

Example Vision Center

WEBSITE COMPLIANCE · WEBSITE SEARCH · WEBSITE PERFORMANCE

WEBSITE ANALYZED
examplevisioncenter.com

MAIN PAGES
74

AUDIT DATE
September 20, 2026
9:10 AM CDT

13 CATEGORIES · 265 CHECKS · 97 ISSUES FOUND · 5,097 OCCURRENCES

CATEGORY	CHECKS	ISSUES	OCCURRENCES
ADA Compliance (WCAG 2.2 AA)	61	28	67
Security & HIPAA	45	8	17
Booking & Conversion	21	12	611
Content Quality	19	4	79
Local Presence & Reputation	19	3	304
SEO & Local Rankings	25	10	129
Technical HTML	21	17	3,828
Mobile Experience	7	1	1
User Experience	11	1	1
Design & First Impression	6	1	1
Performance	9	6	17
AI Search Readiness (ChatGPT & Google AI)	17	6	42
Trust & Credibility	4	0	0

YOUR AUDIT CONTACT

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This audit is independently conducted by the OptiSite + Lunovus team.

How this website wins or loses patients

The findings in this report, organized around a new patient's path from first search to booked appointment. Counts, severities and occurrences are measured on your live site; nothing here is weighted or scored.

88

issues in the patient's path

4,954

places observed across the site

3

patient actions observed blocked

DISCOVERY**24 issues****EVALUATION****20 issues****DECISION****31 issues****BOOKING****13 issues****EXISTING PATIENT****0 issues****Discovery**

Search, maps and AI answers

Biggest barrier: No practice-listing data that search engines can read

⚠ 24 issues · worst: HIGH**Evaluation**

Services, doctors and information

Biggest barrier: A patient follows a link on the site and lands on a page that does not exist

✖ A blocked step was observed**Decision**

Trust, credentials, accessibility, privacy

Biggest barrier: A patient using a screen reader is not told what to type in some form fields

⚠ 31 issues · worst: HIGH**Booking**

Scheduling, calls, mobile, directions

Biggest barrier: A patient taps a button on the site and lands on a page that does not exist

✖ A blocked step was observed**Existing Patient**

Patient portal and forms

✓ No barriers found

The barriers that matter most

Ranked by patient impact: a step a patient was observed unable to complete outranks everything, then severity, then how many places it appears.

HIGH

Patient information

OBSERVED BLOCKED

Evaluation

A patient follows a link on the site and lands on a page that does not exist

23 broken links on this site — 2 images, 21 links (404 / unreachable) · observed in 23 places

Ref technical.broken-links

HIGH

Booking

OBSERVED BLOCKED

Booking

A patient taps a button on the site and lands on a page that does not exist

1 call-to-action link broken — witnessed

Ref conversion.cta-broken-witnessed

LOW

Booking

OBSERVED BLOCKED

Booking

A patient taps Book or Call and is sent somewhere other than where the button said

No first-party CTAs detected on the homepage — nothing to click-verify

Ref conversion.cta-click-through-verified

HIGH

Local search

Discovery

No practice-listing data that search engines can read

No practice-listing data that search engines can read · observed in 76 places

Ref local.localbusiness-schema

HIGH

Accessibility

Decision

A patient using a screen reader is not told what to type in some form fields

Some form fields have no label or instructions · observed in 5 places

Ref ada.form-labels-present

HIGH

Accessibility

Decision

Interactive element(s) are not operable by keyboard - witnessed at 2 selector(s)

Interactive element(s) are not operable by keyboard - witnessed at 2 selector(s) · observed in 2 places

Ref ada.keyboard-inoperable

Every finding behind these two pages appears in full — category by category, with evidence — in the sections that follow.

Complete List of Checks & Results

We analyzed your entire site — every page we could reach — and the results are listed below, organized by section in the same order as the summary table on the cover. Each section heading carries two numbers: how many problems we found, and how many things we checked. Both match the rows printed beneath, so you can count them yourself. Where a flagged check speaks for only part of what it examined, the row says how much of it was clear.

-  **High** — A patient is blocked: they cannot read it, cannot use it, cannot reach you, or their information is exposed. Fix first.
-  **Medium** — Nobody is blocked, but it is costing you patients — slower, harder, or riskier than it should be. Fix next.
-  **Low** — Worth cleaning up when your web team is in there anyway.
-  **Clear** — We tested this and watched it work. (Not a legal certification.)
-  **Nothing found** — We looked for this problem and did not find it. Good news, but not the same as proof.
-  **Manual review** — Our scan could not settle this one: some checks need a person to look, and a check that ran without turning anything up proves nothing either way. Not counted against you.

ADA Compliance (WCAG 2.2 AA)

28 findings · 61 criteria

Scope: WCAG 2.2 Level A and AA. Level AAA is not assessed and is not required by law.

Issues we found 17 criteria

-  **1.1.1** Some images on your site have no written description, so a screen reader tells a blind patient nothing about them
-  **1.3.5** Some form fields give the browser no autofill hints, so patients must type everything by hand
-  **1.4.11** Some buttons or form borders are too faint to see, so patients miss them
-  **2.1.2** Tab gets stuck inside part of the page with no way back out, stranding a patient who cannot use a mouse
-  **2.2.2** Moving content cannot be paused, which blocks patients who read slowly
-  **2.4.4** Some link text does not say where it goes, so screen-reader users hear "click here"
-  **3.2.4** The same function is called different things on different pages, which confuses patients
-  Accessibility statement and barrier-reporting contact
-  New-tab links announce that they open a new window
-  **1.3.1** Some of your pages are not coded with headings or regions, so a screen reader can only read them straight through with no way to skip ahead
-  **1.4.10** Some pages force side-to-side scrolling on a small screen, so patients read one half of a sentence at a time
-  **2.1.1** Parts of your site cannot be reached without a mouse, which locks out patients who navigate by keyboard alone
-  **2.2.1** A time limit cannot be extended or turned off, so a patient who fills in a form slowly loses everything they typed
-  **2.4.1** There is no working skip link, so a patient using Tab has to step through the entire menu on every single page
-  **2.4.6** Some headings or labels do not say what they are for, so a patient scanning the page cannot tell what each section or field wants
-  **4.1.2** A control does not report itself properly to a screen reader, so a patient using one cannot operate it
-  Patient intake forms offered as HTML, not PDF-only

Working as it should 18 criteria

-  **1.3.2** A screen reader reads your content in an order that makes sense
-  **1.3.4** Your site works held either way up
-  **1.4.3** Text stands out clearly from its background
-  **1.4.5** Your text is real text, not pictures of words
-  **1.4.13** Pop-ups that appear on hover can be dismissed and stay put
-  **1.3.3** Instructions do not rely on shape or position alone
-  **1.4.1** Meaning is never carried by colour alone
-  **1.4.4** Patients can enlarge the text without breaking the layout
-  **1.4.12** Your layout holds when patients space text out to read it
-  **2.4.2** Every page has a title that says what it is

- ✓ **3.1.1** Every page declares its language so screen readers pronounce it correctly
- ✓ **3.2.3** Your navigation stays in the same place on every page
- ✓ **4.1.3** A screen reader announces status messages as they appear

- ✓ **3.1.2** Passages in another language are marked as such

- ✓ **3.2.6** Help and contact details sit in the same place on every page

- ✓ Password fields allow paste

Human review required 26 criteria

- 👁 **1.2.1** Written versions of audio and silent video

- 👁 **1.2.3** Spoken descriptions and written transcripts for video

- 👁 **1.2.5** Spoken description of the action in recorded video

- 👁 **2.1.4** Controls for single-key shortcuts

- 👁 **2.4.3** The order pressing Tab moves through the page

- 👁 **2.4.7** The highlight showing where Tab has landed

- 👁 **2.5.1** Alternatives to complex gestures

- 👁 **2.5.4** On-screen alternatives to shaking or tilting the phone

- 👁 **3.2.1** What happens when a patient selects something

- 👁 **3.3.1** How forms report errors

- 👁 **3.3.3** Whether forms suggest how to fix mistakes

- 👁 **3.3.7** Whether patients must re-enter information

- 👁 Accessibility engine (axe-core) completes on every crawled page

- 👁 **1.2.2** Captions on videos with sound

- 👁 **1.2.4** Captions on live video

- 👁 **1.4.2** Controls for auto-playing audio

- 👁 **2.3.1** Flash rates on your site

- 👁 **2.4.5** Ways to find pages on your site

- 👁 **2.4.11** Whether whatever Tab lands on stays visible

- 👁 **2.5.3** How button text matches its spoken name

- 👁 **2.5.7** Alternatives to drag actions

- 👁 **3.2.2** What happens when a patient fills in a field

- 👁 **3.3.2** Labels on your form fields

- 👁 **3.3.4** Review and undo before important submissions

- 👁 **3.3.8** What signing in requires

- 🔄 Linked PDF documents are tagged and readable by assistive technology

Issues we found 13 checks

- Parts of your secure pages load over an insecure connection, so browsers show a broken padlock and may block those parts from loading at all
- Nothing stops a compromised page from submitting your forms to another server, so patient details typed into your form could be delivered somewhere you never approved
- Staff email addresses are readable in your website code, where harvesting bots collect them for phishing
- An obsolete security header is still being sent; modern browsers ignore it and older ones can misbehave
- Nothing stops someone sending email that appears to come from your practice, and nothing tells you it happened
- Any certificate authority can issue a security certificate for your domain, so a forged certificate for your site would look valid in a patient's browser
- Patient information is leaving your site inside tracking data, going to vendors with no clinical reason to receive it
- Your content policy is loose enough that injected code could still run, so the policy is present but not doing the job it exists for
- Return visitors are not forced onto the secure version of your site, so a patient's first request each visit can still travel unencrypted and be read in transit
- Some links that open a new tab can be hijacked by the page they open, which can quietly replace your site with a copy that harvests patient details
- Some cookies on your site are set without their standard safety flags, so another site can read them and reuse a patient's session
- Your domain records are not signed, so they cannot be verified as authentic
- Your homepage bounces through extra redirects before it loads, costing every patient a delay on every visit

Working as it should 32 checks

- ✓ Patient tracking witnessed on this scan stays within vendors that support HIPAA agreements — whether one is signed is a records check, not a scan result
- ✓ Your site uses a secure (padlock) connection
- ✓ Patient forms send their data over a secure connection
- ✓ Your server sends the standard browser protections
- ✓ Cross-site cookies are only sent over a secure connection
- ✓ Scripts loaded from other companies are checked for tampering before they run
- ✓ Email claiming to be from your practice can be verified as yours
- ✓ Address redirects are permanent, so search rankings carry over
- ✓ Address redirects reach the right page in one step
- ✓ Only the canonical hostname responds — legacy hosts (staging, blog, prior-brand) are decommissioned
- ✓ Any old address still online sets cookies safely
- ✓ Your homepage redirects stay on a secure connection the whole way
- ✓ The homepage opens without breaking its own content policy
- ✓ No advertising trackers run on your booking or portal pages
- ✓ Your security certificate grades well on an independent test
- ✓ A privacy notice sits beside every form that asks for patient information
- ✓ Login and session cookies are locked down
- ✓ Your server does not announce which software version it runs
- ✓ Your site does not advertise what software built it
- ✓ Every URL variant (http/https × www) redirects to the canonical URL
- ✓ Address redirects never drop a visitor onto an insecure connection
- ✓ Every version of your address shows the same practice name, phone and city
- ✓ Any old address still online carries the same protections
- ✓ The code libraries your site runs have no publicly known security holes
- ✓ Nothing loads insecurely when the homepage opens in a real browser
- ✓ Your error page does not reveal how your server is built

- ✓ The portal's certificate is not expiring in the next two weeks
- ✓ No third-party CRM vendor needing a HIPAA agreement was detected on this scan

- ✓ The portal's certificate has more than six weeks left
- ✓ Analytics do not run on portal, appointment or billing pages

Booking & Conversion

10 issues · 21 checks

Issues we found 10 checks

- A button on your site leads to a page that does not exist, so every patient who presses it hits a dead end
- There is no patient portal or sign-in link on your site, so returning patients phone the front desk for things they could do themselves
- Patients have no way to reorder contacts from your site, so every reorder costs staff time on the phone
- Your site does not mention payment options for patients without vision coverage, so those patients assume they cannot afford you
- Phone and a form are the only ways to reach you, so patients who prefer to book online go somewhere that lets them
- Your site does not say whether each location is wheelchair accessible, so a patient who needs to know has to call and ask
- The difference between vision-plan and medical billing is unexplained, which causes billing disputes
- You list carriers but never say what each plan covers, so patients still have to call
- Telehealth is offered without the disclosures state rules require, which is a licensing exposure as well as a patient one
- A Book or Call button sends patients somewhere other than where it says, so bookings are being lost at the click

Working as it should 11 checks

- ✓ You can see where your patients come from
- ✓ Appointment forms ask only what is needed to book
- ✓ You name the specific carriers you accept
- ✓ Patients can request an appointment without calling
- ✓ Your site speaks to patients who have never been in
- ✓ Tapping your phone number dials the number shown
- ✓ Your booking form is short enough that patients finish it
- ✓ Patients can see which insurance you accept
- ✓ Your cancellation and rescheduling policy is published
- ✓ Your portal link goes straight to your practice's sign-in
- ✓ Your booking essentials — button, form, hours and phone — are all present

Issues we found 4 checks

- Your site has no terms of service link, so nothing sets the rules for how patients may use the site
- Some blog posts are not structured for search engines to feature, so they never appear in the answer boxes above the results

● Your clinical pages carry no medical disclaimer, so nothing separates general information from personal medical advice

● Some pages share the same title, so search engines cannot tell them apart — found on 6 of 76 pages

Working as it should 15 checks

- ✓ Your privacy policy is linked from the site
- ✓ Your homepage shows reasons to trust the practice
- ✓ Doctor bios carry credentials and a photo
- ✓ Your content reads at a level general patients can follow
- ✓ Your site answers common patient questions
- ✓ Your blog has recent posts
- ✓ Every page has its own search-result summary, the grey text under your listing on Google
- ✓ No placeholder or filler text is left on your pages
- ✓ Your HIPAA Notice of Privacy Practices is published
- ✓ Your doctors have bio pages
- ✓ Your doctor bios meet the bar Google sets for health content
- ✓ Each core service and condition has its own page
- ✓ Patients can find out what to do in an eye emergency
- ✓ Blog posts lead readers toward booking
- ✓ Your footer year is current

Local Presence & Reputation**Issues we found** 4 checks

- Your practice details are not published in a form Google can read directly, so Google has to guess your name, address and hours
- Your hours are not published in a form Google can show in search results, so your listing appears without them

● No patient reviews appear on your site, which is the first thing a new patient looks for

● You are linked on very few social platforms, which weakens the signals search engines use to confirm you are a real, active practice

Working as it should 15 checks

- ✓ The city named in your page text matches the city in your page data
- ✓ Your reviews are coded the way Google requires before it will show star ratings
- ✓ Your name, address and phone match on every page
- ✓ The address on your Google listing matches the address on your site
- ✓ Your social profiles are linked from the site
- ✓ Your directions links work in every browser
- ✓ Addresses in your page text match your footer address
- ✓ Your page data tells search engines exactly where you are and
- ✓ Every doctor on your team page is identified to search engines
- ✓ Patients can find you on a map from your site
- ✓ The phone on your Google listing matches the phone on your site
- ✓ Your opening hours are published on the site
- ✓ Patients can get directions to each office in one tap
- ✓ Your ZIP codes match postal records
- ✓ Your city names match postal records for their ZIP

Issues we found 7 checks

- Your homepage's search-result title is missing your practice, city or service, and that line is what patients read before deciding to click
- Some pages exist that nobody can reach by clicking from your homepage, so neither patients nor search engines find them
- Some pages in your sitemap point search engines somewhere else, so the sitemap sends a signal your pages then contradict
- Your homepage content only appears after scripts run, which some search engines never wait for
- A service page does not name its service in the title or heading, so search engines cannot tell what the page is for
- A page has no search-result summary, so Google writes the grey text under your listing itself from whatever it finds on the page
- A service page misses its subject in some of the places search engines look, so it ranks below pages that cover all of them

Working as it should 18 checks

- ✓ Your site covers the services and conditions patients search for
- ✓ Your pages link to each other enough for patients and search engines to find them
- ✓ Your pages point search engines at your own domain
- ✓ Pages other than your homepage are allowed to appear in search results
- ✓ Your homepage headline names your practice or your city
- ✓ Pages that report success actually have content on them
- ✓ Your service pages are allowed to appear in search
- ✓ Your worthwhile pages are listed in the sitemap
- ✓ Your homepage images use modern formats that load faster
- ✓ Your pages show a proper preview when shared on social media
- ✓ Each page tells search engines which address is the real one
- ✓ Your homepage is allowed to appear in search results
- ✓ Each page has exactly one headline
- ✓ Your biggest homepage headline is a real heading search engines can read
- ✓ Your server does not block the homepage from search
- ✓ Your sitemap and your pages agree on what search engines may index
- ✓ Your web addresses are clean, with no leftover template text
- ✓ No obsolete keyword tags cluttering your pages

Issues we found 7 checks

- Some links on your site point at pages that do not load, so patients hit dead ends and search engines lose confidence in the site
- Your homepage has no search-result summary, so Google writes the grey text under your listing itself from whatever it finds on the page
- Some of your pages use obsolete web code that browsers are phasing out, so parts of the site will break as browsers update
- Your site loads code from outside companies we could not identify — recognized vendors like Google are documented, these are not — so no one can say what they do or what information about your patients they collect; your web team should be able to name each one
- Some images across your site have no written descriptions, so a screen reader tells a blind patient nothing about any of them
- Different addresses show the same content, which splits your search ranking
- Some of your search-result summaries get cut off in Google, so the sentence meant to win the click ends mid-thought

Working as it should 14 checks

- ✓ Your homepage has a title
- ✓ The address submitted for this audit serves a real page
- ✓ Your site has an icon for browser tabs and bookmarks
- ✓ Your site gives search engines crawling instructions
- ✓ Your pages declare their text encoding, so special characters display correctly
- ✓ Your homepage loads without code errors
- ✓ Your homepage loads cleanly in the browser
- ✓ Image descriptions say what the picture actually shows
- ✓ Your page titles fit in search results without being cut off
- ✓ Search engines are allowed to read your site
- ✓ Your crawling instructions point search engines at your sitemap
- ✓ Each analytics tag fires once per page
- ✓ Everything your homepage asks for loads successfully
- ✓ Addresses that do not exist correctly report as missing

Mobile Experience

1 issues · 7 checks

Issues we found 1 check

- Some of your pages do not rearrange properly on a narrow phone screen, so content is clipped or pushed out of reach

Working as it should 6 checks

- ✓ Your homepage is set up to adapt to a phone screen
- ✓ Your text is comfortable to read on a phone
- ✓ Your layout adapts properly on a real phone screen
- ✓ Every page is set up to adapt to a phone screen
- ✓ Patients can tap your phone number to call
- ✓ No part of your page is locked to desktop width

Issues we found 1 check

- Your error page is a dead end with no way back, so a patient who takes one wrong turn leaves

Working as it should 10 checks

- ✓ Patients can tap your homepage phone number to call
- ✓ Patients see a clear next step without scrolling
- ✓ Nothing plays sound at patients when a page opens
- ✓ Your phone number is one tap away across your site
- ✓ Your error page shows something
- ✓ Your menu stays reachable as patients scroll
- ✓ There is a clear path to book an appointment online
- ✓ Background video behaves properly when a page opens
- ✓ Text stays visible while your fonts load
- ✓ Clicking your portal link lands patients on a visible sign-in

Design & First Impression

Working as it should 6 checks

- ✓ The first screen tells patients where they are and what to do next
- ✓ Your opening image leaves room for real content
- ✓ Patients can pinch to zoom on your pages
- ✓ Your practice name is visible without scrolling
- ✓ Patients can see how to contact you without scrolling
- ✓ Your body text is a comfortable size to read

Performance

Issues we found 4 checks

- A page type loads too slowly on mobile to meet Google's bar, so those pages rank below faster ones
- Patients stare at a blank screen too long to meet Google's bar
- The main content takes too long to appear to meet Google's bar, and patients leave before it does
- Your homepage images load in an order that delays what patients see first, so the page feels slower than it actually is

Working as it should 5 checks

- ✓ Images further down the page wait to load until patients scroll to them
- ✓ Your homepage images are no bigger than they need to be
- ✓ Outside scripts on your homepage stay within a reasonable size
- ✓ No scripts hold up your page while it draws
- ✓ Only the image patients see first loads immediately

Issues we found 8 checks

- Your site is missing page data types a practice should have, so AI assistants cannot confirm basics like your doctors, services and hours
- Your name, address and phone do not appear on every page, so an AI assistant reading one page cannot tell whose practice it belongs to
- Some of your service pages describe the service but never answer what patients actually type into Google - what it costs, whether it hurts, how long recovery takes
— found on 5 of 6 service pages
- Your site has no guide file telling AI assistants what your practice does, so they work it out from scratch every time
- Some of your pages carry no summary for AI assistants and link previews to quote, so both write their own from whatever text they happen to find
- Some of your condition pages skip what patients search for most - what it costs and how long recovery takes - so those searches land on someone else's site
— found on 6 of 8 condition pages
- Your question-and-answer content is not coded in the form AI assistants read, so they quote another practice instead
- Your site does not link to the directories patients and AI assistants check, so those sources stay unconnected to you

Working as it should 9 checks

- ✓ Your practice details are published in a form AI assistants can read
- ✓ Your practice name is spelled the same way everywhere
- ✓ Your pages answer questions in the form patients actually ask them
- ✓ Your page data is error-free
- ✓ Your page data is there the moment the page loads
- ✓ Your doctors are described in a form AI assistants can read
- ✓ AI assistants are allowed to read your site
- ✓ Your health content names the doctor behind it
- ✓ Clinical terms on your site are paired with the words patients use

Trust & Credibility

0 issues · 4 checks

Working as it should 4 checks

- ✓ Your accessibility statement matches what this audit actually found
- ✓ Every number patients can tap is also written on the page
- ✓ The phone number in your page text matches your footer
- ✓ Your booking button is there the moment the page loads

What you get every month — \$199/month ~~regularly \$299~~

Replaces what you currently pay for hosting and upkeep. **No tiers, no add-ons.**

- | | |
|--|--|
|  Google Business Profile updated monthly
New photos, posts and hours checked, every month. What patients see when they Google you. |  Monthly social media posts
Posts written and published across your channels, matched to the site campaign. |
|  One campaign topic, across your pages
A themed campaign each month, rewritten across the pages it touches. |  One new blog article per month
A patient-focused article tied to the campaign topic. Written for you, published on your site. |
|  Website edits whenever you ask
Edits, new pages, updates. No request form, no per-change charge. |  Monthly website audit and fixes
Every month we run this same audit on your new site and fix anything it finds — your site stays compliant as the rules change. |
|  Hosting, security and software updates
Fast, secure, maintained. Patches applied, no separate hosting bill. |  A real person to call
A real one who knows your practice. Not a queue. |

Every item above is included for every Optisite practice — one plan, one price, designed and hosted by the team behind this Lunovus Exclusive Website Audit.

THE CURRENT OFFER

\$1,000 to start ~~\$2,000~~
IF SIGNED BY OCTOBER 31, 2026

\$1,000 off the initial build fee — normally **\$2,000**, currently **\$1,000 to start** if signed by October 31, 2026. Then **\$199/month** ~~regularly \$299~~, replacing what you already pay for hosting and upkeep. The initial build fee is due when you approve the finished site.

Put another way: a full year of the plan costs about what most practices already spend on hosting and upkeep — the difference is a site actually built to the standards in this report.

The questions practices ask when they see a report like this

Q1 My website still works — why are there so many issues?

Because "works" and "ready" aren't the same thing anymore. Your site loads and the phone rings — nothing here says it's broken. This measures whether it meets what patients, Google, and AI search judge it by *today*: accessibility law, mobile-first design, speed, AI-readiness — most of which arrived in just the last few years. A site built before then can run fine and still fall short.

Q2 Did you inflate this list just to sell me a rebuild?

Fair question. Every measured finding is something you can re-run yourself — accessibility (axe-core), speed (Google PageSpeed), security (SSL Labs), markup (HTML standards validation) — each against its own published standard, using the tool named on the finding. The full tool-by-tool methodology is in the technical sheet your web team receives. A tool checked your pages against published standards; we didn't hand-pick scary items. And yes — the team behind this audit (Optisite, part of Lunovus) also builds the rebuild, so we'd benefit if you say yes. We show you the verifiable audit anyway.

Q3 Are these real problems, or just things a computer flags that don't matter?

They're real, and weighted. Findings labeled **Measured** are concrete failures against a published standard — a missing form label, an unencrypted page, an image a screen reader can't use. Items labeled **AI Analysis** are context only and *don't* affect your score. And anything a person must confirm is flagged for review, not counted against you.

Q4 Do I have to fix all of these at once? It feels overwhelming.

No. The 97 issues across 12 of the 13 categories every modern practice site is judged on show the *shape* of the problem, not a to-do list. Patching them one at a time is slow, and it tends to fall behind again as the rules change — the more practical fix is one rebuild that meets the standards all at once and then stays current. The good news is it's not a list you have to keep on top of. That part's on us.

Q5 Could I actually get sued over the accessibility items?

It's a real and rising risk for healthcare sites. Law firms run automated scans — the same kind used here — for the exact failures in your Compliance section, then send demand letters, and healthcare is one of the fastest-growing targets. We can't give legal advice, but the practices that get targeted are almost always the ones whose sites were never brought up to the standard in the first place.

Q6 How much does it cost to fix — and why \$199/month?

\$199/month covers hosting, security, and keeping you compliant as the rules change — for most practices that replaces what they already pay separately for hosting and upkeep, close to a wash. \$1,000 is currently off the initial build fee — \$1,000 to start instead of \$2,000, and \$199/month instead of \$299, for practices who sign by October 31, 2026. The build fee is due when you approve the finished site, and nothing is owed before that.

Q7 Will my site go down or lose its Google ranking during the switch?

No — the part practices worry about most is the part we handle most carefully. We build the new site first, you review it and only go live once you're happy, and your address, content, and search presence carry over. A rebuild that fixes speed, mobile, and structure typically *helps* ranking.

Q8 What if I just leave it as it is?

Nothing breaks tomorrow, which is why it's easy to put off. The cost is the patients you never see — the ones who land on a faster, easier-to-book practice instead. And the gap widens every month as the standards change.

Q9 Who is Optisite, and what happens after the site launches?

Optisite is the rebuild service behind this audit, part of Lunovus — which has built and supported eye-care and healthcare sites for two decades, across 3,500+ practices. After launch, the monthly service keeps your site to standard as the rules change.

END OF REPORT

You've seen exactly where Example Vision Center stands.

Every finding in this report is measured, sourced, and yours to verify.
The next step is a free, no-obligation preview of what a fully ready
site looks like for your practice — built around the issues found
here.

[Schedule Your Free Preview →](#)

HAVE A WEB TEAM WHO CAN IMPLEMENT FIXES?



[Open the Technical Audit →](#)

*A deep-dive on every issue this scan found and how to fix each
one — free to hand off to your current developers.*



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Lunovus Exclusive Website Audit Tool



This audit is independently conducted by the Optisite +
Lunovus team.

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