



Exercise #1 - Scapular Retraction (To be done twice a day for the first 8 weeks, then once a day for the last 4 weeks)

Place a Thera-Loop™ web strap on a piece of tubing/banding in the door on the hinge side and close the door so that the tubing is attached at belly button height. Facing the door, hold each end of the tubing with your hands. Back away from the door until arms are pulled in front of you and the tubing is stretched. (Figure 1) Begin the exercise by keeping arms straight and slowly bring hands back and down until wrists are slightly behind hips, at the same time squeeze shoulder blades together as much as possible. (Figure 2) Hold this position for a count of 2 then slowly return to the starting position. Focus on completely squeezing shoulder blades together and slightly downward while keeping neck and chest relaxed. The motion should be slow and very smooth. Repeat this movement 15 times then rest for 30 seconds. Repeat this set of 15 movements 3 times, resting between each set.



(Figure 1)



(Figure 2)

Exercise 2a - Supraspinatus (To be done twice a day during weeks 1-8)

Put the Pul-EZ™ (Pull Easy) grip-free pulley web-strap or bracket over the top of the door and close the door to hold up the pulley. Thread the sore arm's wrist through the grip-free side of the pulley and secure the foam loop support around the wrist. Hold a weight in the sore side hand. Facing away from the door and slightly turned toward the sore side, hold the handle of the pulley with the good arm's hand. Use your good arm to pull down on the pulley cord elevating the sore arm to shoulder height. The sore arm is now straight and positioned half way between directly out to the side and directly in front of you (45 degree angle) at shoulder height. (Figure 3) Now using the sore arm's muscles, hold the arm up while releasing the lift from the pulley by raising the good arm. Slowly allow the sore arm to return to your side over a count of 5. (Figure 4) Make sure to keep the shoulder blade on the sore side from moving and the thumb of that hand pointing up. Repeat this exercise 10 times resting for 30 seconds and repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. There will be slight pain with this exercise that is very minor and should resolve within a few minutes (5-10) after the exercise session is completed. If there is no pain, increase the weight until there is slight discomfort during the lowering movement of the exercise.



(Figure 3)



(Figure 4)

Exercise 2b - Supraspinatus (to be done once a day during weeks 9-12)

Hold a weight in the sore arm's hand with the palm facing forward and the thumb pointing up. Without moving the shoulder blade and keeping the arm straight, slowly lift the hand up to shoulder height in a direction half way between directly in front of you and directly out to the side (45 degrees). (Figure 5) Hold for a count of 2 then slowly lower it back to your side in a count of 5. Repeat this exercise 10 times resting for 30 seconds and repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. There will be slight pain associated with this exercise. It should be mild and resolve within 5-10 minutes of finishing the exercise. If there is no pain, increase the weight until there is slight discomfort during the exercise. Do not increase the weight above what you can lift without moving the shoulder blade. It is more important to do the exercise without shoulder blade movement than to have discomfort during the exercise.



(Figure 5)

Exercise 3a - Infrapinatus/Teres Minor (to be done twice a day during weeks 1-8)

Lay on your side with the sore shoulder up. Support your head with a pillow. Place a small rolled towel between your side and your arm. Hold a weight in sore arm's hand with elbow bent to 90 degrees. Using good arm, lift the affected side's hand and weight towards the ceiling keeping the elbow bent until it is just above the level of the body. (Figure 6) First, hold the sore side shoulder blade from moving, now release the good arm from the hand and weight, and begin slowly lowering the weight over a count of 3. (Figure 7) Repeat by using good hand and arm to lift the affected hand and weight to the starting position, or place weight in the hand once it is in position. (Figure 8) Repeat this exercise 10 times resting for 30 seconds and repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. There will be slight pain associated with this exercise. It should be mild and resolve within 5-10 minutes of finishing the exercise. If there is no pain, increase the weight until there is slight discomfort during the exercise. Do not increase the weight above what you can hold without moving the shoulder blade. It is more important to do the exercise without shoulder blade movement than to have discomfort during the exercise.



(Figure 6)



(Figure 7)



(Figure 8)



Exercise 3b - Infraspinatus/Teres Minor (to be done once a day during weeks 9-12)

Lay on your side with the sore shoulder up. Support your head with a pillow. Place a small rolled towel between your side and your arm. Hold a weight in your sore arm's hand with elbow bent to 90 degrees. Slightly squeeze your sore shoulder blade toward the middle and hold it from moving. Keeping the elbow bent to 90 degrees slowly lift the weight toward the ceiling to a level just above the level of your body over a count of 2. (Figure 9) Hold the top position for a count of 2 then slowly lower the weight, over a count of 4, back to the beginning position (Figure 10) without allowing your shoulder blade to move. Repeat this exercise 10 times resting for 30 seconds and repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. There will be slight pain associated with this exercise. It should be mild and resolve within 5-10 minutes of finishing the exercise. If there is no pain, increase the weight until there is slight discomfort during the exercise. Do not increase the weight above what you can hold without moving the shoulder blade. It is more important to do the exercise without shoulder blade movement than to have discomfort during the exercise.



(Figure 9)



(Figure 10)

Exercise 4a - Serratus Anterior (to be done twice a day during weeks 1-8)

Lay on your back with a comfortably heavy weight in each hand. If desired, support your head with a pillow. Reach both hands toward the ceiling. (Figure 11) This position, with arms extended straight above the chest, will remain the same throughout the exercise. Keep the elbows straight and the hands at shoulder width apart. Slowly, moving only the shoulder blades, round your back and extend hands as far a possible toward the ceiling, directly above your chest. (Figure 12) Hold at the top for a count of two. Slowly return to the starting position by pinching shoulder blades together in back. Done properly, this squeezing motion will lift your chest, as your arms remain straight overhead. Note that the exercise is using only shoulder blades to cause arms to move up toward the ceiling and back down. The movement should be very smooth and controlled, keeping both arms extended and the hands the same distance apart throughout the movement. Repeat this up and down movement 10 times then rest for 30 seconds. Repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15.



(Figure 11)



(Figure 12)

Exercise 4b - Serratus Anterior (to be done once a day during weeks 9-12)

Start this exercise on hands and knees in a modified pushup position (e.g. Knees together; hands shoulder width apart and slightly turned inward; head, spine and buttocks in a straight line). Allow the shoulder blades to relax and pinch together as your straight body moves slightly towards the floor. Now, moving only the shoulder blades, round your back and push your spine as far towards the ceiling as possible holding it there for a count of two. (Figure 13) Slowly and with control, return to the starting position of shoulder blades squeezed together. (Figure 14) This is like doing a pushup by moving only the shoulder blades while keeping the arms straight and relaxed. Repeat this up and down movement 10 times then rest for 30 seconds. Repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. Focus on doing the movement slowly and smoothly with good control.



(Figure 13)



(Figure 14)

Exercise 5a - Infraspinatus/Teres minor combined with Scapular Retractors. (To be done twice a day during weeks 5-8)

Begin by standing with your elbows bent to 90 degrees, your forearms parallel and holding the ends of a tube in each hand. (Figure 15) Now squeeze your shoulder blades together while spreading your hands apart to stretch the tubing. (Figure 16) Hold this position for a count of 2 then slowly relax. Keep your forearms parallel to the ground. Repeat this exercise 10 times then rest for 30 seconds. Repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. Focus on doing the movement slowly and smoothly with good control in fully squeezing the shoulder blades together.



(Figure 15)

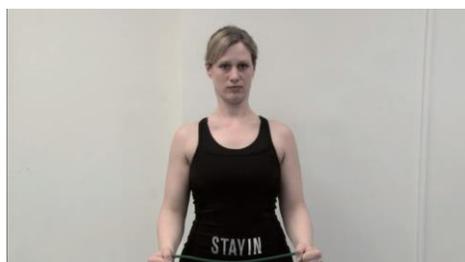


(Figure 16)



Exercise 5b – Infraspinatus/Posterior Deltoid combines with Scapular Retractors (done once a day in weeks 9-12)

Begin by standing with your elbows bent to 90 degrees, your forearms parallel to the ground, holding the ends of a tube in each hand. (Figure 17) Now squeeze your shoulder blades together while spreading your hands apart to stretch the tubing, keeping wrists straight. (Figure 18) Hold the stretch and slowly raise your arms up until the upper arms are parallel to the ground and your elbows bent so the forearms are perpendicular to the ceiling. (Figure 19) Make sure the shoulder blades are held down with NO UPWARD MOVEMENT during elevation of the arms. Hold this position for a count of 2, then slowly lower arms to start position and relax the rotation, again being very careful to not allow the shoulder blades to move during lowering of the arms. Repeat this exercise 10 times then rest for 30 seconds. Repeat that set of 10 exercises 3 times resting between each set. As you improve and can perform the exercises with good control, increase to 3 sets of repetitions to 15. Focus on doing the movement slowly and smoothly with good control in fully squeezing the shoulder blades together and holding them together and down with no movement during all elevation movement of the arms.



(Figure 17)



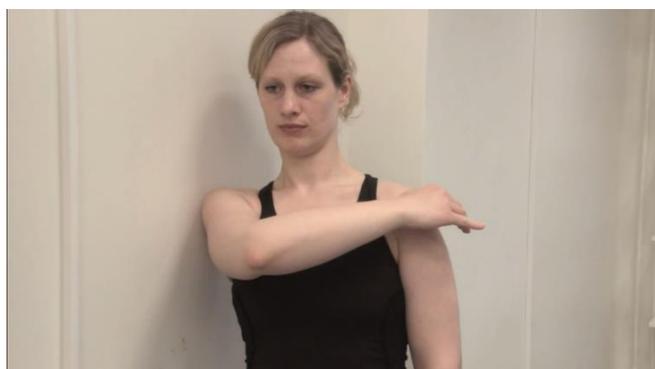
(Figure 18)



(Figure 19)

Exercise 6 - Posterior Shoulder Stretch (To be done twice a day for the first 8 weeks, then once a day for the last 4 weeks)

Stand near a door frame. Holding the sore arm elevated in front of you, place your sore arm's hand on your good shoulder and support the sore arm's elbow with your good hand. Now lean the affected side of the body into the door frame so that the sore side shoulder blade is pushed against the frame. (Figure 20) Now use your good hand under the sore arm's elbow to pull the sore arm across in front of you. (Figure 21) The door jamb holds the shoulder blade from moving while the arm is being moved in front of your body so that a stretch is felt in the back of the shoulder joint. Hold each stretch for 30 seconds and repeat 3 times. The stretch should be very comfortable without ANY discomfort. Take up the slack as the muscles relax to increase the stretch.



(Figure 20)



(Figure 21)

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https://www.youtube.com/watch?v=Z1_pY1UF6xg

Research Article Published by the British Journal of Medicine 20 February 2012

*“Effect of specific exercise strategy on need for surgery in patients with subacromial impingement syndrome:
randomized controlled study”*

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