

Early Shoulder Mobility: Pendular & Active-assisted exercises

Advice:

- Begin early shoulder mobilisation as shown below
- Take pain medication as required e.g. 20 mins prior to exercise
- Apply heat e.g. hot water bottle wrapped in a tea-towel over affected area prior to exercise / ice e.g. frozen peas in tea-towel, to affected area after exercise (to reduce swelling & help address pain)
- Begin gentle movement & aim to increase movement as comfortable
- Wean from sling as able allow your arm to 'swing' as you walk
- Avoid holding arm across body. If resting e.g. sitting, vary your arm position often
- Following injury, a degree of discomfort is to be expected. However, it is important to begin moving your arm as soon as possible to a) prevent stiffness & potential complications, such as frozen shoulder b) return to normal function as soon as possible.
- Ensure you have a good diet with Vitamin D and calcium as this can promote bone healing
- Smoking can slow rate of healing, therefore it is recommended if you smoke to stop.
- Ensure your sling is worn correctly to prevent neck pain as shown below. You may find it more comfortable to sleep on your back with a pillow under your injured arm for support. (as shown below





Exercise:	Picture:	Instruction:
1. Pendulum x 3 'Warm-up'		Relax your affected arm by your side. Shift your body weight a) In circles b) Forwards / back c) Side-side Allowing your arm to move as shown in each picture. Gradually increase shoulder range as able. Begin with 15-20 secs & increase as able 45-60secs.
2. Table slides		Place a towel on the table in front of you and place your hands shoulder width apart on the towel. Keeping your arms straight, lean forward and push the towel forward until stretch is felt in your shoulder Can be progressed to wall slides: forearms in contact with wall & slide upwards as able
3. Shoulder flexion in supine		Lying on your back and holding a wand or cane, slowly raise the wand towards overhead. Use your unaffected arm to assist with the movement.

Wand flexion in standing	In the standing position, hold a wand/cane with both arms, palm down on both sides. Raise the wand/cane up allowing your unaffected arm to perform most of the effort. Your affected arm should be partially relaxed.
4. Wand abduction	While holding a wand/cane palm face up on the injured side and palm face down on the uninjured side, slowly raise up your injured arm to the side.
5. Wand External Rotation	Lie on your back holding a cane or wand with both hands. On the affected side, place a small rolled up towel or pillow under your elbow. Maintain elbow at 90 degrees with your arm approximately 30-45 degrees away from your side. Use your other arm to pull the wand/cane to rotate the affected arm back into a stretch. Hold and then return to starting position and then repeat.
6. Wand Extension	In the standing position and holding a wand/cane, use the unaffected arm to help push the affected arm back as shown. The elbow should remain straight the entire time.

7. Wand Internal Rotation



While holding a wand/cane behind your back, slowly pull the wand up as shown.

You can also use a towel to 'dry your back' to assist with the movement

8. Pulley Exercises

- Flexion
- Facing Door
- Abduction



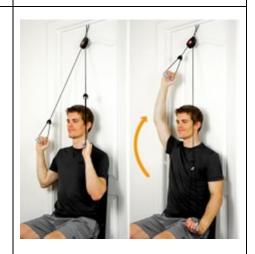
Flexion: Forwards / infront

Using door pulleys and facing away from the door, slowly pull down with your unaffected arm so that your affected arm raises forward and up without effort.

Your affected arm should be relaxed. The unaffected arm does the work.



Forward Flexion: Facing Door



Abduction: Out to side

9. Hand Behind Back / Internal Rotation



Using door pulleys and facing away from the door, slowly pull down with your unaffected arm so that your affected arm raises up behind your back until a stretch is felt.

Your affected arm should be relaxed. The unaffected arm does the work.