hoped. You: twenty minutes a week, the protein most days, come to Week 4 whatever the scale says, your day-zero photo today. And one ask above all of it: if quitting ever crosses your mind, tell us at a visit first. Let us try once. **[their Tuesday, on screen, in their words]** That Tuesday you described? That's what this is for."

THE CHOICE, VERBATIM, THEN SILENCE

"Two honest paths. If you're ready, we book your first month right now — four visits, one card, same time every week, you start Thursday. If you need time, that's real too — everything goes home with you and I'll hold a slot for 48 hours. Which feels right?" **[nothing until they answer]**

"I'M READY"

Work the on-screen checklist out loud: four visits as a series, same slot (the day they tapped on screen 8) · Week-4 Review on the calendar · day-zero photo + week-13 photo appointment · provider text sent while they watch · meal preferences to the kitchen plan · summary printed. At the photo, soft: "Who's fighting this battle alongside you? Assessments are free."

"I NEED TIME"

No flinch. "I'd rather have your honest 'not yet' than a stretched yes." Let THEM pick the real hesitation on screen, read its answer WITH them, send the summary home. Same evening, from your phone: "Great meeting you today, Emma. 'Coffee before the grandkids wake up' is a great reason. The slot's yours until Thursday."

BEFORE THE NEXT PATIENT — THE DECK MAKES YOU DO THIS

Tap *Care Notes* → print for the chart → Start Over. If the visit reached the money screen with no outcome logged, the deck refuses to reset until you log it — 30 seconds.

WHAT YOUR SETUP CHOICES CHANGE

the deck personalizes itself

Setup choice	What the deck does	What you do
Searched for us	Compare screen (9) joins the path	"You did the homework" framing
Friend sent them	Referral lines on screens 8 + 10	Name the friend's result; faster tempo
Saw a video/ad	Full belief-first path	Slow down on screens 3–5
Doctor sent + flags	Flagged health rows show big on screen 6's right column; the flagged condition pre-fills the "Manage <condition>" battle on screen 2	Confirm the pre-filled condition; open the column with the referral; the doctor report-back is the close
GLP-1 now / before	Compare screen in path; switcher lines on 2, 4, 5	Their testimony sells; ask, never criticize
Prefers no meds	Straight-talk pace boxes on 5 + 6; week-4 revisit in close	Read WITH them; respect is the persuasion
BMI under ~27	Honest-read box on 5; the \$199 no-GLP-1 cell waits on the money screen	Never walk it back; lead with \$199
Goal > 15%	Three-phase line on 5	"One sprint is selling the rebound"
Insurance status	Steers money screen + close checklist	Insurance is always a subtraction from an approved number
Age + sex	Resting-burn + fat/lean estimates; male or female illustrations deck-wide	Nothing — plumbing

Deck keys:   screens — but on the two *story* screens,  first advances the beats and  steps them back: on screen 3 that's the four willpower beats (the gauge drains, then turns amber), on screen 4 it's the two clicks (fade to the two that matter, then the grow-the-engine dial).  summon the compare screen ·  presentation mode (hides the staff buttons; keys still work). On screen 2 the 1-to-10 strip appears once a battle card is tapped, and the "Manage <condition>" word opens a five-chip picker. On the money screen the Semaglutide/Tirzepatide toggle is top-right; the pricing options live in the "One question first" detour. **Pocket card:** *Assessment-Deck-v13-PocketCard.html*, the last page of this PDF — one per consult-room drawer. **Owner setup:** paste booking URLs + first-visit prices into CONFIG; launch with *?clinic=na/cs/gt*. A visit interrupted mid-stream offers "Pick up where you left off" on reload — Start fresh clears it.

2026 market research behind every dollar figure). Dollar figures are the deck's defaults — the deck computes live and the screen always wins. Names are stand-ins. Internal training use only.

DISCIPLINE · HOLD THESE
THE THREE SILENCES

1

3-count after story answers
screens 2–3 · let it land

2

Patient speaks first after the
price lands
screen 11 · do not rescue them

3

Nothing after “which feels
right?”
screen 12 · the last word is theirs

DECK KEYS

←

→

navigate

· on 3 steps the 4
beats, on 4 the 2
clicks

9

summons the comparison screen

p

presentation
mode

· hides staff
chrome

MONEY SCREEN · THE
NUMBERS

Brand shot alone, mailed

\$349

The whole program, here

\$399

Build it yourself, brand

~\$890

Tirzepatide (toggle,
top right)

\$499 · \$549 ·
~\$1,040

Either way: +\$50 over the shot ·
~\$490/mo stays theirs · first visit \$199 ·
no-GLP-1 \$199/mo

Anchor lines are **said, not read**. The screen carries the numbers; you carry the pause.

OPEN · 1

1 “Every price at the end, on paper. And if we’re not the right fit, I’ll say that too.”

THEIR STORY · 2–3

SILENCE ① LIVES HERE

2 “Which battle is yours — weight, muscle, or a health number? Tell me why that one.” then “Why a 7 and not a 4? What would make it a 9?”
“Manage <condition>” → tap the word, pick BP / sugar / sleep / joints / cholesterol

3 “Watch your engine.” Beat by beat: crash diet → muscle goes → engine shrinks → rebound (gauge turns amber). then “You weren’t weak. The plan was.”
tap the button once per beat — the story reveals itself

THE MISSION · 4

4 “Look at the screen and tell me: what’s the real mission?”
estimates today, measured free at visit one · click ① the two that matter · click ② the grow-the-engine dial (+5/+10 lbs muscle → +30/+60 cal/day)

THE PLAN · 5–8

5 “The medication gets you started. The plan keeps it off. Each phase earns the next.”
read the eligibility box, never override it

6 “Middle patient, not our poster: 5% by ~week five.” then “Which of these health wins would change the most for you?”
pace left, health rows right — one screen now · every pound = 4 lbs off the knees

7 “First we plan it for you. Then with you. Then you won’t need us. That’s the plan working.”
the medication ends by design

8 “Could your week hold 20 minutes, same day, same time?”
they tap the day — it books at the close

PROOF · 9–10

9 “You’ve tried the mail-order version — how many of these did it give you?”
auto for searchers too · key 9 summons this screen anytime

10 “You shouldn’t have to take my word for anything today.”
faces national, numbers ours — say it proudly · same medical director since 2011

THE CLOSE

SCREENS 11–12 · ONE MONEY SCREEN · ONE NUMBER · TWO PATHS · THEN QUIET

11
MONEY

“\$50 more than the shot alone. \$490 less than building it yourself.”
the line: \$349 · \$399 · ~\$890

→

the table
what the \$50 buys,
row by row

→

THE ONE
NUMBER

→

SILENCE ②
they speak first

→

“does it work for your life?”

→

insurance as subtraction
detour: check · \$199 program · “not this month”

12
DECIDE

“Nothing to sign. Two honest paths. Which feels right?”

→

SILENCE ③
nothing after the ask

→

checklist
the slot they tapped on 8

→

Care Notes

→

LOG THE
OUTCOME

Compounded objection: “That’s real — different product, shrinking market. Brand to brand, the gap is \$50.” · The deck won’t reset until the outcome is logged.