

General Guidelines for Rehab

Avoid Discomfort

Go slow and careful avoiding any painful motion. If there is pain, back off and don't go as far. You can also try some of the modifications of the exercise as instructed at the clinic or in the videos or handouts. If the motion still produces pain, discontinue and inform the Doctor or Therapist. This is a "Minimal pain for maximum gain" situation; not a "No pain-no gain" situation. Painful performance is counter-productive.

Focus on The Movement

Keep your mind on what you are doing: How does the movement feel, Where are you experiencing the stretch, What muscles are you using? Pay attention to cues given to you to ensure the correct technique. You can often use a mirror to observe yourself to ensure the maneuver is correct. If you have to choose between counting and focusing on the movement... focus on the movement. It may be beneficial to simply time the exercises doing them for about 2-3 minutes rather than counting reps. You can set a timer or stopwatch if you need.

Use Control

Ensure that the motion is slow and intentional. Make an honest effort to control the speed and quality of movement. Do not focus on going far or fast. It's not about numbers. It's not about achieving the position. It's about the journey from point A to B. It's more like Tai Chi or Ballet in this sense. Be patient with yourself. Take your time and focus on performing arcs of motion with granular control. In other words, graduate the movements as you go controlling each degree of additional movement as if you could pause the motion at any point along the way. Avoid any herky-jerky motions (shaking/tremor is okay during strengthening). Doing a few repetitions the right way is much more beneficial than doing a dozen the wrong way. In fact, doing them wrong can even worsen your condition.

Outside Activities

While going through active care at the clinic, do not continue with other exercises or activities that the Doctor or Therapist has not prescribed. It is understandable that you want to continue as usual. We get it, and we want you to be able to do those things too. Just put them on hold so you can focus on recovery. Just like an injured athlete, you have to allow yourself to heal or you will reinjure yourself and be out of the game even longer. Don't worry, you will be advised and coached about stepwise re-introduction to your normal activities as you progress through care. For the time being, just focus on the rehab exercises given to you. If you jump back into your other activities and get worse again, we will not know if treatment is helping or hurting you. This makes effective rehab prescription almost impossible as we just have to assume the exercises & stretches are tolerable and not responsible for any set-backs.

Example transition back to normal activities (only as prescribed under direction)

Non weight bearing or spinal loading: walking, water aerobics/swimming, spinning/stationary bike, etc.

Non spinal loading Cardio: jog/run, stair climber, inclined treadmill, row machine, etc.

Sports participation as practice/Drill level: slowly increasing participation

Non spinal loading Machines: Cable Machine, Seated Squat Press, Bench Machine, etc. No free weights.

Non Spinal loading free weights: Supine Bench, Prone reverse flies, Squats/Lunges unweighted

Light Weight Spinal Loading: Squats/Lunges w/ weights, Military press, Seated Curls (hi rep low weight)

Sports participation at scrimmage level: move from part of game to full game.

Mod Weight Spinal Loading: Smith Machine, Overhead Press, etc. (slowly turn up weight)

Full Return to Sports and Gym Activities [Note that work activities must be addressed separately].

Rehab is progressive. It is not static. It's almost like a gray scale. You will be placed according to where you are at on that scale. Sometimes we can advance you ahead, and sometimes we have to take a step back. The intention is to progress you according to your tolerance to take you from point A to point Z.

We will instruct you in clinic and then give you an email with link to videos or handouts to do these on your own. You will want to carve out 15-30 minutes a day at least 5 days a week to do these. More is better. We realize that this is asking for a lot, but your recovery will be much quicker and more effective if you do this. We have made the rehab low tech so that you can perform at home. You may have to purchase some simple equipment like bands or balls. We can generally recommend places to get these for cheap. We can also order them for you if you really need us to, but we prefer not to have to sell you the items.

Range of Motion Exercises (ROM)

This is the beginning and easiest stage of rehab. The idea is to retrain normal control of simple movements, then move onto controlling more complex combinations of movement. The pattern of the movement is the most important part. In injury, we often unconsciously change the way we move avoiding certain positions. These exercises are designed to normalize dysfunctional patterns of movement that you might not even realize were wrong. Use slow controlled motion to move in/out of position.

- Approximately 2-3 minutes each exercise
- 15 reps each side with 2 second holds for 30 reps total.
- Total hold time is 60 seconds, but remember that there is more time between hold positions.

Stretches (Held or Dynamic)

This portion of the rehab focuses on lengthening contracted muscle tissue. The intention is to improve your flexibility and decrease the spastic or over-active state of target muscle groups. Injury often leads to reflexive contraction of muscles. It is a protective mechanism. Scar tissue can infiltrate muscles and prohibit full extension or movement. Another benefit of stretching is improved strength. Think of it this way... if a muscle is 50% contracted, then you only have 50% strength as you have already used half of the potential contracting force. While stretching, it is important to stay relaxed. You cannot stretch a muscle that is actively trying to contract...but you can damage it. Don't cross the line. Stay out of the painful range. If you cross that line, the muscle will reflexively attempt to contract against the force.

- Approximately 2-3 minutes each stretch
- Held Stretch: (6x10 rule) 6 second holds for 5 reps each side for 10 reps total each stretch
- Dynamic Stretches hold time of 1 second repeated 30 reps each side for 60 reps total
- Total hold time of 60 seconds per stretch (move slow into and out of position)

Strengthening Exercises

This part of the rehab focuses on activating specific muscle groups. It's not so much that we are looking at making you stronger as it is that we are looking to turn on certain muscles and correct imbalances in the muscle groups. At the same time, we are looking to correct dysfunctional firing patterns. Painful musculoskeletal conditions are usually associated with an abnormal pattern of muscle activation. The sequence and balanced use of muscles is essential for normal movement. These patterns can become abnormal due to injury, bad habits, poor posture, or just plain old dis-use. Often times, with mechanical dysfunction, the body finds a new way of accomplishing movement by recruiting accessory muscles that normally would not be used. These additional accessory muscles cannot handle the load and become damaged from the overuse. By re-establishing normal muscle activation, those muscles can have a break. An example of this would be patients who get a massage and feels much better, then within a day, the spasm and muscle pain comes right back. If 10 people were holding a heavy object and 5 of them stop lifting, then what happens to the remaining 5? Which people are dysfunctional: the ones still working, or the ones who let go?

- Approximately 2-3 minutes each exercise
- 15 reps per side w/ 2 second holds, and 30 reps total per exercise
- Total hold time of 60 seconds per exercise.