Stabilization Phase Roadmap

Weeks 4–8 | From Classroom to Caseload

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 / Goal	Weekly Focus (Minimum Viable)	Scripts & Cues
Weeks 4–5 Standardize Create repeatable session structure and reduce decision fatigue.	• 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	*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.	• 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 exercises, extra education tangents)	*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.	• 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.