

#### Leeds Teaching Hospitals Physiotherapy Department

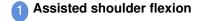
ACJ: Phase 2

Client ID 82581713

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#### Notes:

Undertake exercises little and often as pain allows.





Lay down on a bed or couch facing the ceiling. Do not use a pillow.

Grasp the wrist of your operative shoulder with your normal hand, pulling toward the ceiling, then gently overhead.

Hold this position for 10 seconds (or as directed by your therapist), then relax.

## Assisted shoulder flexion





Stand with a stick in both hands.

With the un-injured arm, assist the injured arm up towards the ceiling.

Keeping the arm perpendicular to the body, move through the full range of motion.

Return and repeat.

Make sure the movement is done by the un-injured arm.

## AAROM shoulder abduction





Lie on your back.

Position your affected arm next to you.

Bend your elbow to 90 degrees and move the arm away from your body by sliding it on the table (abduction) as far as possible or until the elbow is in line with your shoulder. Assist the movement with the other arm.

# 4 Assisted shoulder abduction





Stand and hold a stick with both of your hands, keeping your arms at your sides.Pull the tip of your shoulders backwards and raise your arm to the side by using the unaffected arm to swing the stick upwards and sideways away from your body. Slowly return to the starting position and repeat.

### 6 Assisted external rotation





Stand holding a stick, keeping your arms at your sides, and elbows bent. Pull the tip of your shoulders backwards and rotate the affected arm away from your body, assisting the movement by pushing the stick with your good arm.

Return to the starting position and repeat.

Keep your elbow against your body at all times.



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Passive shoulder internal rotation





Stand with the affected arm behind your back and each hand grabbing either end of the towel. Pull the tip of your shoulder backwards and pull on the towel with your good hand to lift the affected arm as high as possible behind your back.

Slowly lower the arm and repeat.

The affected arm should not be doing any of the movement.