

VIBEMOTION LABS · ATHLETE RECOVERY

PHASE 2 OF 5

Mobility & *Early Strength*

\$25

Restore full pain-free range of motion and rebuild foundational muscle strength in the injured area. Timeline: Weeks 2–5 · Pain target: 0/10 during all exercises

PHASE GOALS

- Restore full or near-full range of motion in the affected joint
- Rebuild basic strength in the injured muscle groups (target: 50% LSI vs. uninvolved side)
- Eliminate antalgic (pain-protecting) movement compensations
- Introduce light resistance training without provoking symptoms
- Build tissue tolerance for increased loading in Phase 3

PAIN MONITORING RULE

Before each session: record pain score (0–10). Do not exercise if pain > 4/10. During exercise: pain must stay ≤ 3/10. Stop if it exceeds this at any point. After session: pain must return to your pre-exercise baseline within 30 minutes.

PHASE 2 EXERCISES

Perform 5 days per week. Rest at least 1 day between strength sessions.

01 Standing Calf Raise

Calf / Soleus
Strength

SETS	REPS / TIME	LOAD	TEMPO	REST
3	15–20 reps	Bodyweight → light dumbbell	2 up / 1 hold / 3 lower	60 sec

HOW TO PERFORM

1. Stand behind a sturdy chair or at a wall for balance support. Feet hip-width apart, parallel.
2. Distribute weight evenly across both feet, pressing through the balls of your feet.
3. Slowly raise both heels off the ground as high as comfortable, squeezing your calf at the top.
4. Pause for 1 second at the peak contraction — resist the urge to drop quickly.
5. Lower your heels back to the floor with full control over 3 seconds.
6. Once 3×20 bilateral is pain-free, progress: hold a light dumbbell (5–10 lb) in each hand.
7. Final progression: perform on the injured leg only.

COACHING CUES

- *Imagine you are trying to touch the ceiling with the crown of your head — stand tall.*
- *Do not roll your ankles outward — keep heels directly behind toes throughout.*
- *The 3-second lower is where most of the strengthening happens — do not rush it.*

PROGRESS WHEN

When 3×20 single-leg on the injured side is pain-free with controlled movement.

02 Seated Resistance Band Dorsiflexion

Tibialis Anterior /
Ankle Mobility

SETS	REPS / TIME	LOAD	TEMPO	REST
3	15 reps	Light resistance band	2 sec pull / 2 sec return	45 sec

HOW TO PERFORM

1. Sit on the floor or a chair with the injured leg extended in front of you.
2. Loop a light resistance band around the ball of your foot. Anchor the other end to a heavy object or a closed door.
3. Starting with the foot pointed (plantarflexed), slowly pull your toes toward your shin against the band's resistance.
4. Pull as far as comfortable — aim to feel a strong contraction in the shin muscle.
5. Hold for 2 seconds at end range.
6. Slowly return to the starting pointed position over 2 seconds — resist the band; do not let it snap back.

7. Repeat without letting the band go slack.

COACHING CUES

- *The motion should come from the ankle, not the knee or hip.*
- *Keep the heel on the ground — the band should be pulling the forefoot only.*
- *If you feel numbness in the foot, check band placement — it should cross the ball of the foot, not the toes.*

PROGRESS WHEN

When 3×15 with light band is effortless and pain-free — move to medium resistance band.

03 Supine Hamstring Stretch (Active)

Hamstring
Flexibility /
Neural Mobility

SETS	REPS / TIME	LOAD	TEMPO	REST
3	45 sec hold	Bodyweight / resistance band optional	Slow and sustained	30 sec

HOW TO PERFORM

1. Lie on your back. Bend the uninvolved knee with foot flat. Extend the injured leg upward.
2. Wrap your hands (or a resistance band) behind the thigh to support the leg.
3. Slowly straighten the knee toward the ceiling as far as comfortable.
4. When you feel a strong but not painful pull behind the thigh or knee, stop and hold.
5. Actively push your heel gently toward the ceiling to add a light active component.
6. After 45 seconds, slowly bend the knee and lower the leg — do not drop it.
7. Compare flexibility between both legs — note any significant differences.

COACHING CUES

- *Breathe steadily throughout the hold — do not hold your breath.*
- *The stretch should be felt in the belly of the hamstring (middle of the back of the thigh), not behind the knee.*
- *If you feel nerve-like sensations (tingling, shooting), ease off 10° and consult your clinician.*

PROGRESS WHEN

When you achieve > 70° hip flexion with knee near-straight (within 15° of full extension).

■ *Sharp pain behind the knee may indicate hamstring strain at the insertion — stop and seek assessment.*

04 Standing Hip Abduction with Band

Glute Med / Hip
Stabiliser

SETS	REPS / TIME	LOAD	TEMPO	REST
3	15 reps per side	Light resistance band around ankles	Controlled throughout	60 sec

HOW TO PERFORM

1. Stand upright with a light resistance band looped just above both ankles.
2. Hold a wall or chair lightly for balance — use fingertip contact only, not a grip.
3. Standing on the uninvolved leg, slowly lift the injured leg directly out to the side.
4. Keep your hips level — do not lean your torso to the side to achieve range.
5. Lift until you feel a strong contraction in the side of the hip/buttock — typically 30–45°.
6. Pause at the top for 1 second.
7. Slowly return the leg to the starting position, resisting the band.
8. Do not let the band snap your leg back — control every millimetre of the return.

COACHING CUES

- *Think about keeping both hip bones level — imagine a glass of water sitting on each hip.*
- *The movement should come from the hip joint, not from the lower back or waist.*
- *If you feel lower back pain instead of glute activation, reduce range of motion and focus on posture.*

PROGRESS WHEN

When 3×15 with light band is effortless — progress to standing on the injured leg while lifting the uninvolved leg.

05 Wall Slide Squat (Partial Range)

Quad / Glute /
VMO Activation

SETS	REPS / TIME	LOAD	TEMPO	REST
3	12 reps	Bodyweight — back against wall	3 sec lower / 2 hold / 3 sec rise	75 sec

HOW TO PERFORM

1. Stand with your back flat against a smooth wall, feet 18–24 inches out from the wall, hip-width apart.
2. Ensure feet are parallel or very slightly turned out (5–10°).
3. Slowly slide your back down the wall, bending both knees simultaneously.
4. Lower only until pain-free — start with 30° of knee bend and increase by 5–10° per session.
5. Hold at the bottom for 2 seconds — hips should remain above knee height at all times in this phase.
6. Push evenly through both feet and slide back up the wall over 3 seconds.
7. Do not let your knees cave inward (valgus) — they should track directly over your second toe.

COACHING CUES

- *Press your entire back flat against the wall — no arch, no gap behind the lower back.*
- *Imagine pushing the floor away from you on the way up — drive through heels AND balls of feet.*
- *If the injured knee tracks inward, place a small ball or rolled towel between your knees and squeeze gently.*

PROGRESS WHEN

When 3×12 at 60° knee bend is pain-free with perfect form — begin Phase 3 goblet squat.

■ *Stop if you feel sharp kneecap pain or grinding sensations.*

06 Side-Lying Hip External Rotation (Clam Shell)

Glute Med /
Deep Hip
Rotators

SETS	REPS / TIME	LOAD	TEMPO	REST
3	15 reps	Bodyweight → light resistance band above knees	Controlled throughout	45 sec

HOW TO PERFORM

1. Lie on your uninvolved side with hips stacked directly on top of each other.
2. Bend both knees to approximately 45° — like sitting in a chair sideways.
3. Keep your feet together throughout the entire movement.
4. Keeping the feet touching, slowly rotate the top knee upward toward the ceiling — like a clamshell opening.
5. Open as far as you can without your top hip rolling backward.
6. Hold at the top for 1 second, squeezing the glute firmly.
7. Slowly lower the knee back to the starting position.
8. To progress: loop a light resistance band just above both knees.

COACHING CUES

- *Do not let your pelvis rock backward as you lift the knee — stay stacked.*
- *If you feel nothing in the glute, you may be compensating with the hip flexors — reduce range and focus on squeezing.*
- *The top hip should feel worked; the lower hip should feel stable.*

PROGRESS WHEN

When 3×15 with medium resistance band is easy — progress to standing hip abduction.

07 Ankle Alphabet — Full Range

Ankle Mobility /
Proprioception

SETS	REPS / TIME	LOAD	TEMPO	REST
2	Full alphabet A–Z	Bodyweight	Slow, deliberate letters	30 sec between rounds

HOW TO PERFORM

1. Sit in a chair with the injured leg extended, foot off the ground.
2. Using only your ankle joint (not your knee or hip), trace each letter of the alphabet in the air.
3. Make each letter as large as comfortable — aim to use your full available range of motion.
4. Capital letters only. Write each letter slowly and deliberately.
5. After completing the alphabet, rest 30 seconds, then repeat.

6. With each session, try to make the letters slightly larger as range of motion improves.

COACHING CUES

→ *This is both a mobility AND a proprioception exercise — slow, conscious movement trains joint position sense.*

→ *Focus on feeling where your ankle is in space throughout — don't rush.*

→ *Note which letters feel restricted — they will tell you which directional ranges need most work.*

PROGRESS WHEN

When full alphabet is pain-free and letters are large and fluid — advance to balance board.

PHASE 2 COMPLETION CRITERIA

- All Phase 2 exercises completed pain-free (0/10) for at least 5 consecutive sessions
- Range of motion in the injured joint is within 15° of the uninvolved side
- Single-leg calf raise: minimum 10 consecutive reps pain-free
- Wall slide squat: minimum 60° knee bend without pain or valgus collapse
- No increase in swelling or pain 24 hours after any session