Scapular Mechanics Program

A home program for scapular dyskinesis — abnormal movement of the shoulder blade on the ribcage

Also written *scapular dyskinesia*. The two spellings refer to the same condition and are used interchangeably.

The shoulder blade is the platform the arm moves from. When it does not position or rotate properly, everything attached to it works under abnormal stress.

Two things have to happen together. The muscles at the back of the shoulder blade need to work better, and the muscles across the front of the chest need to get longer. Tight pectoral muscles hold the shoulder blade forward, so working the back while the front stays tight means training against a restraint that has not moved. That is why the stretching comes first and continues throughout.

Why This Program May Look Different

If you have done shoulder blade exercises before, you may expect lying-down raises and band rows. **This program is built around control rather than strength**, because that is what the problem usually is. The muscles are often not weak in the ordinary sense — they are firing in the wrong order, at the wrong time, from the wrong position.

You will still think of these as strengthening exercises, and that is fine. They will feel like strengthening, and your muscles will get stronger doing them. But what determines whether this works is not how much weight you eventually lift — it is whether the shoulder blade learns to move correctly. That is why the early exercises use no weight at all, why they are done standing with the legs and trunk involved, and why adding load too early tends to stall progress rather than speed it up.

How to Use This Program

- **Do it most days.** Ten to fifteen minutes, five or six days a week, beats an hour twice a week. Motor learning needs repetition.
- **Work through the phases in order.** Mobility, then control, then load. Each phase earns the next.
- **Use a mirror early on.** You cannot see your own shoulder blade, and that missing feedback is part of why the movement goes wrong. A mirror or a phone camera helps more than you would expect.
- **Quality over quantity, always.** Ten well-controlled repetitions beat thirty sloppy ones. If your form breaks down, the set is finished.
- **Expect six to twelve weeks before meaningful change.** Published programs average around twelve.

Two rules that apply throughout the first six weeks

- **Keep the arm close to your body.** The further the arm is from your trunk, the harder the shoulder blade has to work. Distance from the body is how this program progresses — not weight.
- **No shrugging.** Do not lift the shoulders toward your ears during any exercise. Shrugging recruits the muscle that is usually already overworking, and reinforcing it works against you.

About Pain

- **Mild muscle fatigue and aching during and after exercise is expected.** This is most noticeable in the first two weeks.
- **Sharp pain, pinching, or pain that lingers into the next day means the exercise needs modifying.** Reduce the range, reduce the distance from your body, or stop that movement and raise it at your next visit.
- **You should not be working through pain.** A shoulder that hurts will not recruit the right muscles.

Stop and contact the office if you develop: new or increasing weakness · numbness or tingling down the arm · a sudden loss of motion · pain that is significantly worse rather than gradually better after two weeks.

Phase 1 — Restore Mobility

WEEK 1 ONWARD · CONTINUE THROUGHOUT THE PROGRAM

Tight structures physically prevent the shoulder blade from moving properly. Stretching comes first for that reason — you cannot train a movement the body is mechanically blocked from making.

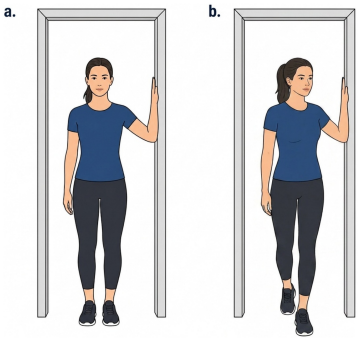
Dose for all Phase 1 stretches: hold 30 seconds · 2–3 repetitions · once or twice daily

1. Doorway Pectoralis Stretch

Stand in a doorway with your forearm on the frame, elbow at shoulder height and bent to 90 degrees. Step forward with the same-side foot until you feel a stretch across the front of the chest.

Cue: felt across the front of the chest, not in the front of the shoulder joint.

Common error: arching the low back to create the stretch. Keep the ribs down.

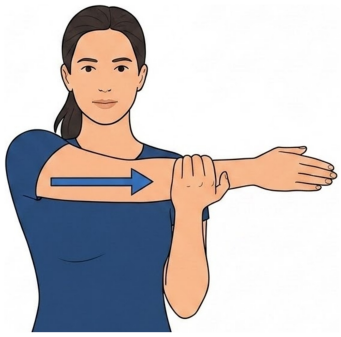


2. Cross-Body Stretch

Bring the affected arm across the chest at shoulder height. Use the opposite hand to draw it further across, pulling at the upper arm rather than the elbow.

Cue: felt at the back of the shoulder.

Common error: pulling at the elbow, which rotates the shoulder instead of stretching the back of it.

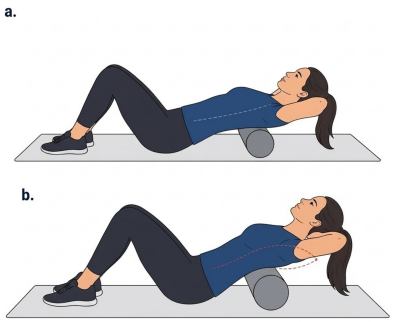


3. Thoracic Extension Over a Foam Roller

Lie with a foam roller across the mid-back, perpendicular to the spine, hands supporting the head. Gently extend backward over it. Move the roller a few centimeters and repeat at several levels.

Cue: the movement comes from the mid-back, not the low back.

Common error: flaring the ribs and extending through the lumbar spine.



4. Latissimus Dorsi Stretch

Kneel in front of a bench or chair, place both forearms on it, and sink the chest toward the floor with the arms extended overhead.

Cue: felt along the side of the trunk and under the armpit.

Common error: letting the low back sag. Keep a neutral spine.

Phase 2 — Retrain Control

WEEK 1–2 ONWARD · THE CORE OF THIS PROGRAM · NO WEIGHT AT ALL IN THIS PHASE

Several of these exercises use the legs and trunk to produce the shoulder blade movement. That is deliberate — the shoulder blade transfers force between the trunk and the arm, and training it in isolation misses the job it actually does. The others work the shoulder blade against your own body weight, with the hand fixed against a wall, which is a forgiving way to load it. Keep the arm close to your body throughout this phase.

These will feel easy at first, and that is intentional. The work here is precision, not effort. If an exercise feels like it is not doing much, check yourself in a mirror — most people find they are shrugging, or moving the arm rather than the shoulder blade, and correcting that is the entire point of this phase.

5. Conscious Correction

Stand tall facing a mirror. Gently draw the shoulder blades down and slightly back — as though sliding them into your back pockets. Hold 5 seconds, then relax completely.

Dose: 10 repetitions, two to three times daily.

Cue: a small movement — roughly 30% of maximum effort, not a hard squeeze.

Common error: shrugging upward. Watch for this in the mirror. It is the most common fault in this program.

6. Wall Pushup

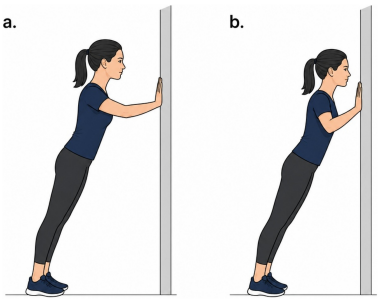
Stand facing a wall, a little less than arm's length away, hands flat on the wall at shoulder height and shoulder width apart, arms straight. Keep your body in one straight line from head to heels. Bend the elbows to bring your chest toward the wall, then push back — and at the end of the push, keep pressing until you feel the shoulder blades spread apart and the upper back round very slightly.

Dose: 10 repetitions, building toward three sets.

Cue: **the last inch of the push is the exercise.** Pressing the chest away after the elbows are already straight is what recruits the serratus anterior — the muscle that holds the shoulder blade flat against the ribcage.

Making it easier or harder: step closer to the wall to make it easier, further away to make it harder. Distance from the wall is how this progresses. Do not move to the floor.

Common error: shrugging as you push, letting the low back arch, or stopping the moment the elbows lock rather than finishing with the push-away.



7. The Lawnmower

Start bent forward at the hips with the working arm hanging down toward the front of your knee. Stand up by extending the hips and trunk, rotating slightly away from that arm, and let the elbow bend so the hand finishes close to your ribs — the motion of pulling the cord to start a lawnmower.

Dose: 10 repetitions each side.

Cue: hips first, then trunk rotation, then the shoulder blade follows. The arm stays close to your body the whole way up.

Common error: initiating with the arm, or letting the arm drift away from the body.

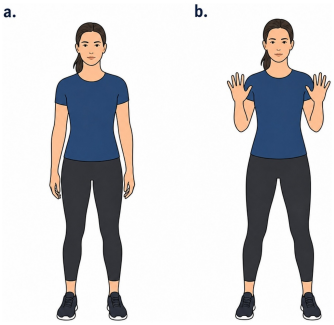
8. The Robbery

Stand tall with your arms relaxed at your sides. Keeping your elbows tucked in against your ribs, bend them and turn your palms forward, bringing your hands up to about chest height — the “hands up” position the exercise is named for. As the hands come up, draw the shoulder blades down and back. Hold for 5 seconds, then lower under control.

Dose: 10 repetitions.

Cue: **hands up, shoulders down.** The elbows stay against the ribs the whole time — this is a short-lever exercise, and the arm staying close to the body is what keeps it one.

Common error: shrugging as the hands come up, or letting the elbows drift away from the ribs. Both turn an easy exercise into one the wrong muscles do.



Phase 3 — Add Difficulty, Then Add Load

ONCE PHASE 2 IS PERFORMED COMFORTABLY AND WITHOUT SYMPTOMS

How to progress — one step at a time, in this order

- **First, distance from the body.** Move the arm further from your trunk before you add any weight.
- **Then, volume.** Start at **three sets of ten repetitions with no weight at all.** Build up toward **five sets**, adding a set only when the previous number is completed without fatigue and without your form breaking down. Reaching five comfortable sets is the signal that you are ready for resistance.
- **Then, light free weights.** Two to three pounds maximum. Free weights come before elastic bands, because a band’s resistance changes through the range and is harder to control.
- **Overhead work comes last.**

9. The Fencing Exercise

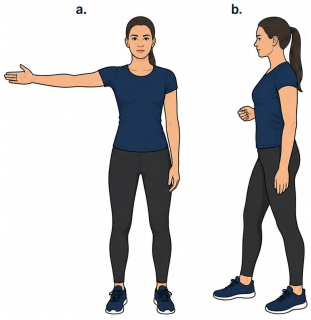
Stand tall with the arm out to the side at shoulder height, elbow straight, palm open. Take a step sideways, and as you step, bring the arm down and in toward your body — the elbow bending so the hand finishes in front of your ribs — while drawing the shoulder blade back. The step and the arm move together.

Dose: 10 repetitions each side.

Cue: **the step starts the movement.** As with the lawnmower, the legs lead and the shoulder blade follows. The arm should be the last thing you think about, not the first.

Why it belongs here: this is the exercise in which the arm starts furthest from your body, which is exactly what makes it a progression rather than a starting point.

Common error: starting with the arm above shoulder height, shrugging as the arm comes down, or doing it with the feet planted — which turns it into an arm exercise and removes the point of it.



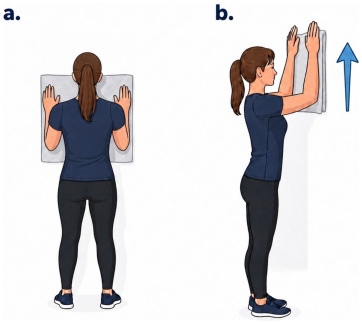
10. Wall Slide With Forward Pressure

Place your forearms on a wall with a foam roller or folded towel between forearms and wall. Press gently into the wall and slide the forearms upward, then lower.

Dose: 10 repetitions.

Cue: maintain steady forward pressure throughout — that pressure is what recruits the serratus anterior.

Common error: shrugging as the arms rise, or sliding higher than you can control. Limit the height to what you can do without shrugging.



11. Prone Y LATER STAGE

Lie face down with the arm hanging off the edge of a bed or bench. Set the shoulder blade first, then lift the arm overhead into a Y position, thumb toward the ceiling. Lower slowly.

Dose: 10 repetitions. No weight initially; progress to 1–2 kg.

Cue: shoulder blade sets first, arm follows second.

Common error: shrugging, or lifting with the low back.

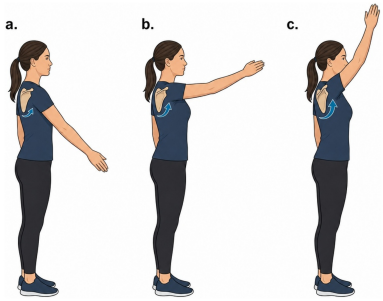
12. Overhead Progression LATER STAGE

Controlled arm elevation, maintaining the shoulder blade position you have been training. First to 30–45 degrees, later to 90 degrees, and above only when that is comfortable.

Dose: begin with 5–10 repetitions, no weight.

Cue: set the shoulder blade first, then move the arm.

Common error: progressing here too early. Overhead work belongs at the end of this program, not the start.



Week by Week

Week	Focus
1–2	Mobility daily. Conscious correction with a mirror. Wall pushups, standing close to the wall. No weight, no shrugging.
3–4	Continue mobility. Add the lawnmower and the robbery. Still no weight.
5–8	Add the fencing exercise and wall slides. Build from three sets of ten toward five, with no weight.
8–12	Add light free weights. Prone Y. Begin controlled overhead progression. Add kinetic chain work.

Advance when you can complete all repetitions with good form and no increase in symptoms. **Fatigue is the limit that matters** — if the last repetitions of a set are noticeably worse than the first, you are at your current ceiling and should stay there rather than adding another set. If form breaks down at a new level, step back one stage. That is information, not failure.

For Overhead Athletes

If you throw, serve, or swim, the program does not stop at the shoulder blade. Force is generated in the legs and trunk and transmitted through the scapula to the arm. Add two or three times weekly:

- **Single-leg balance** — 30 seconds each side, progressing to an unstable surface
- **Hip hinge patterning** — deadlift or good-morning pattern with light load
- **Anti-rotation holds** — band or cable Pallof press, 20–30 seconds each side
- **Closed-chain scapular work** — quadruped rocking, plank protraction

For Desk Workers

Ergonomic adjustment helps less than most people expect. **Sustained position is the problem more than any specific position.** Monitor top at roughly eye level; forearms supported with elbows near the body; feet flat. **Most important: move every 30–45 minutes.** Stand, roll the shoulders, do a set of conscious corrections. The best posture is the next one.

Keeping the Result

One finding from the research is worth knowing: **the gains from this kind of retraining can be lost if the training stops entirely.** This is not a course of treatment that finishes and is forgotten. Once the shoulder is comfortable, a reduced maintenance version — the mobility work and a set of conscious corrections most days — protects what you have built.

If It Is Not Working

Reassess at six weeks. Ask two questions: has anything changed, and are you doing the program most days? A program that has not worked after a genuine six-week effort is useful information — it usually means the diagnosis needs revisiting, there is a structural problem the exercises cannot address, or the program needs adjusting to your mechanics. All three are manageable, but they need a visit rather than more repetitions.

Come back sooner if: pain is increasing rather than settling · new weakness has developed · numbness or tingling has appeared in the arm · you have lost motion rather than gained it.

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References: Kibler WB, Sciascia AD. Current Views of Scapular Dyskinesis and its Possible Clinical Relevance. *Int J Sports Phys Ther.* 2022;17(2). · Panagiotopoulos AC, Crowther IM. Scapular Dyskinesia, the forgotten culprit of shoulder pain and how to rehabilitate. *SICOT-J.* 2019;5:29.