













The Launch Readiness Gap: What Teams Miss Until It's Too Late

A one-page briefing for CEOs testing launch readiness.

Product Adoption Lie Map			
Where belief breaks down between internal conviction and market behavior			
 Internal Alignment	 Market Readiness	 Readiness State	 Next Move
		Primed for Pull "The market has been asking for this."	You've built belief before launch; the market already measures success by your definition.
		Internal Mirage "Once we launch, the value will be obvious."	Conviction is strong internally, but the market hasn't caught up—you're funding confidence, not readiness.
		Launch Fragility "This is inevitable—we just need to execute."	You're scaling before belief is built—activity rises, adoption doesn't.
		Alignment Gap "We can't agree on what to lead with."	Smart people, different assumptions; internal drift confuses the market.

Most companies discover they're not in Primed for Pull yet. Internal conviction runs high—but the market's belief still lags.

Key Takeaways →

- 1. Most launches fail because belief was never tested.** Better data, stronger tech, and faster timelines can't fix a market that isn't ready to change.
- 2. Readiness is a market condition, not a marketing metric.** You can't message your way out of misalignment. Readiness is built through belief conditioning before budgets scale.
- 3. Knowing your readiness state protects capital and credibility.** When you know where belief breaks, you can fix it before the market—or your investors—do it for you.

Discussion Questions: Use these prompts to pressure-test your launch readiness strategy.



Where does belief break down—inside or outside our walls?



Are we funding conviction or conditioning?



What evidence would prove the market is ready to change?

Forward this to your leadership team and board before your next GTM review. It could save you millions.



Take the Product Adoption Lie Diagnostic



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CASE STUDY

The Sinking of Sedasys: When Disruption Meets Resistance

J&J's Sedasys system was developed to automate sedation for routine procedures like colonoscopies, cutting costs from roughly \$2,000 with an anesthesiologist to about \$200. It promised to redefine anesthesia delivery. Yet, less than a year into its limited rollout, Sedasys was pulled from the market.

Technology alone couldn't overcome entrenched norms. Anesthesiologists and their societies resisted, arguing that anesthesia's complexity couldn't be trusted to automation. Even after conditional approval, Sedasys was limited to low-risk cases with an anesthesiologist on call, erasing its disruptive advantage. Hospitals saw liability risk and clinicians saw workflow disruption.

J&J had validated the science, but not the system it sought to disrupt. The technology collided with entrenched norms and professional control—forces that ultimately dictated what the market deems “acceptable innovation.”

As Tom Kramer, CEO of Kablooe Design, noted, “If it doesn't fit into their practice, it's not reasonable for them to use.”

Lesson: Innovation alone can't change the status quo. Without belief, it meets resistance, not adoption.

They validated the science, but not the system they sought to disrupt.