

YOUR FIRST REPEATABLE MONTH

A conservative four-week strength + cardio plan for someone starting, restarting, or still building a stable routine.

BY MCKINLEY SLADE

THE PROMISE

Complete it. Recover from it. Repeat it.

Two general-strength sessions, two easy cardio exposures, and one small progression only after the starting dose becomes ordinary.

For adults without a stable recent strength or cardio routine. Running is optional.

00 / YOUR LANE

This plan starts both sides together.

Use it when neither strength nor intentional cardio has been consistent for the last six weeks - including when you are returning after time away.

THE MONTH IN ONE SENTENCE**Build a repeatable dose before you build a bigger one.**

Weeks 1 and 2 are deliberately the same. Week 3 changes one variable only if strength, aerobic, impact, and whole-week readiness have all stayed green. Week 4 repeats the earned dose.

The required weekly dose

- + Two full-body strength sessions.
- + Two easy cardio exposures from one track.
- + At least one unplanned day with no required training.
- + Optional easy movement may fill extra selected days, but it creates no debt.

Ability is what you can do once. Tolerance is what you can recover from and repeat inside the combined week.

01 / THE DEFAULT WEEK

Four pieces. One recoverable week.

The weekly dose stays the same whether you spread it across three days or six. More selected days create spacing, not more required work.

Session	What you do	Effort boundary	Typical time
Strength A	Five simple movement patterns	About 4 clean reps available	35-50 min
Cardio 1	Your chosen easy track	Full sentences; RPE 3-4 / 10	18-28 min
Strength B	Five complementary patterns	About 4 clean reps available	35-50 min
Cardio 2	The same track	No fast finish	18-28 min

IF FOUR DAYS FIT Use one session per day. This is the cleanest default because each exposure stays short and easy to read.	IF THREE DAYS FIT Pair Cardio 1 after Strength A. If the day becomes impractical, use four days or shorten that day's exposure inside the same track and repeat the shortened dose. Do not switch tracks just to force the calendar.
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Do not make up missed work by doubling the next day.

02 / STRENGTH A + B

Practice useful patterns, not heroic effort.

Use the same movements for the full month. Every repetition should look like one you would be willing to repeat next week.

Strength A	Dose	Strength B	Dose
Squat pattern	2 x 6-10	Hinge or bridge	2 x 6-10
Horizontal push	2 x 6-10	Split squat or step-up	2 x 6-10 / side
Supported row	2 x 8-12	Incline or vertical push	2 x 6-10
Light hinge	2 x 8-12	Vertical pull	2 x 8-12
Carry or trunk	1-2 x 30-45 sec or 6-10 / side	Carry or trunk	1-2 x 30-45 sec or 6-10 / side

How to choose the starting load

- 01 Choose a load you expect to lift for the bottom of the written range.
- 02 Stop with about four technically sound repetitions still available.
- 03 If you are unsure, choose the lighter option. The first week is calibration, not a test.

Warm up with 3-5 minutes of easy movement, then take one or two unloaded or lighter practice sets before the first two loaded movements.

MONTH-ONE BOUNDARY

No grinders, failure sets, max testing, or deliberately soreness-heavy variations.

A set can feel like training without becoming a referendum on your toughness.

03 / MOVEMENT MENU

Pick one clear version and keep it.

Use the first option that feels stable, can be performed through a comfortable range, and matches your equipment. A machine is not a lesser choice.

Pattern	Gym default	Home / dumbbell option	Bodyweight option
Squat	Goblet squat	Dumbbell squat to box	Sit-to-stand
Hinge	Romanian deadlift	Dumbbell RDL	Hip hinge to wall
Horizontal push	Machine chest press	Dumbbell floor press	Elevated push-up
Horizontal pull	Cable or chest-supported row	One-arm dumbbell row	Band row
Vertical push	Machine or dumbbell press	Half-kneeling dumbbell press	High-incline push-up
Vertical pull	Lat pulldown	Secure band pulldown	Backpack pullover
Split stance	Supported split squat	Low step-up	Assisted split squat
Trunk / carry	Farmer carry	Suitcase hold or carry	Dead bug

A simple default

If you have a normal gym and no reason to choose differently: goblet squat, machine chest press, chest-supported row, dumbbell Romanian deadlift, supported split squat, lat pulldown, and a farmer carry. Ask qualified staff to show you unfamiliar equipment.

Sharp pain, symptoms that change movement, or a range you cannot control are not progression problems. Choose another variation or get appropriate assessment.

04 / CARDIO

Choose the track your recent body can repeat.

Pick one mode and track for the month. Easy means full-sentence effort, generally around 3-4 out of 10 - not a pace you need to defend.

Choose one track	Week 1 and Week 2	Earned Week 3 change
Foundation low-impact	18 min: 3 easy, 3 x (2 gentle + 2 very easy), 3 easy	Add one 4-min round to Session 2
Walk / low-impact	Session 1: 20 min. Session 2: 25 min. Full-sentence effort.	Make Session 2 30 min
Run-walk	Each: 5-min walk, 6 x (1 relaxed run + 2 walk), 5-min walk	Add one round to Session 2
Continuous easy run	Only if 20 easy min were completed in the past 2-4 weeks: 20 min + 25 min	Make Session 2 30 min

Who belongs in each track

- + Foundation low-impact: 30 minutes of brisk walking is not yet comfortable. Use walking, cycling, an elliptical, or rowing.
- + Walk / low-impact: 30 minutes of walking is comfortable and you do not need running.
- + Run-walk: walking is comfortable, but 20 conversational running minutes are not yet familiar.
- + Continuous easy run: you completed 20 conversational running minutes within the past two to four weeks and recovered normally. Otherwise use run-walk.

New running exposures should be separated by roughly 48 hours when the calendar allows.

05 / FOUR WEEKS

The repeat is part of the program.

Week 2 is not an empty week. It answers whether Week 1 was a workable dose or merely a dose you survived once.

Week	Strength	Cardio	Decision
1 - Establish	Use lower half of each range	Complete both written exposures	Record the actual dose
2 - Prove	Repeat exercises, load, reps, and sets exactly	Repeat mode, duration, and intervals exactly	No progression
3 - Earn one change	Strength goal: +1 rep to both squat sets in A and hinge / bridge sets in B	Cardio goal: use Session 2 track progression	Balanced / consistency: repeat Week 2
4 - Consolidate	Repeat Week 3 exactly	Repeat Week 3 exactly	If yellow, use last fully green dose

ONLY ONE CHANGE

Strength or cardio - not both.

Do not add load, sets, minutes, frequency, intensity, and exercise novelty together. A clear dose creates clear feedback.

06 / THREE TO SIX DAYS

Change the spacing, not the dose.

Choose the calendar you can repeat. The listed days are examples; shift them while preserving the sequence and recovery space.

Days	Example calendar	What extra days mean
3	Mon Strength A + Cardio 1 / Thu Strength B / Sat Cardio 2	One combined day
4	Mon Strength A / Tue Cardio 1 / Thu Strength B / Sat Cardio 2	Default
5	Four-day schedule + Wed optional recovery movement	No added workout
6	Four-day schedule + Wed and Sun optional recovery windows	Keep one day completely unplanned

Optional recovery movement

Ten to twenty minutes of easy walking, mobility, or gentle cycling at RPE 2-3. It is never progressed, never made up, and never required for the week to count.

SAME-DAY ORDER

Strength first, easy cardio second.

This is the default when neither quality has an established claim on the schedule. Separate them by several hours if that makes the day feel better.

Which part of the dose is ready?

Progress only after two consecutive weeks in which every applicable gate is green. Mild soreness alone is not automatically a problem; the key question is what it changes.

Gate	Green - ready to repeat or progress	Yellow - repeat or reduce
Strength	Target reps, planned reps in reserve, stable technique, next key session near normal	Repeated lost reps, unexpected grinding, or soreness that changes the next session
Aerobic	Written time at the intended effort, full sentences when easy, normal next-day response	Easy work feels unusually hard twice or recovery repeatedly spills into the next session
Impact	Normal walking, stairs, and stride; no worsening focal symptoms	Localized soreness persists or increases even though movement is still normal
Whole week	Required sessions fit without make-ups; sleep, energy, and calendar stay near normal	Several recovery signals worsen or the plan repeatedly requires catch-up work

GREEN The relevant domain is stable or improving. Repeat it, or make one small change in that domain.
YELLOW The evidence is mixed. Repeat the dose or reduce one variable. Do not add intensity.
RED Pain changes movement, a concerning symptom appears, or performance clearly deteriorates. Stop progression and use the safety guidance.

A red safety signal overrides every completed session and every green trend.

08 / REAL LIFE

Use a minimum week instead of quitting.

When the calendar tightens, keep the smallest version that preserves the habit. Flexibility is part of the plan.

Minimum week

- + Complete Strength A and one easy cardio session.
- + Return to the normal sequence next week. Do not double anything.
- + If sleep, illness, or life stress changes capacity, reduce the relevant dose before blaming motivation.

If a session must shrink

- 01 Keep the warm-up and the first three strength patterns.
- 02 For cardio, keep the easy effort and shorten duration rather than turning it into a sprint.
- 03 Drop optional work first.

NO WORKOUT DEBT

A missed optional window is nothing to repay.

The plan succeeds when it remains compatible with ordinary work, relationships, sleep, and responsibilities.

09 / AFTER WEEK FOUR

Choose the next block from evidence.

The first month earns information. Use it instead of automatically adding everything.

Evidence	Next move
Two green weeks at Week 3 dose	Choose one: build strength, build cardio, or repeat for consistency
Mixed / yellow	Repeat the last fully tolerated dose until it produces two green weeks
Strength next	Add a third set to one primary movement in each strength session; hold cardio
Cardio next	Add five minutes to one session OR one short third easy session; not both
Impact still yellow	Use low-impact cardio or the last tolerated run-walk dose

RED OVERRIDES THE PLAN

Stop the provoking work. Match the response to the symptom.

Emergency: Stop and contact local emergency services for chest pressure, fainting, unusual or extreme breathlessness, confusion, signs of stroke, or a rapid or irregular heartbeat with symptoms.

Prompt assessment: Stop or modify and seek clinical assessment for new swelling, weakness, or pain that changes normal movement, lifting technique, or gait. Do not use a completed week as permission to train through a concerning symptom.

10 / SCOPE + SOURCES

A conservative starting plan, not medical clearance.

Pregnancy or postpartum return, rehabilitation, recent surgery, clinician restrictions, significant health conditions, and sport-specific preparation require individual decisions.

[1] CDC. What You Can Do to Meet Physical Activity Recommendations. Updated December 4, 2025.
<https://www.cdc.gov/physical-activity-basics/adding-adults/index.html>

[2] CDC. Measuring Physical Activity Intensity. Updated December 4, 2025.
<https://www.cdc.gov/physical-activity-basics/measuring/index.html>

[3] American College of Sports Medicine. Resistance Training Guidelines Update. March 17, 2026.
<https://acsm.org/resistance-training-guidelines-update-2026/>

[4] Schumann et al. Compatibility of Concurrent Aerobic and Strength Training. Sports Medicine. 2022.
<https://pubmed.ncbi.nlm.nih.gov/34757594/>

[5] Huijberts et al. Concurrent Training Adaptations With Sex Subgroup Analysis. Sports Medicine Open. 2024 issue.
<https://pmc.ncbi.nlm.nih.gov/articles/PMC10933151/>

[6] Gao and Yu. Exercise Order in Concurrent Training. Frontiers in Physiology. January 26, 2023.
<https://www.frontiersin.org/journals/physiology/articles/10.3389/fphys.2023.1072679/full>

[7] American Heart Association. Developing a Physical Activity Plan. Reviewed April 24, 2024.
<https://www.heart.org/en/health-topics/cardiac-rehab/getting-physically-active/develop-a-physical-activity-plan-for-you>

The two-week gate and written doses are conservative programming rules, not validated injury-prevention thresholds. Individual responses vary.