

Rehab Exercise Handbook For The NECK

THIS HANDBOOK WAS DESIGNED TO IMPROVE THE ABILITY OF INDIVIDUALS TO ENGAGE IN SELF-DIRECTED EXERCISE AND THERAPY PROGRAMS!



NECK EXERCISES:

Level I: Initial Ranging Level II: Stretching

Level III: Strengthening Exercises

EXERCISE LOG:

A complete guide to follow and record your progress, noting the number of repetitions or sets of each exercise completed. Record any additional notes you may wish to discuss with your therapist or physician.

INTRODUCTION

This book was designed to improve the ability of individuals to engage in self-directed exercise and therapy programs. Although they can be used in conjunction with a medical physician, physical therapist, personal trainer, or exercise physiologist, they are also adequate for self-study and application. The exercises are illustrated and described in visually appealing detail. They also provide a wide range of stretches and exercises that can be tailored to almost any condition, frequent or rare.

Self-care and rehabilitation are synonymous. Rehabilitation has more medical connotations, but someone does not need a medical condition to begin taking better care of themselves. Many of the conditions seen by physicians can be alleviated or substantially decreased through diligence with a home stretching or exercise program. This is becoming more important as people engage in jobs that overuse only a few muscles, for example, computer operators who maintain static positions of their neck, shoulder and arms for possibly an entire work day. Likewise, weekend warriors—whether they are doing battle on the ball field or the front lawn—frequently suffer from pain generated by strained muscles or ligaments that have been dormant the remaining six days of the week.

As with any exercise program, the input of a physician is necessary if an individual suffers from any type of chronic condition, e.g. heart disease, osteoporosis, diabetes, or chronic obstructive pulmonary disease. This is especially important if someone is just beginning a program after many years of sedentary activity. If there is any type of heart condition, you need to consult a physician before engaging in even the simplest of activities. Never underestimate the damage done by years of neglect or lack of activity.

The goal of this book, as with any approach to human health, is to promote a balance between the external environment and the internal body. Life is an interaction between mind, body and soul, that is shaped and influenced by job, family, and lifestyle. The latter has been sadly influenced to a large degree by television, time restraints, and commodities designed for a fast-paced existence. However, there is no short-cut to health. The good news is that very little time is required to maintain long term and cumulative gains. All that is needed is dedication, encouragement and the realization that everything that is done, no matter how minimal an effort, can add up to years of energy, relaxation, and improved health. I hope this book can contribute in some way to that path and outcome.

NECK)

STRETCHING & STRENGTHENING EXERCISE PROGRAMS The programs are arranged in levels of intensity. A therapist will instruct you as to the intensity and frequency of each of the activities. Note any difficulties or unusual sensations you may experience for discussion with the therapist or physician. If you experience an exacerbation or flare-up of symptoms, decrease either the number of repetitions or the frequency of exercises per day until you can discuss the matter with the therapist or physician.

LEVEL I: INITIAL RANGING

This activity is usually started immediately after an injury. The goal is simply to maintain as much range of motion as possible during the initial stages of healing so that muscle spasms are gently dissipated and contractures do not develop.

Since a whiplash injury involves a flexion-hyperextension movement (forward and backward bending), the first range of motion exercises prescribed by the therapist will primarily involve side bending and rotation. Flexion and extension exercises will be added later. This is different than the exercises prescribed in chronic overuse syndromes, in which movement in all directions is advocated.

—— Neck Exercise 1 ——

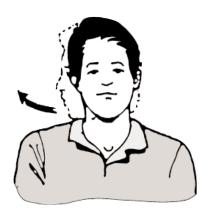
Figure 1: *Neck side bending.* Keep your chin facing forward and tilt your head toward your shoulder, trying to touch your ear to the top of your shoulder. Do this for both your right and left side.



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—— Neck Exercise 2 ——

Figure 2: *Neck rotation.* Turn your head and try to bring your chin over the top of your shoulder without bending your neck forward. You will most likely not be able to touch your chin to your shoulder; just rotate it as far as you can.



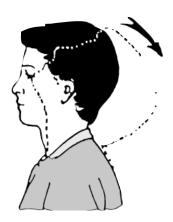
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—— Neck Exercise 3 ——

Figure 3: *Neck extension.* Bend your head as far back as possible, then return to a neutral position. Do not bend forward.



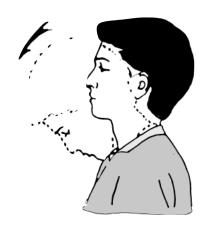
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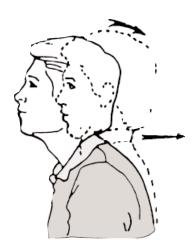
Figure 4: *Neck flexion.* Bend your head as far forward as possible, trying to touch your chin to your chest, then return to a neutral position. Do not bend backward.



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—— Neck Exercise 5 ——

Figure 5: *Neck retraction.* Keeping your chin and eyes level to the floor, bring your head straight back.



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LEVEL II: STRETCHING

Stretches should be done before any type of strengthening activity. The therapist will state which of the following stretches are most helpful for your situation. A useful guide is termed the "rule of fives." Take five seconds to bring yourself into the stretch, hold the point of maximum stretch for five seconds, and then take five seconds to bring yourself out of the stretch. The body should be slowly pulled into a stretch. Avoid sudden jerky movements and be aware of shifting and possibly losing balance.

The stretches described, include muscles that also tend to be injured in both whiplash or overuse syndromes. It is important to follow the directions exactly as the position of other body parts helps determine which muscles are being stretched.

— Neck Exercise 6

Figure 6: General neck stretch. Pull your arm across the front of your body by grasping it above the wrist. When you have pulled as much as you can, try to touch your chin to the top of your shoulder on the side to which you have pulled your arm. Repeat this for the opposite side.



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	Days per week

EXERCISE LOG:

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— Neck Exercise 7

Figure 7: *Upper trapezius stretch.* Place your hand in the center of your back, palm facing out. Grasp the side of your head and gently pull toward the opposite shoulder, trying to touch your ear to the top of your shoulder. Repeat this for the opposite side.



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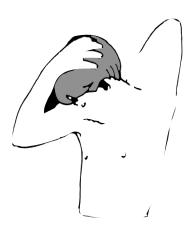
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--- Neck Exercise 8

Figure 8: Levator scapulae stretch. Take your arm and reach behind your shoulder, placing your fingers over the shoulder blade of the same side. Do not reach over to the other shoulder blade. Try and point your elbow up into the air. Then, grasp the top of your head and stretch your head down and toward the opposite side; you should be looking toward the hip of this side. Repeat this for the opposite side.

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Neck Exercise 9

Figure 9: Corner stretch. Stand a short distance away from a corner in the position shown, with your hands at shoulder level. Be careful to not stand too far away or you may lose your balance or be too far away to effectively push yourself out; it is better to start close and then move out as needed. Note the ideal distance in your exercise log. Lean forward into the corner and you will feel a stretch between the top of your shoulder blades.



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LEVEL III: STRENGTHENING EXERCISES

The next phase of the recovery program involves cervical isometrics. Before beginning a specific strengthening exercise, perform the corresponding stretch. Perform only the exercises noted by the therapist.

—— Neck Exercise 10 —

Figure 10: Neck side bending isometrics. Refer to figure 1 for the appropriate pre-exercise stretch. Using your fingers or palm, press into your temple region and push against your hand. Keep your head in the midline and resist bending sideways. Repeat this for the opposite side.

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—— Neck Exercise 11 —

Figure 11: *Neck rotation isometrics.* Refer to figure 2 for the appropriate pre-exercise stretch. Using your fingers or palm, press into your temple region and rotate against your hand. Keep your head in the midline and resist turning your head sideways. Do this for the opposite side.



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—— Neck Exercise 12 —

Figure 12: *Neck extension isometrics.* Refer to figure 3 for the appropriate pre-exercise stretch. Using your fingers or palm, press into the back of your head and push against your hand. Keep your head in the midline and resist bending backwards.



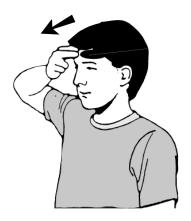
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—— Neck Exercise 13 ——

Figure 13: *Neck flexion isometrics.* Refer to figure 4 for the appropriate pre-exercise stretch. Using your fingers or palm, press into your temple region and push against your forehead. Keep your head in the midline and resist pushing forward.

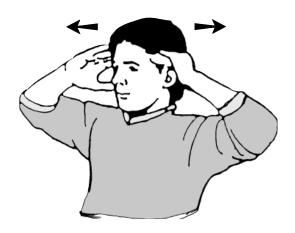


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—— Neck Exercise 14 —

Figure 14: *Alternating isometrics.* Place your fingers or the palms of your hands on your temples. Alternate pushing against each hand. Your head should remain immobile.



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EXERCISE LOG: Record your progress in the log below, noting the number of repetitions or sets of each exercise completed. Record any additional notes you may wish to discuss with the therapist or physician.								
EXERCISE - 14	DATE	DATE	DATE	DATE	DATE	DATE	DATE	
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DISCLAIMER NOTICE:

These manuals are presented only as a summary of information for health care providers involved in the rehabilitation of musculoskeletal conditions. No standard of care is stated or implied. These manuals are not intended nor properly used as a substitute for treatment, only as an adjunct to aid clinical expertise. The exact protocol and progress employed is the determination of the health care provider who assumes all responsibilities for its application.