Massage Therapist Weekly Checklist/Meeting List

Week #	# Dates: To	From:	Team Member:	
	SOAP Notes Co		Task eted Daily	
		Listen to SWS live of	•	
		1 Name and action s asking for referral	step completely obtained from	
1.	What tasks did I perform after patient adjusting hours ended to promote the practice:			
2	What ways have I b	alpad lawar my pract	ica's averband:	
2. What ways have I helped lower my practice's overhead:				
3.	3. In what ways have I built up my team members in front of patients (be specific and des did this):			