

❖ Practice Lab

Scapular Mobilization: Elevation and Depression

Starting Position

Position the patient in supine. Elevate the bed for body mechanics.

Handling

1. Stand facing your patient, on the involved side.
2. Place your patient's involved arm between your humerus and your trunk.
3. Support the weight of the arm at the elbow. DO NOT pull on the elbow.
4. Place your other hand under the scapula.
5. With a flat, open hand, move the scapula into elevation. Your hand along the scapula does all of the work.
6. Hold for a few seconds and return the scapula to the resting position.



Variations

If your patient has a heavy arm, reposition your patient in sidelying on the less involved side. The involved side is more accessible and easier to mobilize.

Common Mistakes

The most common mistake made in doing scapular elevation is that therapists don't take the patient's scapula to end range. They are afraid they will hurt the patient. In order for the patient to fully benefit from scapular mobilization, take the scapula to end range of elevation – but always within a pain free range.

To learn scapular mobilization in a sitting position, view the course *Teaching Independence: A Therapeutic Approach*.