Scapular Mobilization: Protraction

Starting Position

The patient should be in a good sitting position with feet flat on the floor and pelvis in a neutral position, (not in a posterior pelvic tilt). Evaluate scapular excursion in elevation before proceeding with protraction of the scapula.

Handling

- 1. Stand in front of your patient.
- 2. Gently take the involved arm and bring it into forward flexion of no more than 90°.
- 3. Support the arm at the elbow and tuck it along your side. This helps to keep it in neutral and doesn't allow it to fall into internal rotation.
- 4. With your other hand, reach along the scapula and find the medial border. With a flat open hand press along the medial border and glide the scapula forward into protraction. (Don't hook your fingers around the scapula.)



- 5. Maintain this position for a second or two and then return to the starting position.
- 6. As the scapula returns to its resting position, allow it to follow the natural curvature of the rib cage.
- 7. With repetition, the scapula will begin to glide forward. Once you've achieved protraction, you may begin upward rotation.

Common Mistakes

- Don't curl your fingers around the medial border of the scapula. This can stimulate the rhomboids and increase scapular retraction.
- The hand supporting under the elbow should not pull the arm forward. It only cradles and supports the weight of the arm. The hand on the scapula does all of the work.
- Don't bring the arm into abduction while attempting to see the scapula. Get used to feeling for the border and not depending on visual cues.
- Although it is normal for the trunk to come slightly forward as the arm is brought forward into protraction, sometimes the patient substitutes trunk flexion for the scapular protraction. When this happens, the arm comes forward only because the trunk is coming forward and the scapula is not gliding at all (or minimally). If this is the case, you can try cueing the patient to maintain a more erect posture, or you might try having the patient work in supine or sidelying instead.

#4 Pause and Practice with a Partner

Preventing Shoulder Pain