

❖ Home Exercise Program

Patients should be instructed in a home exercise program before leaving your facility. Instruct your patients to do this program at least once a day. Since it is easiest to do at a table, your patients could routinely do this program as they wait for a meal. The program takes only 10 or 15 minutes.

The exercises are done in sitting, but some can be modified to be done in supine.

- Start with a good base of support, feet flat on the floor and trunk forward (out of a posterior pelvic tilt) with arms resting on the table.
- Work proximal to distal, beginning with the trunk and shoulders before working with the wrist and fingers.
- Do the exercises in the same sequence, 10 repetitions each. This makes it easier for patients to remember.

The following exercises should never be painful. A patient should stop if any discomfort is noted. In rare cases pain may signify a malalignment of structures and impingement could occur.

Stretching Forward with Scapular Protraction

Have your patient clasp their hands together and slide them forward on the table surface. This encourages the patient to come forward out of a posterior pelvic tilt and also encourages scapular protraction. Repeat 10 times.



Scapular Protraction with Weight bearing

With the shoulder in full protraction, have the patient roll over onto the shoulder. This encourages weight bearing over the involved side, facilitation of dynamic trunk control, and trunk elongation. Repeat 10 times.



Shoulder Flexion in Sitting

With clasped hands, have your patient bring their arms up overhead. Instruct them to go only to the point of discomfort or to the point they feel resistance, and no further. If they follow these guidelines, this exercise will be safe. *Never force range or move beyond the point of pain.* Repeat 10 times.



Shoulder Flexion in Supine

If your patient has a heavy arm, has difficulty bringing it overhead, or has poor scapular gliding, have them do this exercise in supine.

Forearm Supination and Pronation

Have your patient sit with forearms on the table. Ask them to keep their elbows on the table and bring their hands *palm side up and palm side down*. This will promote forearm supination and pronation. If their elbows come off of the table, they may be substituting with trunk movements or internal and external rotation at the shoulder. Repeat 10 times.



Wrist Flexion and Extension

With hands clasped and elbows on the table, flex the elbows and ask the patient to bring the involved wrist into extension. It is okay for the non-involved arm to come off of the table, if the patient has tightness at the wrist. Repeat 10 times.



Finger Extension

At the end of the program, have the patient stretch one more time all the way forward on the table. Slowly release the strong hand from the involved hand. Have the patient lay their weak hand as flat and relaxed as possible on the table. Only once is necessary.



⌘2 Pause and Practice with a Partner

Practice each of the above exercises with a partner. Help your partner with corrections and/or modifications as necessary.

Notes
