



SEO Report // Regional Cancer Care Associates

Regional Cancer Care Associates' overall monthly visibility for the keywords is up 40% since our first time tracking this website. The website currently has an additional 47 keywords ranked in the #1 spot, 79 additional keywords ranked in the Top 3 and an additional 121 keywords ranked in the Top 10 on Google, Google Mobile, Yahoo and Bing.








































Overall Monthly Visibility



Top Search Engine Rankings: Overview

Ranked 1st	47		+47	47 rankings found for 25 keywords in 3 search engines
In Top 3	79		+79	79 rankings found for 42 keywords in 3 search engines
In Top 10	121		+121	121 rankings found for 57 keywords in 3 search engines
In Top 50	178		+178	178 rankings found for 85 keywords in 3 search engines
Not in Top 50	89		-178	89 rankings found for 52 keywords in 3 search engines
Moved up	147			147 rankings found for 84 keywords in 2 search engines
Moved down	0			0 rankings found for 0 keywords in 0 search engines

All Search Engine Rankings

Keyword ▼	 Bing US	 Google	 Yahoo!
Amita B. Patel, NP-C	3 	1 —	1 
Andrei M. Dobrescu, MD	2 	— —	2 
Aysha Khalid	Not in top 50 —	9 —	6 
Aysha Khalid, MD	3 	8 —	2 
Beiqing Pan, MD, PhD	1 	— —	1 
Blood Disorders in Central Jersey	1 	1 —	Not in top 50 —
Brian F. Canavan, DO	2 	— —	2 
Bruce H. Wallach, MD	4 	— —	4 
Bruno Fang, MD	4 	— —	6 
Bruno S. Fang, MD	5 	— —	5 
Cancer Care Associates Doctors in Central Jersey	1 	— —	1 
Cancer Clinical Trials in New Jersey	Not in top 50 —	— —	Not in top 50 —
Cancer Doctors in Central Jersey	3 	— —	2 
Cancer Doctors in Jersey	43 	— —	Not in top 50 —
Cancer Doctors in New Jersey	25 	— —	Not in top 50 —
Cancer Pharmacy in Central New Jersey	1 	2 —	2 
Cancer Pharmacy in New Jersey	Not in top 50 —	13 —	14 
Cancer Pharmacy Services in Central New Jersey	Not in top 50 —	1 —	1 
Cancer Surgery in Central New Jersey	16 	— —	27 
Cancer Surgery in New Jersey	Not in top 50 —	— —	Not in top 50 —
Cancer Treatment in Central New Jersey	3 	13 —	6 
Cancer Treatment in East Brunswick	13 	24 —	10 
Cancer Treatment in East Brunswick New Jersey	Not in top 50 —	6 —	6 
Cancer Treatment in Edison	Not in top 50 —	Not in top 50 —	24 

Cancer Treatment in Edison New Jersey	35	↑	17	—	21	↑
Cancer Treatment in New Jersey	Not in top 50	—	—	—	Not in top 50	—
Cancer Treatment in Somerset	3	↑	—	—	9	↑
Cancer Treatment in Somerset New Jersey	4	↑	—	—	5	↑
Cancer Treatment in Somerville	18	↑	—	—	14	↑
Cancer Treatment in Somerville New Jersey	8	↑	—	—	8	↑
Central Jersey RCCA	1	↑	5	—	1	↑
centraljerseyrocca.com	1	↑	1	—	1	↑
Chemo in Central New Jersey	Not in top 50	—	—	—	2	↑
Chemo in New Jersey	12	↑	—	—	12	↑
Chemotherapy Treatment in Central New Jersey	Not in top 50	—	—	—	2	↑
Chemotherapy Treatment in New Jersey	3	↑	—	—	3	↑
Clinical Trials in New Jersey	Not in top 50	—	—	—	Not in top 50	—
Dr. Amita Patel	Not in top 50	—	—	—	Not in top 50	—
Dr. Amjad	Not in top 50	—	—	—	Not in top 50	—
Dr. Beiqing Pan	13	↑	—	—	13	↑
Dr. Bruce Wallach	Not in top 50	—	—	—	Not in top 50	—
Dr. Canavan	Not in top 50	—	—	—	Not in top 50	—
Dr. Dobrescu	Not in top 50	—	—	—	28	↑
Dr. Edward Licitra	Not in top 50	—	—	—	49	↑
Dr. Eileen Peng	Not in top 50	—	—	—	1	↑
Dr. Ellen Ronnen	23	↑	16	—	22	↑
Dr. Fang	Not in top 50	—	—	—	Not in top 50	—
Dr. Flocco	Not in top 50	—	—	—	Not in top 50	—
Dr. Hill	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. James Salwitz	Not in top 50	—	—	—	40	↑
Dr. Jonathan Rosenbluth	11	↑	12	—	13	↑
Dr. Karp	Not in top 50	—	—	—	Not in top 50	—
Dr. Kathleen Toomey	Not in top 50	—	—	—	20	↑

Dr. Khalid	Not in top 50	—	—	—	Not in top 50	—
Dr. Licitra	25	↑	—	—	29	↑
Dr. Maria Hill	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Maurren Thyne	14	↑	—	—	17	↑
Dr. Michael Nissenblatt	Not in top 50	—	—	—	24	↑
Dr. Nissenblatt	22	↑	—	—	22	↑
Dr. Pan	Not in top 50	—	—	—	Not in top 50	—
Dr. Patel	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Peng	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Phillip Reid	Not in top 50	—	13	—	Not in top 50	—
Dr. Reid	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Richard Schuman	Not in top 50	—	—	—	Not in top 50	—
Dr. Ronnen	Not in top 50	—	23	—	15	↑
Dr. Rosenbluth	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Salwitz	Not in top 50	—	—	—	35	↑
Dr. Schuman	Not in top 50	—	—	—	Not in top 50	—
Dr. Seeta Trivedi	Not in top 50	—	—	—	25	↑
Dr. Shannon Woerner	Not in top 50	—	—	—	Not in top 50	—
Dr. Steven Young	28	↑	—	—	18	↑
Dr. Thyne	Not in top 50	—	—	—	Not in top 50	—
Dr. Tina Flocco	3	↑	—	—	17	↑
Dr. Toomey	39	↑	—	—	39	↑
Dr. Trivedi	Not in top 50	—	—	—	Not in top 50	—
Dr. Wallach	Not in top 50	—	—	—	Not in top 50	—
Dr. Woerner	Not in top 50	—	Not in top 50	—	Not in top 50	—
Dr. Young	Not in top 50	—	—	—	Not in top 50	—
Edward J. Licitra, MD, PhD	1	↑	—	—	1	↑
Eileen R. Peng, PharmD	1	↑	—	—	1	↑
Ellen A. Ronnen, MD	1	↑	10	—	6	↑

George I. Karp	Not in top 50	—	—	—	6	↑
George I. Karp, MD	4	↑	—	—	4	↑
George Karp	35	↑	—	—	35	↑
Hematology Care for Blood Disorders in Central Jersey	1	↑	—	—	1	↑
Hematology in Central Jersey	1	↑	7	—	1	↑
Hematology Treatment in Central New Jersey	1	↑	10	—	1	↑
Hematology Treatment in New Jersey	2	↑	14	—	9	↑
James C. Salwitz, MD	10	↑	13	—	6	↑
Jonathan Z. Rosenbluth, MD	1	↑	4	—	2	↑
Kathleen C. Toomey, MD	3	↑	—	—	3	↑
Maqsood Amjad, MD	7	↑	—	—	7	↑
Maria T. Hill, NP-C	12	↑	1	—	Not in top 50	—
Maureen E. Thyne, RPA-C	1	↑	—	—	1	↑
Michael J. Nissenblatt, MD	6	↑	—	—	3	↑
Oncology Pharmacy in Central New Jersey	1	↑	10	—	1	↑
Oncology Pharmacy in New Jersey	8	↑	24	—	10	↑
Oncology Treatment in Central New Jersey	1	↑	16	—	1	↑
Oncology Treatment in New Jersey	17	↑	Not in top 50	—	36	↑
Oncology-Hematology Treatment in Central New Jersey	1	↑	7	—	1	↑
Phillip D. Reid, MD	5	↑	—	—	5	↑
Radiation Oncology in Central New Jersey	1	↑	—	—	2	↑
Radiation Oncology in New Jersey	Not in top 50	—	—	—	Not in top 50	—
Radiation Treatment in Central New Jersey	1	↑	—	—	1	↑
RCCA	35	↑	Not in top 50	—	24	↑
Regional Cancer Care Associates	2	↑	4	—	3	↑
Regional Cancer Care Associates in Somerville	2	↑	—	—	2	↑
Richard M. Schuman, MD	2	↑	—	—	2	↑
Seeta Trivedi, MD	5	↑	—	—	5	↑
Shannon L. Woerner, ANP-BC	1	↑	1	—	1	↑
Steven E. Young, MD	3	↑	—	—	3	↑
Tina D. Flocco, ANP-BC	1	↑	1	—	1	↑




Group Report

Jul 01, 2016 - Sep 30, 2016

The Group Report helps you understand the growth and health of your social profiles across social channels. The report combines your activity and growth across all your Twitter, Facebook, LinkedIn and Instagram profiles to provide a clear picture of where to focus your social efforts.

Included in this Report

 Regional Cancer Care Associates, Central J..  CJ_Oncology

Activity Overview



5,379
IMPRESSIONS



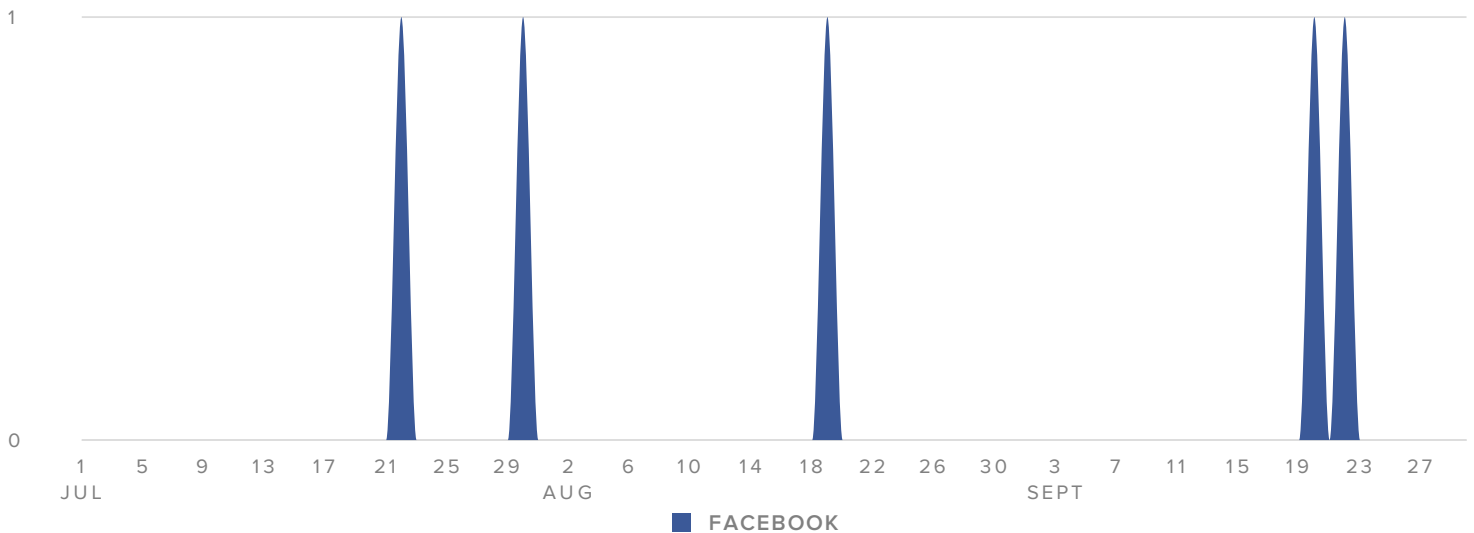
90
ENGAGEMENTS



25
LINK CLICKS

Audience Growth

AUDIENCE GROWTH, BY DAY



AUDIENCE GROWTH METRICS	TOTALS	CHANGE
Total Fans	237	▲ 2.2%
New Facebook Fans	5	▼ 79.2%
New Twitter Followers	—	—
Total Fans Gained	5	▼ 79.2%

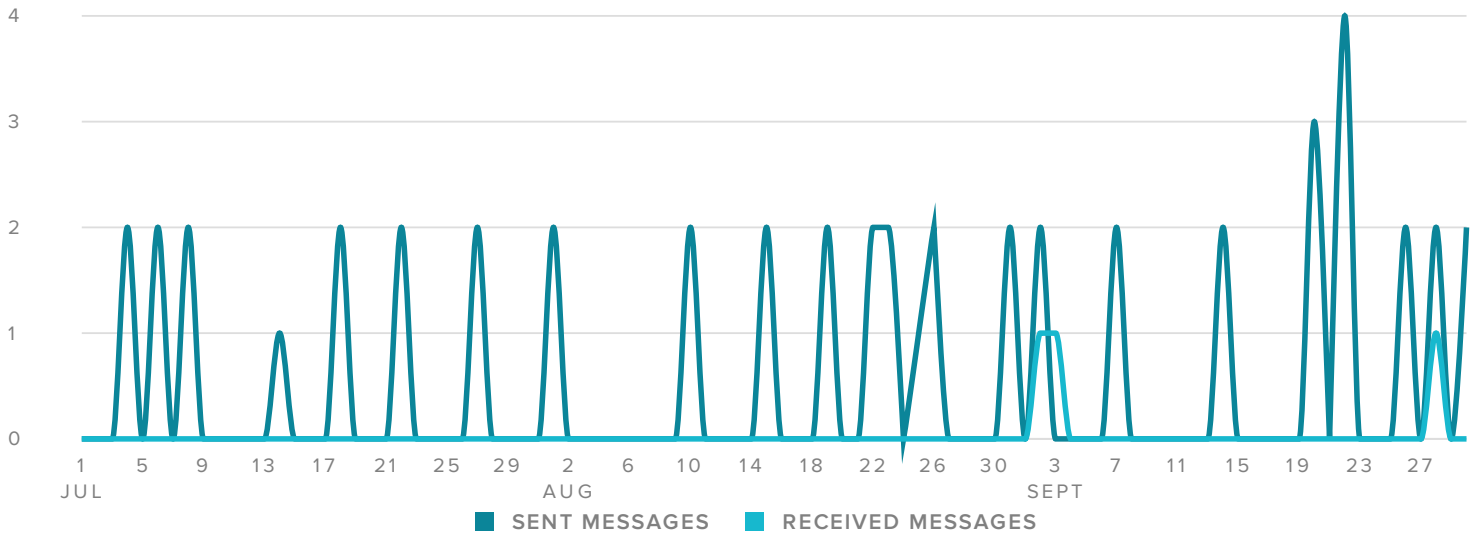
Total fans increased by

▲ 2.2%

since previous date range

Message Volumes

MESSAGES PER DAY



SENT MESSAGES METRICS	TOTALS	CHANGE
Facebook Posts Sent	25	▼ 10.7%
Twitter Messages Sent	24	▲ 14.3%
Total Messages Sent	49	—

The number of messages you sent increased by

since previous date range

RECEIVED MESSAGES METRICS	TOTALS	CHANGE
Facebook Messages Received	3	▼ 80.0%
Twitter Messages Received	—	▼ 100.0%
Total Messages Received	3	▼ 81.3%

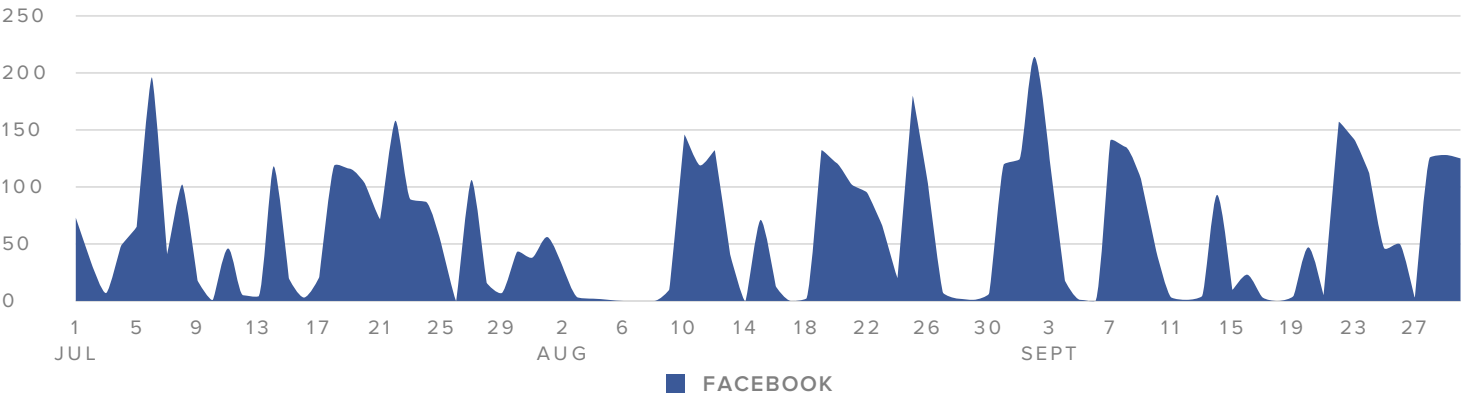
The number of messages you received decreased by

▼ 81.3%

since previous date range

Impressions

IMPRESSIONS PER DAY

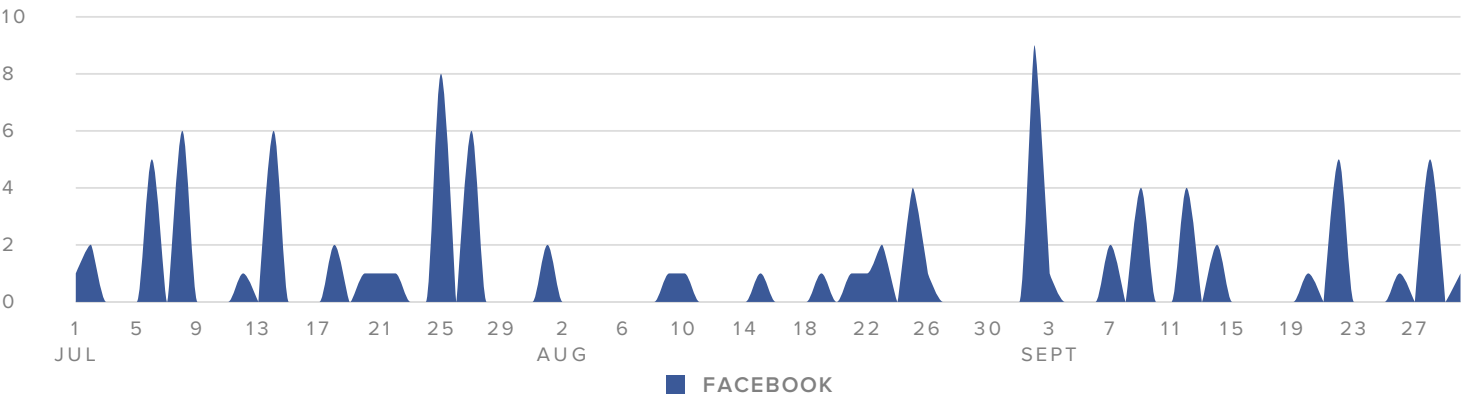


IMPRESSIONS METRICS	TOTALS	CHANGE
Facebook Impressions	5,379	▼ 73.7%
Twitter Impressions	–	–
Total Impressions	5,379	▼ 73.7%

Total Impressions decreased by
▼ 73.7%
since previous date range

Engagements





ENGAGEMENTS PER DAY



ENGAGEMENT METRICS	TOTALS	CHANGE
Facebook Engagements	90	▼ 75.5%
Twitter Engagements	–	–
Total Engagements	90	▼ 75.5%

The number of engagements decreased by
▼ 75.5%
since previous date range

Stats by Profile/Page

Profile/Page	Total Fans / Followers	Fan / Follower Increase	Messages Sent	Impressions	Impressions per Post	Engagements	Engagements per Post	Link Clicks
 Regional Cancer  Facebook page	237	2.16%	24	5,379	224	90	3.8	25
 Regional Cancer  @CJ_Oncology	–	100.00%	24	–	–	–	–	–



Facebook Pages Report

for Regional Cancer Care Associates, Central Jersey Division

Jul 01, 2016 - Sep 30, 2016

The Facebook Report gives you insight on all social activity across your Facebook accounts using a blend of Facebook Insights and proprietary metrics of our own.

Facebook Activity Overview



5,379
IMPRESSIONS



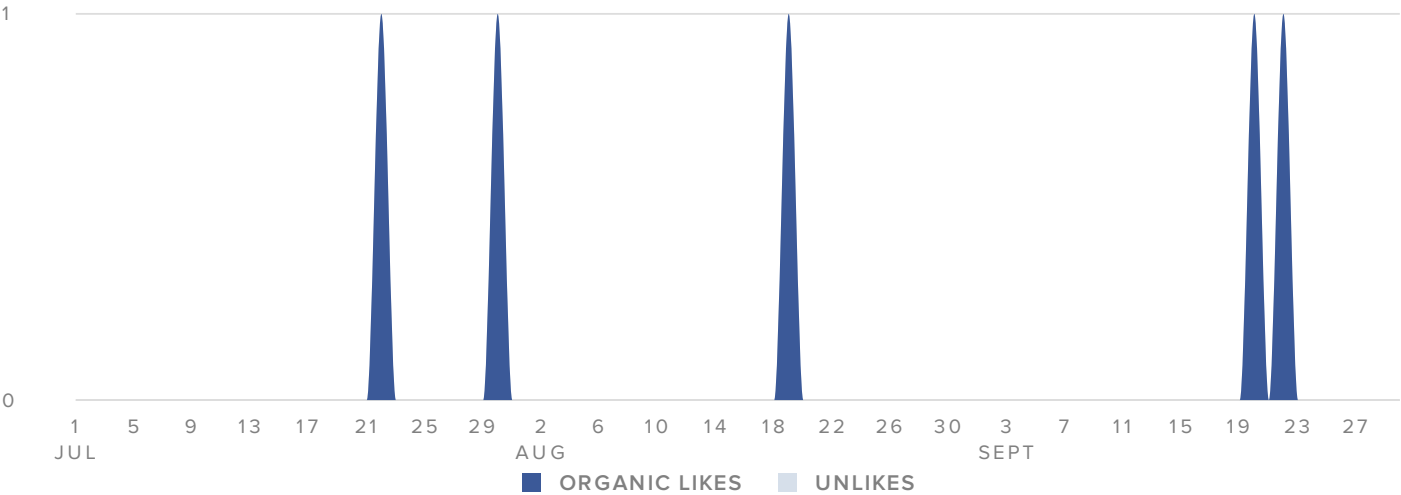
90
POST ENGAGEMENTS



25
LINK CLICKS

Audience Growth

LIKES BREAKDOWN, BY DAY

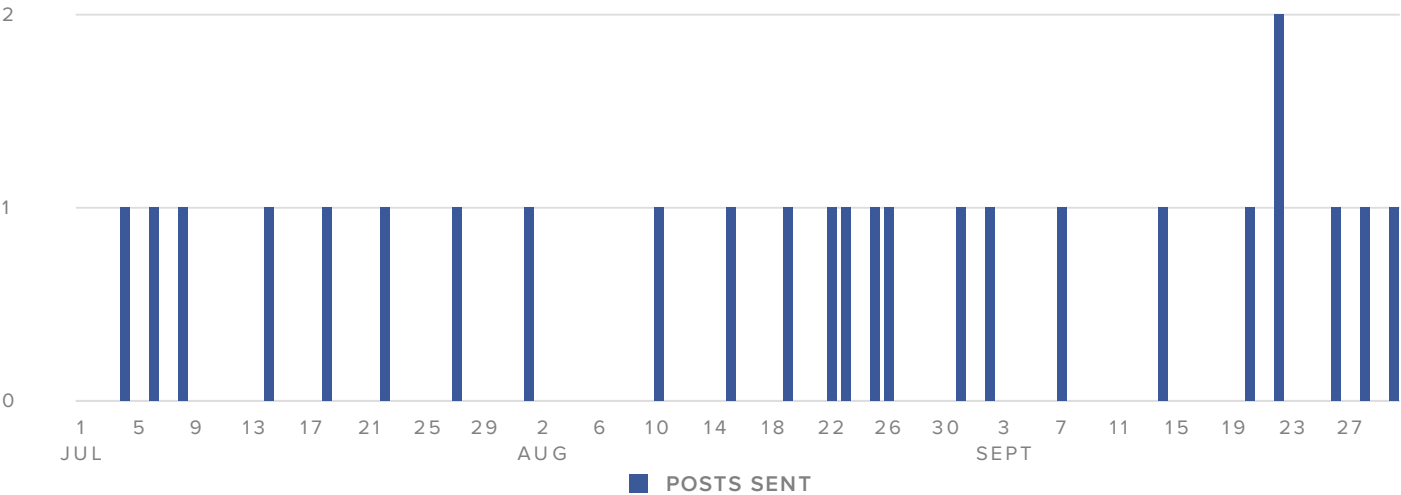


Audience Growth Metrics	Totals
Total Fans	237
Organic Likes	5
Unlikes	-
Net Likes	5

Total fans increased by
▲ 2.2%
since previous date range

Publishing Behavior

POSTS, BY DAY







PUBLISHING METRICS	TOTALS
Photos	9
Videos	–
Posts	16
Total Posts	25

The number of posts you sent decreased by

▼10.7%

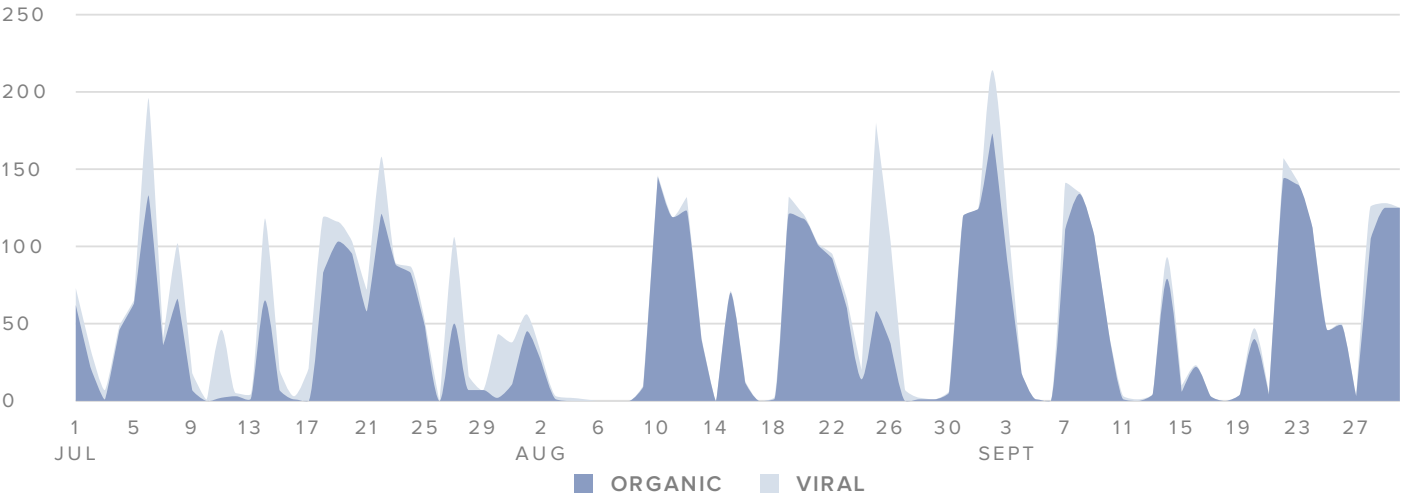
since previous date range

Top Posts, by Engagement

Post	Reactions	Comments	Engagement ▼	Reach
 <p>Regional Cancer Care Associates, Central Jersey Division</p> <p>We are proud to announce that each of our offices has achieved certification by the Quality Oncology Practice Initiative (QOPI®) Certification Program, an affiliate of the American Society of Clinical Oncology. In applying for certification, we participated in a voluntary, comprehensive site assessment against clearly specified standards that are consistent with national guidelines, and were successful in meeting the standards and objectives of the QOPI Certification Program. This certification reaffirms our commitment to providing our patients with high quality cancer care.</p> <p>QOPI Certification RCCA Central Jersey Division</p> <p>(Post) July 08, 2016 9:31 am</p>	5	—	13.8%	65
 <p>Regional Cancer Care Associates, Central Jersey Division</p> <p>After months of hard work, we are excited to announce the launch of our new website! You can now visit us at www.CentralJerseyRCCA.com. With this new site, we hope that all current and future patients will find important information and helpful tools more readily available to them. Thank you all for your continued support!</p> <p>Regional Cancer Care Associates' Central Jersey Division</p> <p>(Post) July 14, 2016 9:06 am</p>	5	—	12.2%	82
 <p>Regional Cancer Care Associates, Central Jersey Division</p> <p>You can't – and shouldn't – fight cancer alone. Here at RCCA – CJD we're not merely your doctors, we're your cancer care team. Visit us online for more cancer support resources:</p> <p>Providing Support for Cancer Patients in Central New Jersey</p> <p>(Post) July 27, 2016 9:31 am</p>	5	—	10.2%	59
 <p>Regional Cancer Care Associates, Central Jersey Division</p> <p>In honor of Thyroid Cancer Awareness Month, here's what you need to know:</p> <p>Warning Signs of Thyroid Cancer</p> <p>(Post) September 22, 2016 9:20 am</p>	1	—	8.8%	34

Page Impressions

PAGE IMPRESSIONS, BY DAY



IMPRESSIONS METRICS	TOTALS
Organic Impressions	4,405
Viral Impressions	974
Total Impressions	5,379
Users Reached	3,099

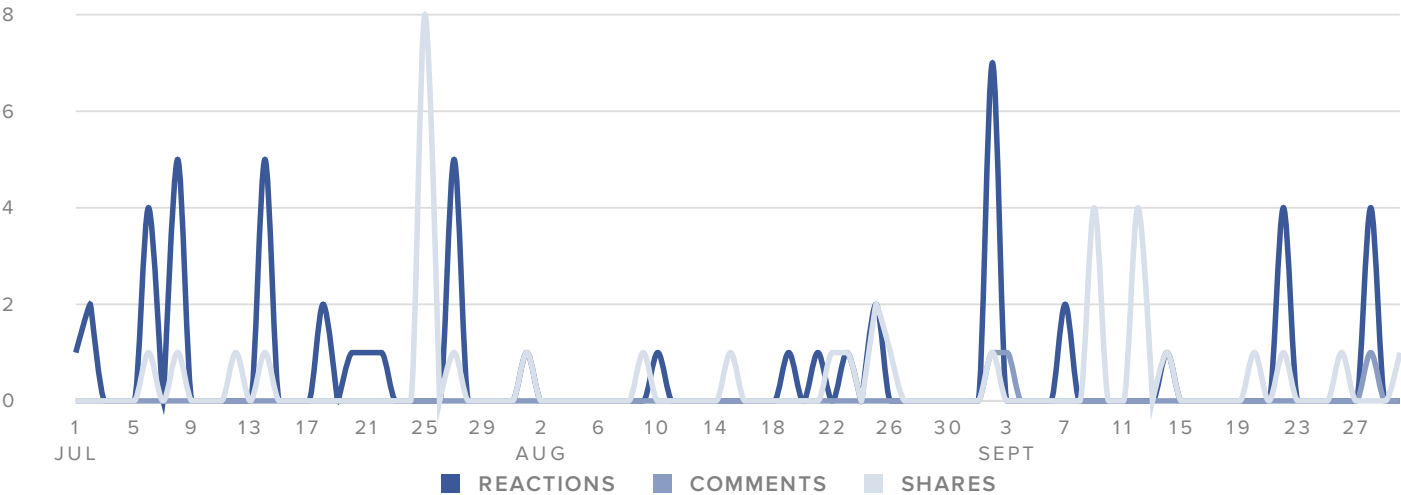
Total Impressions decreased by

▼73.7%

since previous date range

Audience Engagement

AUDIENCE ENGAGEMENT, BY DAY



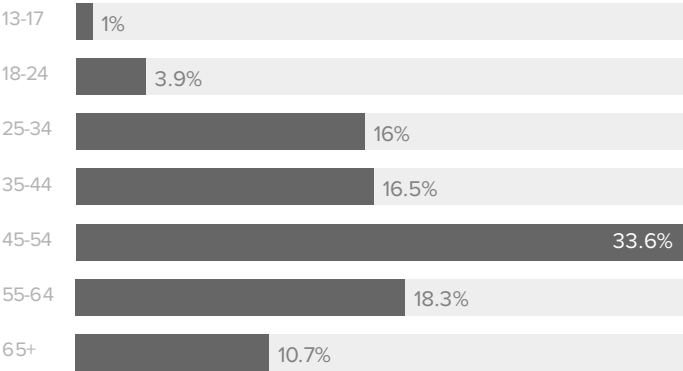
ACTION METRICS	TOTALS
Reactions	52
Comments	3
Shares	35
Total Engagements	90

Total Engagements decreased by
75.5%
since previous date range

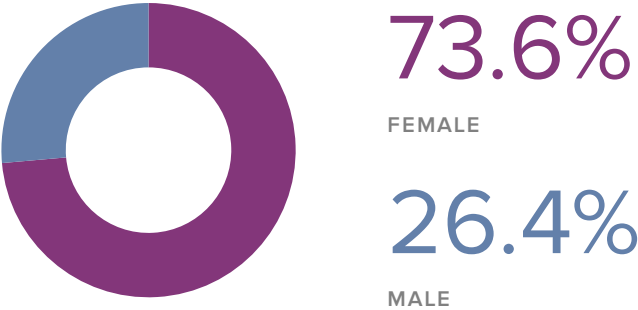
Demographics

PAGE FANS	PEOPLE REACHED	PEOPLE ENGAGED
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BY AGE




BY GENDER



Women between the ages of 45-54 have a higher potential to see your content and visit your Page.

TOP COUNTRIES		TOP CITIES	
United States	2,579	East Brunswick, NJ	284
India	43	Monroe Township, Middlesex County, NJ	138
United Kingdom	35	Edison, NJ	105
Peru	31	Sayreville, NJ	81
Qatar	20	New York, NY	68

Facebook Stats by Page

Facebook Page	Total Fans	Fan Increase	Posts Sent	Impressions	Impressions per Post	Engagements	Engagements per Post	Link Clicks
 Regional Cancer Care A..	237	2.16%	25	5,379	215	90	3.6	25

Progress Report

Regional Care Care Associates

September 14, 2016

Date of Recording: August 2, 2016

Staff Member Name: No Name

Key Points for Determining Strategy :



FAILING: **0-3** BELOW AVERAGE: **4-5** AVERAGE: **6-7** ABOVE AVERAGE: **8-9** EXCELLENT: **10**

OVERALL	8
GREETING	1
RESPONSE	1
TRACKING	2
PROCESS	2
CONVERSION	2

Notes and Suggestions:

GREETING

- 9:26 am call – voice-messaging system picked up & receptionist picked up call after 1st ring - she did not Offer her name but did ask “how may I help you?”
- Tom picked up transferred call (9:57) with “Hi, this is Tom” and used caller’s name immediately

RESPONSE

- Caller offered she was calling for mother regarding pelvic mass - receptionist asked if had biopsy
- She obtained basic reason for visit – she offered no expression of compassion
- Receptionist asked patient’s name – Thelma Prince – but did not use it once
- She did refer to patient as “Mom”
- She asked caller’s name – Carolyn – and used it once

- Caller asked Tom to hold while she answered other line – he was upbeat & accommodating

TRACKING

- Receptionist did not track this call
- Tom did properly ask tracking question – Internet search

PROCESS

- Receptionist obtain PCP information & doctor seen as CIJ
- Receptionist asked caller “hold one second” (8:54) without providing reason
- Tom used caller’s name four times during their conversation
- He did not use patient’s name
- He easily obtained demographic information
- He returned to on-hold call (25:14) with “Carolyn, you still there?” and was apologetic for hold
- He properly obtained insurance information

CONVERSION

- He confirmed could schedule mother for 2nd opinion consult appointment with records
- He advised caller where to fax reports & to have CIJ fax office notes to him
- Tom booked patient for 8/9/16 3:00 with Dr. Philip Reed
- He advised her he was mailing out new patient paperwork & obtained her mailing address
- Caller verified date/time of appointment
- He ended call with upbeat “My pleasure, hope it all works out”

RECOMMENDATIONS

- Receptionist should clearly state her name with greeting
- Offer small expression of compassion when hearing diagnosis or positive statement about RCCA
- Receptionist should have used patient’s name
- Always tell caller why being placed on hold
- Use more professional “May I place you on hold a minute?” and provide reason ex: checking schedule or Transferring you to...
- Tom should have used patient’s name during his conversation

OBSERVATIONS

- Tom has a wonderful manner on the phone

Progress Report

Regional Care Care Associates

September 14, 2016

Date of Recording: August 10, 2016

Staff Member Name: Alexandra

Key Points for Determining Strategy :



FAILING: **0-3** BELOW AVERAGE: **4-5** AVERAGE: **6-7** ABOVE AVERAGE: **8-9** EXCELLENT: **10**

OVERALL	6
GREETING	2
RESPONSE	1
TRACKING	1
PROCESS	1
CONVERSION	1

Notes and Suggestions:

GREETING

- 9:55 am call – voice-messaging system picked up after 2nd ring with message that all lines busy, please hold
- Alexandra picked up call (2:14) with “Hi, this is Alexandra”

RESPONSE

- Caller offered he was calling as diagnosed with prostate cancer, treated at Sloane/Kettering & looking for 2nd opinion on next treatment options – Alexandra responded with “OK” – no statement of compassion
- She asked him which doctor he wanted – he didn’t know & asked for recommendation
- Alexandra asked caller to “hold one second” (3:49) & returned (4:54) with “OK, sir?”
- Alexandra was positive about practice – all providers could treat his issue

TRACKING

- Alexandra did not track this call
- Caller offered later in conversation that he'd completed online form

PROCESS

- Alexandra explained process to obtain information & refer to Tom/New Patient Coordinator
- She confirmed that Tom could provide information about which doctor he should see
- She asked caller insurance question as first question in demographic gathering process
- She asked caller's name – Kevin Halloran – but did not use it once during this call

CONVERSION

- Caller was not appointed on this call
- Alexandra said information would be given to Tom to call back to appoint
- She asked caller to have his records sent over but did not provide fax information
- She ended call with upbeat "No problem, take care"

RECOMMENDATIONS

- Offer small expression of compassion when hearing diagnosis
- Always tell caller why being placed on hold
- Use more professional "May I place you on hold a minute?" and provide reason ex: checking schedule or Transferring you to...
- Ask caller's name early in conversation & use it 2-3 times during the call
- Always thank caller for holding when returning to call
- Ask tracking question early in conversation & obtained detailed source information
- Hold insurance question for later in demographic gathering process

Progress Report

Regional Care Care Associates

October 7, 2016

Date of Recording: September 6, 2016

Staff Member Name: Stacy/No Name

Key Points for Determining Strategy :



FAILING: **0-3** BELOW AVERAGE: **4-5** AVERAGE: **6-7** ABOVE AVERAGE: **8-9** EXCELLENT: **10**

OVERALL	8
GREETING	1
RESPONSE	1
TRACKING	2(existing patient)
PROCESS	2
CONVERSION	2

Notes and Suggestions:

GREETING

- 6:12 am call – voice-messaging system picked up, messaging picked up after 2nd ring with message to hold As all operators busy – this repeated 3 times. Stacy finally picked up call with polite “Hi, this is Stacy, can you Please hold?” (3:00). Call finally picked up again (6:39) with polite “thank you for holding” but no name.

RESPONSE

- Caller offered she was calling for October follow up appointment with specific provider
- Receptionist asked patient’s name – Rochelle Schwartz– but did not use it once
- Caller asked for East Brunswick location – No Name responded with upbeat “Let’s see what we can get For you”

TRACKING

- Not applicable – this was an existing patient call

PROCESS

- She advised caller they were booked out for first 3 weeks of October in East Brunswick
- She advised checking Somerset to explain pause

CONVERSION

- She booked patient for 10/6 2:40 in Somerset
- She thanked caller for her flexibility
- Caller verified date/time of appointment
- She ended call with “You’re welcome, bye-bye”

RECOMMENDATIONS

- Always provide your name when picking up on-hold call
- Receptionist should have used patient’s name
- End call with a professional “thank you for calling” or “have a good day”



Progress Report

Regional Care Care Associates

October 7, 2016

Date of Recording: September 8, 2016

Staff Member Name: Ashley

Key Points for Determining Strategy :



FAILING: **0-3** BELOW AVERAGE: **4-5** AVERAGE: **6-7** ABOVE AVERAGE: **8-9** EXCELLENT: **10**

OVERALL	8
GREETING	2
RESPONSE	1
TRACKING	2
PROCESS	2
CONVERSION	1

Notes and Suggestions:

GREETING

- 6:41 am call – voice-messaging system picked up, message picked up after 2nd ring with request to hold
As all operators busy – Ashley picked up call quickly with proper greeting

RESPONSE

- Caller offered she needed an appointment for son with Dr. Reed
- Caller asked if could “run something by you” – Ashley replied “sure” and then “gimme’ a second”
- Son has Cerebral Palsy & wanted to make sure they can do platelet counts – Ashley was upbeat & positive
With her reply “we take hematology patients all the time”
- Ashley asked patient’s name – Chester Smith – but did not use it once during this call
- She asked mother’s name – Zuana Ferrel – but did not use

TRACKING

- Caller offered tracking up front – referred to Dr. Reed
- Ashley pursued detailed information

PROCESS

- Ashley obtained lab information – caller has results & will fax over
- She also obtained PCP's information
- Mother advised she also looking for oncologist for follow-up care

CONVERSION

- This new patient was not converted on this call
- Ashley advised she would give all his information to New Patient Coordinator to call back to appoint
- She advised either Stacy or Tom will call to set up son & mother
- She ended call with "You're welcome, bye-bye"

RECOMMENDATIONS

- Don't use slang (gimme') use more professional "can you hold a moment while I ____?"
- Use patient's name 2-3 times during the conversation
- When applicable, also use caller's name
- End call with a professional "thank you for calling" or "have a good day"