

Stabilization Phase Roadmap (Weeks 4–8)

Weeks 4–8 are where you stop merely surviving and start **reducing friction**: fewer decisions, smoother sessions, and less end-of-day cleanup. The goal is consistent pacing and documentation that doesn't require heroics.

Week range	Primary goal	Weekly focus (minimum viable)	Scripts / cues
Weeks 4–5 Standardize	Create repeatable session structure and reduce decision fatigue.	<ul style="list-style-type: none"> • Build 3 “default flows” (e.g., shoulder, low back, knee) and run them repeatedly. • Create a 2-minute start you do every visit: last visit → today’s target → success marker. • Pick one documentation shortcut to practice (template, smart phrases, copy-forward appropriately). • Identify your top 2 time leaks and remove one. 	<ul style="list-style-type: none"> • Start cue: “Today we’re focusing on X; success is Y.” • Self cue: “If I can’t explain the plan in 1 sentence, it’s too complex.”
Weeks 6–7 Tighten	Improve transitions; keep notes from piling up.	<ul style="list-style-type: none"> • Document in micro-bursts (one sentence after each block). • Use one objective anchor each visit (reps/weight/time/distance/ROM). • Run 1 peer/mentor “chart review” per week (10 minutes). • Practice saying “no” to unnecessary extras (extra 	<ul style="list-style-type: none"> • Time boundary: “We’ll save that for next time so we stay on schedule.” • If behind: “Simplify to 2–3 key drills, reassess, plan.”

Week 8
Stabilize your metrics

Be predictable to the system:
reliable pace, reliable notes,
reliable communication.

exercises, extra education
tangents).

- Choose 2 personal metrics to track (e.g., notes closed by end of day; % sessions ending on time).
 - Close the loop every visit: progress + next step + attendance expectation.
 - Build a “hard case” routine: identify → plan → debrief.
- **To patient:** “Here’s what improved, here’s what we’re building next.”
 - **To mentor:** “My bottleneck is X—what’s one change you’d make?”

By the end of Week 8, “good” looks like:

- You have **repeatable session flows** and can adapt them without starting from scratch.
- You finish most days with **minimal documentation backlog** (no multi-day accumulation).
- Your average session ends with a clear **reassess + plan** (patients know what they’re doing and why).
- You can name your top bottleneck and have a plan to address it (instead of just feeling “busy”).

Red flags (address immediately):

- **“I’m still reinventing every visit”** → create 3 default flows and run them for 2 weeks before refining.
- **Notes still taking 2–3× longer than the visit** → shorten subjective, use one objective anchor, document during transitions.
- **Regularly skipping reassess/plan** → set a hard “final 2 minutes” alarm habit; keep closing script consistent.
- **Avoiding feedback** → schedule a recurring 10-minute weekly chart review with one specific question.