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A High Five to Independent Clinic Owners

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Every so often, a fellow audiologist tells me they're thinking about opening their own clinic. They usually say something like, "I just want to focus on patient care. How hard can the rest of it really be?" Making the leap to becoming an entrepreneur is a whole different ball game, but it was also a chance to make an impact, to be a pioneer, to lead something on my own terms.

Nothing in our clinical training prepares us for what it actually takes to build an independent practice. We spend years learning to read an audiogram and counsel a patient through a difficult diagnosis, and then one day we're expected to know how to negotiate a lease, choose an EMR system, and figure out whether our margins actually make sense, with no coursework, no rotation, and no one to call but a very patient spouse or parent or friend who has done this before.

Before You See a Single Patient

There's a whole team of professionals you need before you ever see your first patient, and none of them know anything about audiology. A lawyer to negotiate your lease (tenant improvement

allowances, exit clauses, personal guarantees, the fine print that determines whether you're protected if things go sideways) and to handle your incorporation. An accountant who can set your books up properly from day one, because the difference between a sole proprietorship and a professional corporation isn't just paperwork. It follows you for years in how much tax you pay and how exposed you are personally. A contractor and a sign company for the build-out, which always seems to take longer and cost more than whatever number you started with. A web designer and someone who actually understands marketing, because a beautiful clinic with no online presence and no way for people to find you is still an empty clinic.

And then, of course, the equipment. Sound booths, audiometers, tympanometers, real-ear measurement systems, an EMR platform to actually run the place. Furniture and signage are what patients notice when they walk in, but this is one of the few places where you need to stay mindful of your budget. It's easy to get trigger happy and shop until you drop, especially when every vendor is convinced their product or service is the one you can't open without.

Hiring is its own project entirely. Front desk staff, maybe a second clinician or a hearing instrument specialist. Job postings, interviews, figuring out how to offer competitive compensation against corporate clinics with much deeper pockets, and HR software, because I promise you, tracking payroll and vacation days in a spreadsheet works right up until it doesn't. Underneath all of it sits the regulatory landscape: college practice standards, business licensing and insurance, privacy legislation, workplace safety requirements. None of it is optional, and none of it is intuitive the first time through.

Running It Is a Whole Second Job

Getting the doors open is one milestone. Running the place well is an entirely different job, and it lives or dies on systems, not good intentions. How do appointments get booked? How are patient files managed? Who's responsible for keeping equipment calibrated on schedule? What happens when a follow-up gets missed, or a patient calls in upset? Your front desk team is the engine room of the clinic, and if they're not working from a clear, documented process, that's not a small gap. That's where consistency and patient trust quietly start to erode.

Then there are the financials, and this is the part I think trips up even the most careful of us. Bookkeeping tells you what already happened. It doesn't tell you what to do next. Understanding your numbers means asking harder questions than "how much money came in this month." What does a patient visit actually cost you once you account for staff time and overhead, not just the appointment fee? What's your real margin on a hearing aid once you subtract the device cost and all the fitting, verification, and follow-up time baked into that price? How much of your revenue disappears into rent and fixed costs before you see a cent of profit?

A bank balance that looks perfectly healthy in a given month can still be hiding a service you're quietly losing money on every time someone walks through the door. Knowing that, and knowing it before it becomes a problem, is what separates understanding your business from simply watching it.

It's Hard. It's Also Worth It.

Add it all up, and independent ownership means being your own contract negotiator, HR department, compliance officer, and financial analyst, on top of being a practicing clinician. There

are months when the list never seems to end, the learning curve feels vertical, and no shortage of decisions are made with less information than you'd like.

But the clinics that make it past those first few rocky years tend to be the ones where the owner took that side of the business as seriously as they take patient care. And what you're left with, if you get it right, is something that's genuinely yours. Built on your own terms, reflecting the kind of care you actually believe in.

So, cheers to every independent clinic owner currently buried in lease negotiations, billing paperwork, or a late night trying to make the margins work: You jumped in headfirst, and you deserve some recognition. High five to all my fellow clinic owners for being so awesome!