Physiotherapy After Your Breast Surgery
This information is meant to help you in your recovery. We outline for you what to expect after surgery and give you tips on how to make a speedy recovery. Your Physiotherapist visits you soon after your surgery to get you started on the exercises you need to get back your strength and flexibility. Therapy helps to control your swelling and improves scar healing. You are given exercises to strengthen and stretch as well as improve your posture and overall fitness.

Remember...
Every person recovers differently.
Not everyone progresses at the same rate.

There are different types of breast surgery. Here is a short description of each one:

- **Mastectomy** – when the breast is removed either in whole or in part.
- **Breast reconstruction** – once a mastectomy has been done, the breast is re-created either with an implant (Breast Implant) or by making it from nearby muscle (TRAM Flap - Transverse Rectus Abdominus Myocutaneous flap).
- **Lumpectomy** – when only the lump is removed from the breast.
- **Lymph node biopsy** – when a small cut is made in the skin and a sample of tissue is taken from the lymph node. The sample is then sent to our laboratory to be examined. It is also called an axillary dissection. ‘Axillary’ is the medical term for armpit. ‘Dissection’ is another way of saying to look at something in detail.

The information in this booklet is for all who have had some type of breast surgery. We have included specific instructions for certain surgeries where needed.

We suggest you review the information and exercises. It would be good to start practicing the exercises for at least 6 weeks before your surgery. If you have any questions on how to do the exercises, talk to your doctor or a physiotherapist.

**While in the hospital**

You need to start doing your exercises the day after your surgery. You can expect to feel some soreness, as well as tightness or pulling of the skin, around your chest, armpits and stomach. You can expect to have a small amount of fluid leaking from your surgery site or incision.

You may find it is hard for you to lift your arm(s). This can be from pain, swelling and tightness of the surgery site. Doing your exercises helps with this. It is very important for you to do your exercises regularly. This helps prevent some of the problems described in this booklet. The Physiotherapist comes to see you soon after your surgery. Remember - the sooner you start on your therapy and exercises after your surgery, the faster you will recover.

Some people feel some numbness and tingling around their surgery site(s) or incision(s). It is possible that the numbness and tingling may never go away completely. The exercises we give you should help with this.

If you have had breast reconstruction involving the ‘TRAM Flap’, you may be told not to sit or stand up completely straight for the first day or two. After a few days, you need to start to slowly straighten up, otherwise it will be harder for you to improve your posture later. You may get some low back pain from being bent over, but this should go away in 3 – 7 days.

The information in this document is intended solely for the person to whom it was given by the health care team.
Recovering At Home

A Quick Summary

<table>
<thead>
<tr>
<th>What to do</th>
<th>What NOT to do</th>
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<tbody>
<tr>
<td>• Take sponge baths.</td>
<td>• Do not get your incision(s) wet until it is fully healed and the stitches have been taken out.</td>
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<td>• Tub bath as long as you keep your incision(s) dry and can easily get in and out of the tub.</td>
<td>• Do not use ice or heat over your incisions.</td>
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<tr>
<td>• Shower only after your incision(s) are fully healed and the stitches have been taken out.</td>
<td>• Do not lift anything greater than 10 pounds.</td>
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<tr>
<td>• Take your pain medicine regularly and as needed. When sitting or lying down, rest your arm on pillows.</td>
<td>• Do not do any heavy housework such as vacuuming.</td>
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For those who had the TRAM flap:

| To get up from the lying position, roll onto your side first and then sit up by pushing up with your elbow against the bed. | Do not try to pull yourself up from the lying position using your tummy muscles or arms. |

When to call for help

Contact your surgeon right away if you have any of the following:

• Increased redness and increased heat around the incision site(s).
• Increased pain around the incision site(s).
• A lot of swelling around the incision site(s).
• Any bad smelling or unusual fluid coming from your incision(s).
• A fever - temperature over 38.5° C (101.3° F), using an ear or mouth thermometer.

These are signs of infection. You need to be treated as soon as possible. If you cannot get in touch with your surgeon, go to your nearest hospital emergency department.

What you can do to help with your recovery

Pain

After surgery you will be sore. Take your pain medicine as directed. Plan to do your exercises about 1 hour after taking pain medicine.

It may be hard for you to find a comfortable position to sleep. You will want to slouch and not want to sit up or stand up straight. This is especially true if you had breast reconstruction (TRAM Flap). After a few days, you should be more comfortable. It is important to try to sit and stand taller. It is normal to feel a mild stretch of the skin at the surgery site. You should not push yourself beyond this.

Lying on Your Back

Bolster under the knees so knees are bent and supported. A rolled comforter or sleeping bag can be used in place of a bolster.

Lying on Your Side

Both knees bent with a pillow between them. One soft pillow positioned to support the neck. Pillows in front of your chest to support your affected arm.

When sleeping or lying down, use pillows to help support yourself. You may find that lying on your back gives you a stretching feeling across your tummy. To help with this, use a pillow under your knees. Make sure that the pillow under your head is only under your head and not under your shoulders as well. The pillow keeps your head in line with the rest of your body. If you have the pillow under your shoulders as well, this is the same as slouching when sitting or standing. When lying on your side, you may find it helpful to have a pillow in front of your chest so you can rest your top arm on it. Another pillow between your knees may also help.

If you find you have any of the following after your surgery, we suggest you arrange to see a Physiotherapist within 2 to 6 weeks of going home:

• Stiffness in your arm(s).
• General swelling around your surgery site or in your arm(s) that does not go away.
• Tightness of your scars.
• Aching pain that is not getting better or going away.
• Leaking of urine when coughing or sneezing. (This is possible for those who have had the TRAM Flap).
Scar

You will have a scar from the incisions. Depending on how the scar heals, it can become thick, limit how your skin stretches and moves, and may interfere with the muscles, nerves, and tendons underneath. Scars from this type of surgery can even limit how well you use the arm and shoulder on the surgery side. Sometimes scars become painful and sensitive to touch.

You can help your scar heal so that it does not limit your movement. You can begin massaging your scar when:

- Your stitches have been taken out,
- Your incision has fully healed, and
- Your surgeon gives you the go-ahead.

Scar massage helps increase the ability of the scarred skin to stretch and move when you do.

Swelling

It is normal to have some swelling around the surgical site, and in the arm, after your surgery. This should get less over time, but it can sometimes take up to 4 months to go away.

Sometimes a ‘compression sleeve’ is used to keep the swelling under control. A compression sleeve is like an elastic bandage. You pull it over your arm. It puts pressure on your arm from your wrist to your armpit. This helps move the lymph fluid up out of your arm. The sleeve works best when worn daily during waking hours. Those individuals who have had lymph nodes removed tend to have more swelling than those who did not. Talk to your doctor about prescribing a compression sleeve, especially if your swelling does not go away with the other ways described below. Compression sleeves are custom-made to fit you.

Swelling can cause pain and make it harder for you to use your arm. Here are other ways you can help keep the swelling down:

- When sitting or lying down, rest your arm on pillows. Keep your arm raised above your chest (or the level of your heart). This helps the swelling flow out of the arm.
- Make a fist. Open and close your hand 10 times, take a rest and repeat this cycle another two times. Do three sets of 10 every hour or so throughout the day. This helps move the fluids up and out of the arm.
- Keep active. Do not be afraid to move. Try to use your arms as you normally would use them.
- Do your exercises as instructed by your Physiotherapist.

Stiff muscles in your arm and neck

After surgery, some muscles may become tight or stiff. The first step to getting your muscles moving is to stretch. So you do not hurt yourself, do your stretches slowly and steadily. Keep the stretch constant for the time needed. Do not bounce while in the stretch. This can hurt the muscles.

When you get to the point where you feel a mild stretch discomfort, hold the stretch at that point for 15 seconds. This helps the muscle to relax and lengthen. You should not feel any pain. If you do, you are stretching too far. Over time, you will be able to stretch further and further.

To help with your stretching, you may want to buy a set of exercise pulleys. They can be very useful in your recovery. These are inexpensive and they can be set-up easily at home. Talk to your Physiotherapist if you are interested in this.

Reduced arm function

Some people have found their arms do not feel strong and do not move as well as they should for up to 4 years after breast surgery. When muscles are weak and not used properly, it can reduce how well the arm moves.

Exercising every day both before and after surgery can help you return to your level of activity before surgery. Daily exercise helps improve lymph flow and keep arm swelling down. You should look at doing some type of ongoing exercise. Studies show there isn’t one activity or sport that is better than another. What is important is keeping active. If you have an interest in an activity (such as Yoga) or sport, talk to your Physiotherapist. You will need a program or plan for how to gradually get into, or go back to, the activity or sport.
**Walking**

Walking is a great way to get active after your surgery. It helps to keep your lungs and heart healthy. It is also a great way to relieve stress, control weight gain and combat fatigue.

Remember – it takes time to recover. Start slowly. Gradually increase your speed and the length of time you walk. If you have a history of heart or lung disease, check with your Family Doctor before starting a walking program.

<table>
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<th>A Sample Walking Program</th>
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<td>- This program is a guide that will help you establish a walking program. You do not need to follow this program exactly. Start at a stage that feels right for you and progress at your own pace.</td>
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<tr>
<td>- If you have been hospitalized for treatment of heart disease, this program is designed to follow the exercise program that was prescribed for you.</td>
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<td>- An advantage of walking is that you do not require any special equipment, other than a good pair of comfortable shoes.</td>
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<th>Warm-Up</th>
<th>Conditioning Phase</th>
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**Weak Tummy Muscles**

If you had the TRAM Flap surgery, you are likely to have weak tummy and low back muscles. So, it is important for you to do exercises to strengthen your tummy muscles, both before and after your surgery. (See the exercises checked off for you at the end of this booklet).

We know these are hard exercises to do. The best thing for you to do is to start doing your tummy muscle exercises every day for 6 weeks before your surgery. This helps you build up your strength and gives you the support you need after your surgery. Doing these exercises before your surgery makes them easier afterwards.

Also after TRAM Flap surgery, some people get problems with urine leaking. This happens when they cough or sneeze. These exercises also help strengthen those muscles that control urine flow (the muscles that hold your pee in).

Your Physiotherapist will talk to you about these exercises and make sure you are doing them correctly following your surgery. Since some of these exercises are hard to do correctly, you may find it helpful to see a Physiotherapist 6 weeks before your surgery so you can learn how to do them properly.

**Returning to work**

How soon you go back to work depends on what work you do and what type of surgery you had. Remember:

> Every person recovers differently. Not everyone progresses at the same rate.

Your surgeon will let you know when it is safe for you to return to work. You may not be able to return to full hours and full duties right away. You may need a return-to-work plan that outlines a gradual increase in time and duties. Your surgeon and your Physiotherapist will help you draw up a plan for gradually returning to work (called a ‘gradual return-to-work plan’). Keep your employer up to date with how your recovery is going. Some employers have contact people who will need to be involved with your return-to-work plan.

**Exercises for your recovery**

You need to get moving soon after surgery. Your Physiotherapist will show you which exercises to do and when to do them. Exercises help you keep as much movement and strength in your arms, back and tummy muscles. Don’t forget - exercise also helps prevent the problems we have described in this booklet.

If you begin to hurt anywhere during your exercises, lie down and rest. If your arm begins to hurt, lie down and rest your arm up on pillows.
During your walks, you should be able to carry on a conversation. If you cannot, you should slow down.

Other indicators that suggest you slow down are:

- If you have gone past your recommended target heart rate or rate of perceived exertion (RPE)
- You have shortness of breath
- You have discomfort in chest, arm, back, jaw, or unusual joint or muscle pain
- You have irregular heart beats
- You have dizziness or nausea

Go to the nearest Emergency Department or call 911 if your symptoms persist.

The following exercises can be started post-operatively once you feel comfortable.

### Shoulder Shrugs
Raise shoulders up, then slowly press them down. Relax.

- Hold for _______ seconds.
- Repeat ______ times.
- Do ______ times per day

### Shoulder Blade Squeeze
Rotate shoulders back, then squeeze shoulder blades together.

- Hold for _______ seconds.
- Repeat ______ times.
- Do ______ times per day

### Forward Arm Reach
Place arm on table top. Slide hand and forearm forward until a stretch is felt. Hold position for 15 seconds. Relax body and repeat.

- Hold for _______ seconds.
- Repeat ______ times.
- Do ______ times per day

### Neck Range of Motion
Begin each neck exercise by tucking your chin towards your Adam’s apple:

1. Gently rotate your head to the right until a stretch is felt. Repeat on the left.
   - Hold for _______ seconds.
   - Repeat ______ times.
   - Do ______ times per day

2. Gently tilt your head to your chest until a gentle stretch is felt on the back of your neck.
   - Hold for _______ seconds.
   - Repeat ______ times.
   - Do ______ times per day

3. Tuck your chin towards your Adam’s apple and gently tilt your head towards the right until a gentle stretch is felt on the left side. Repeat to the other side.

- Hold for _______ seconds.
- Repeat ______ times.
- Do ______ times per day

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The exercises on this page may be started approximately 2 weeks post-surgery.

**Pectoralis Stretch**

Lie on your back at the edge of the bed. Bend your knees. Place your arm, with palm facing up, to the side of the bed at a 90 degree angle and progress to a 120 degree angle. Let it hang over the edge until a gentle stretch is felt.

- Hold for _______ seconds.
- Repeat _______ times.
- Do _______ times per day

**Overhead Pulleys**

- Start Position
- End Position

**Abduction**

**Forward Flexion**

**Overhead Flexion with Cane**

Lie on your back with your knees bent. Hold a cane or stick in your hands. Keep elbows straight and raise cane overhead until a stretch is felt in your armpit and chest.

- Hold for _______ seconds.
- Repeat _______ times.
- Do _______ times per day

**Trunk and Arm Stretch**

Start on your hands and knees. Slowly lean back so you are sitting on the back of your heels. Keep your arms stretched out in front of you. Feel the stretch in your back and in the sides of your trunk.

- Hold for _______ seconds.
- Repeat _______ times.
- Do _______ times per day

**Wall Climbs**

A. Stand facing a wall as close as possible. Bend your elbow and place the palm of your hand on the wall at shoulder height. Work your hand up the wall until your arm is stretched. Bring your hand back down to shoulder height in the same way.

B. Stand sideways on the wall with affected side close to the wall. Repeat the exercise climbing the wall with the affected arm only.

- A. Start
- A. End
- B.

The information in this document is intended solely for the person to whom it was given by the health care team.
The following exercises can be started approximately 6 weeks post-surgery.

We recommend you progress through the exercises on this page in order, from 1 through 5.

1. Lower Abdominal Exercises
   In this 4-point kneeling position, make sure your back is flat. Relax your tummy muscles and breathe normally. Breathe in allowing your tummy to balloon, breathe out letting all of your air out. Draw your belly button up towards your spine, holding your tummy muscle tight. Resume breathing normally while maintaining your abdominal contraction.

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

2. Lower Abdominal Exercises
   Lie on your back, with knees bent. Relax your tummy muscles and breathe normally. Breathe in allowing your tummy to balloon, breathe out letting all of your air out. Draw your belly button up towards your spine, holding your tummy muscle tight. Resume breathing normally while maintaining your abdominal contraction.

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

3. Lower Abdominal Exercises
   While maintaining abdominal contractions described in previous exercise, and keeping right foot on bed, slowly straighten your left knee by sliding your left heel along the bed. Only straighten your leg to the point where you can maintain your abdominal contraction and NOT beyond. Slowly return to the starting position and repeat with the other leg.

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

4. Lower Abdominal Exercises
   Lie on your back with knees bent. Relax your tummy muscles and slowly let your right leg fall out to the side without allowing any movement of your hips. Your hips must remain in contact with the bed (no rocking).

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

5. Lower Abdominal Exercises: Crook Lying
   While maintaining abdominal contraction, and keeping right foot on bed, lift the left foot off the ground and slowly straighten your knee by gliding your foot in the air. Straighten your leg only to the point where you can maintain an abdominal contraction and NOT beyond that. Slowly return to the starting position and repeat with the left leg.

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

Advanced Exercises

... the remaining exercises in this booklet can be started approximately 6 weeks post-surgery.

Bilateral Arm Raises (advanced)
Clasp both hands in front of you and straighten your elbows, raising your hands as high as possible above your head. Bring your hands down behind your head and stretch your elbows back. Relax both arms and rest. Repeat 5 times. Hold 15 seconds. Do not pull on your head and neck.

Standing Posture (advanced)
With your back against the wall, your feet shoulder width apart, knees slightly bent, try to flatten your lower back.

   Hold for _______ seconds.
   Repeat _______ times.
   Do ______ times per day

Back Scratching (advanced)
Holding the end of a towel in one hand, throw it over your shoulder. Place the other hand in the small of your back and grasp the other end of the towel. Move the towel up and down pulling your hands as far up and down your back as possible. Reverse hands and repeat the exercise 5 times and hold 15 seconds.

Neural Glides
Clasp both hands in front of you and straighten your elbows, raising your hands as high as possible above your head. Bring your hands down behind your head and stretch your elbows back. Relax both arms and rest. Repeat 5 times. Hold 15 seconds. Do not pull on your head and neck.

The information in this document is intended solely for the person to whom it was given by the health care team.
Advanced Exercises

Standing Knee Flexion
Stand on your right leg. Hold onto a counter for support. Tighten your tummy. Bend your left leg up towards your buttock (keep your thigh in line with your leg). Keep your buttock tucked under.

Hold for _______ seconds.
Repeat _______ times.
Do _______ times per day

Repeat with Right leg.

Standing Hip Extention
Stand on your right leg. Hold onto a counter for support. Tighten your tummy. Squeeze your buttocks and lift your Left leg backwards keeping your knee straight. Do not lean forward from your waist.

Hold for _______ seconds.
Repeat _______ times.
Add ______ lb. weight to ankle.

Repeat with Right leg.

Standing Hip Abduction
Stand on your left leg, keep your body upright and your tummy tucked in. Hold on to a stable object for support (e.g. counter top). Move your leg sideways. Keep your pelvis level, and knee caps and toes pointed forward. Do not lean sideways while lifting your leg. Return leg to center.

Hold for _______ seconds.
Repeat _______ times.
Add ______ lb. weight to ankle.

Repeat with Right leg.

Bridging
Lie on your back with both knees bent and feet shoulder width apart. Tighten tummy muscles and lift your hips toward the ceiling. Keep pelvis level. Slowly lower hips.

Hold for _______ seconds.
Repeat _______ times.

Repeat with Right leg.

Bridging (Advanced)
Perform bridging exercise and then straighten one knee. Your knees should be level with each other. Slowly lower and then repeat with the other leg.

Hold for _______ seconds.
Repeat _______ times.

Add ______ lb. weight to ankle.

Repeat with Right leg.

Advanced Exercises

Seated Ball Exercises
Start Position Sit on ball with feet flat on the floor. Tighten your core muscles.

Hold for _______ seconds.
Repeat _______ times.
Do _______ times per day

1. Lift one heel off the floor while keeping core muscles tight.

Hold for _______ seconds.
Repeat _______ times.
Do _______ times per day

2. Lift toes of one foot off the floor while keeping core muscles tight. Hold 6 seconds and repeat 10 times.

Hold for _______ seconds.
Repeat _______ times.
Add ______ lb. weight to ankle.

Repeat with Right leg.

3. Lift one foot off the floor while keeping core muscles tight. Do not twist your body while sitting and lifting your leg.

Hold for _______ seconds.
Repeat _______ times.
Add ______ lb. weight to ankle.

Repeat with Right leg.

Standing Hip Extension
Stand on your right leg. Hold onto a counter for support. Tighten your tummy. Squeeze your buttocks and lift your Left leg backwards keeping your knee straight. Do not lean forward from your waist.

Hold for _______ seconds.
Repeat _______ times.

Repeat with Right leg.

Standing Hip Extention
Stand on your right leg. Hold onto a counter for support. Tighten your tummy. Squeeze your buttocks and lift your Left leg backwards keeping your knee straight. Do not lean forward from your waist.

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Hold for _______ seconds.
Repeat _______ times.
Add ______ lb. weight to ankle.

Repeat with Right leg.
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<td>12 Standing Knee Flexion</td>
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<td>13 Standing Hip Extension</td>
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<td>14 Standing Hip Abduction</td>
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<td>15 Bridging</td>
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<td>16 Bilateral Arm Raises</td>
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<td>17 Back Scratching</td>
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<td>18 Neural Glides</td>
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<td>19 Seated Ball Exercises</td>
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To Contact the B.C. Nursing Hotline

Dial 811