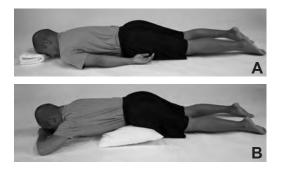# BACK AND HIP MOBILITY

Your physical therapist recommends the following personalized exercise program for you. Please follow your therapist's instructions on how often to hold or repeat each exercise. If your symptoms feel worse with any exercise, stop doing the exercise until you check with your physical therapist or your doctor.

❏ On Your Stomach

Lie face down with your arms at your sides. Place a towel under your forehead (A), or place your hands under your forehead (B). You may also place a pillow under your stomach for comfort.

Pillows under stomach: _____

Time _____   Frequency _____

❏ Up on Elbows

Lie face down. Keep your hips on the floor, and let your back relax. Bring your body up so you are resting on your forearms.

Hold for _____ seconds. Frequency _____

❏ Up on Hands

Lie face down with your hands near your shoulders. Keep your hips on the floor and let your back relax. Push your upper body off the floor using your arms.

Hold for _____ seconds. Frequency _____

❏ Hands and Knees

Start on your hands and knees. Your hands should be directly below your shoulders. Your knees should be directly below your hips. Raise your tailbone toward the ceiling and let your back sag. Return to the starting position.

Hold for _____ seconds. Frequency _____

Additional Instructions:

PHYSICAL THERAPY

KAISER PERMANENTE.

START

END

❏ Back and Hip Stretch

Start on your hands and knees. Rock forward, and let your hips drop toward the floor. Keep your elbows straight. Return to the starting position.

Hold for _____ seconds. Frequency _____

❏ Seated Back Bend

Sit up tall. Place your hands on your back pockets. Press forward with your hands as you bend back as far as is comfortable.

Hold for _____ seconds. Frequency _____

START END

START END

❏ Standing Back Bend

Place your hands on your back pockets. Press forward with your hands as you bend back as far as is comfortable.

Hold for _____ seconds. Frequency _____

Additional Instructions:

KAISER PERMANENTE.