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Why we ruled out the single-page funnel

How a Lovable-style one-pager got reshaped into a three-page architecture that quadrupled conversion.

CLIENT SITUATION

An orthopaedic implant company — high-ACV capital equipment, twelve-month buying cycle. Wanted a single-page Lovable-style funnel: one landing page, one CTA ('Book a demo'), all paid traffic and outbound sequences pointing at it.



The decision we walked into

THE QUESTION WE ASKED

What proportion of visitors actually arrive ready for the demo CTA — and what happens to the ones who don't?

THE OPTION WE RULED OUT

The single-page Lovable funnel. Estimated build cost: £18k. Estimated conversion: 1.5–2.5% based on industry benchmarks for high-ACV B2B. Estimated wrong-fit-lead rate: 75%+, given the broad keyword targeting in the paid plan.



What we picked, and why

THE OPTION WE PICKED

A three-page architecture, one page per stage of the buyer journey.

- Page 1 (do I have this problem?): a diagnostic with a 'take the assessment' CTA, optimised for SEO.
- Page 2 (should I solve it now?): a cost-of-care comparison with an ROI calculator and 'download the case study' CTA, optimised for paid retargeting.
- Page 3 (who should I solve it with?): the demo / triage page, traffic only sent here from named accounts in late-stage pipeline.

WHY

A healthcare buyer takes sixty-five days from 'noticing the problem' to 'asking for a demo'. A single page asking for a demo on visit one is asking the visitor a question they're not yet ready to answer. The three-page architecture lets the visitor self-select to the stage they're in — and lets the analytics tell you which stage is broken when conversion stalls.



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What this teaches

One landing page, one CTA, every campaign aimed at it is the default healthcare conversion architecture and the wrong one. The fix is rarely a redesign of the page; it's splitting the page into three destinations matched to journey stage.

A 2% conversion rate on a Stage 1 page is good. A 2% conversion rate on a Stage 3 page is a bug.