

# IMG PHYSICAL THERAPY

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## Ankylosing Spondylitis Home Exercises

Rehabilitation of the Lumbar spine and lower extremities can take a long time. A loss of strength is common after an injury or surgery; however, the strength and range of motion can be regained. It may become frustrating at times but you can be successful with hard work and a lot of determination.

When you are exercising on your own there are some things to remember....

- ◇ Any specific exercise that causes pain is hindering the healing process for your injury and should be modified or discontinued.
- ◇ Re-injuries during the rehabilitation process will slow your progress. If you get recurring pain either lower the resistance; lower the number of sets or repetitions; or reduce the range of motion to avoid the area of pain.
- ◇ Most exercises that do not involve the injured region can be done as long as the exercise does not increase the pain.
- ◇ When in doubt about how much weight to use for exercises, guess low. It is safer and easier to add weight than to hurt your self with too much weight.
- ◇ Consult your Physician or Physical Therapist if any problems arise or if you have any questions regarding an exercise. It is better to make sure that you are doing an exercise correctly than to cause further injury by doing an exercise incorrectly.

These exercises are to be done 3 to 5 days per week.  
Perform 2 sets of 15 repetitions for strengthening exercises

Ice / Moist Heat for 15 minutes before / after exercising.



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## Trunk Stability:



### SEATED MARCHING

While seated in a chair, lift up your foot and knee, set it down and then perform on the other leg. Repeat this alternating movement.



### Seated Row

Twist band around feet. Hold handles by knees, engage core and bring hands towards chest squeezing shoulder blades together.



### CHAIR SEATED SHOULDER EXTENSION

While seated on a CHAIR, pull on elastic band downward keeping your elbows straight.

Maintain erect posture the entire time.

## Cardio:



### Run/Walk/Jog:

Start with short distances as tolerated. Once endurance/aerobic capacity increases gradually increase the distance/frequency.



### Aquatic Therapy

Please see ImgPT aquatic therapy exercises for more information and specific exercises.



### STATIONARY BIKE

STEP 1: Slowly begin to pedal, making full rotations if possible.

\*Any pain felt, stop and notify your PT\*

## Lumbar Flexibility:



**LOWER TRUNK ROTATIONS - LTR - WIG WAGS**

Lying on your back with your knees bent, gently rotate your spine as you move your knees to the side and then reverse directions and move your knees to the other side. Repeat as you move through a comfortable range of motion.



**SINGLE KNEE TO CHEST STRETCH - SKTC**

While Lying on your back, hold your knee and gently pull it up towards your chest.



**CHILD POSE - PRAYER STRETCH**

While in a crawl position, slowly lower your buttocks towards your feet until a stretch is felt along your back and or buttocks.

## Balance:



**WARRIOR 2 POSE - YOGA - VIRABHADRASANA 2**

Start by taking a step into a lunge position so that your front knee is bent and your back knee is straight. The toes of your front foot should be pointed straight ahead and toes of your back foot should be pointed to the side. Tighten abdominals drawing naval inward towards spine. Reach one arm out forward and the other arm back. Your chest and trunk should be turned to the side. Your head should be pointed forward.



**CRESCENT LUNGE POSE - YOGA**

Start in a standing lunge position (large step forward with one foot). Position your feet so that both feet are pointed straight ahead.

Brace at the abdominals drawing your naval towards your spine. Bend your front knee keeping the knee behind your toes. You can allow your back knee to bend deeper to progress this pose. Keep back straight and in neutral spine position. Reduce step length if back arch too much. Raise arms up



**TREE POSE MODIFIED - YOGA - VRKSASANA**

Tighten abdominals drawing naval inward toward spine. Stand on one leg and place the foot of the other leg on the stance leg below the knee as shown. Do not place the non-stance foot on the knee joint line.

The non-stance hip should be externally rotated that the knee is pointed out to the side.

Place the palms of your hands together at chest