

H2F P3T Program

0-18 Weeks

**Postpartum at Home
Guide**

Disclaimer

The views expressed are those of the authors and do not reflect the views of the Department of Defense, Department of the Army, or the U.S. Government.

Disclosure

This certifies the authors, families, and spouses/partners do not have any financial relationships with any industry that is relevant to the subject matters discussed in this handout.

Outline

Postpartum Recovery Timeline

Cozean Screen

Breath, Core, and Pelvic Floor Connection

Safety Considerations

Programming Considerations

0-18 Weeks Postpartum at Home Exercise Guide

0-2 Weeks Postpartum

3-4 Weeks Postpartum

5-6 Weeks Postpartum

7-8 Weeks Postpartum

9-12 Weeks Postpartum

Return to Run (R2R) Screen & Protocol

13-18 Weeks Postpartum

Return to Run (R2R) Screen & Protocol

Additional Resources

Army Regulation

Postpartum Recovery Timeline

Below is a list of typical recovery timelines postpartum. Please consult your medical provider with questions about your own personal postpartum recovery timeline.

- Uterus: 6-8 weeks
- Pelvic floor: minimum 6 months
- Diastasis Recti: 8 weeks-12+ months
- Joints: 3+ months
- Balance: 6-12 weeks
- Breathing: 2-3 days
- Cardiovascular: 6-12 weeks
- Posture: 6+ weeks
- C-section: 6-12+ weeks

Cozean Screen

Instructions: Please check all that apply

- ☐ I sometimes have pelvic pain (in genitals, perineum, pubic or bladder area, or pain with urination) that exceeds a '3' on a 1-10 pain scale, with 10 being the worst pain imaginable.
- ☐ I can remember falling onto my tailbone, lower back, or buttocks (even in childhood).
- ☐ I sometimes experience one or more of the following urinary symptoms:
 - ☐ Accidental loss of urine.
 - ☐ Feeling unable to completely empty my bladder.
 - ☐ Having to void within a few minutes of a previous void.
 - ☐ Pain or burning with urination.
 - ☐ Difficulty starting or frequent stopping/starting of urine stream.
- ☐ I often or occasionally have to get up to urinate two or more times at night.
- ☐ I sometimes have a feeling of increased pelvic pressure or the sensation of my pelvic organs slipping down or falling out.
- ☐ I have a history of pain in my low back, hip, groin, or tailbone or have had sciatica.
- ☐ I sometimes experience one or more of the following bowel symptoms:
 - ☐ Loss of bowel control.
 - ☐ Feeling unable to completely empty my bowels.
 - ☐ Straining or pain with a bowel movement.
 - ☐ Difficulty initiating a bowel movement.
- ☐ I sometimes experience pain or discomfort with sexual activity or intercourse.
- ☐ Sexual activity increases one or more of my other symptoms.
- ☐ Prolonged sitting increases my symptoms.

If you have checked 3 or more boxes, it is recommended to schedule an appointment with a pelvic floor occupational therapist or pelvic floor physical therapist (PFOT or PFPT).

Source:

https://docs.wixstatic.com/ugd/d1026c_42a0fda8e5644930950d754619586614.pdf

Breath, Core, and Pelvic Floor Connection

The core and pelvic floor go through a lot of changes during pregnancy and postpartum. We can use our breath to help us stay connected and engage the core and pelvic floor while working out.

Our core muscles are more than just your “6 pack”. They are a group of muscles that wrap around your trunk into your spine. Your pelvic floor is a group of muscles at the base of your pelvis that help hold in and release urine/feces and play a role in sexual gratification.

Below is a way to coordinate your breath, core, and pelvic floor:

- 1) Inhale and let your rib cage expand as you relax your core and pelvic floor.
- 2) Exhale while thinking of gently zipping up the middle of your core starting from your pubic bone, moving up to your rib cage. You should also feel your pelvic floor gently lift. This should be no more than 2-3/10 effort.
- 3) Repeat the above 4x taking approximately 3-4 seconds to inhale and 4-6 seconds to exhale.

This breath, core and pelvic floor coordination and awareness practice is built in throughout this 0-18 week guide to help you connect with and coordinate your core and pelvic floor in different positions that you may find yourself in throughout the day.

Safety Considerations

Please consult and be cleared by your medical provider before starting or continuing this program if any adverse reactions or setbacks occur.

	STOP exercising and contact medical provider	Pause activity/exercise and REST	Ask for a PFOT or PFPT Referral
Notes		<p>Sit down and drink water until symptoms subside or resume exercise the next day.</p> <p>When restarting, make sure to include longer rest breaks between sets and/or exercises.</p> <p>If symptoms continue with restarting exercise, contact medical provider.</p>	<p>If you have already tried performing the exercises in a pain free range of motion.</p> <p>Can continue to work out as long as long as symptoms don't increase. Adjust exercises as tolerated.</p>
Signs/Symptoms	Swelling of face and hands	Difficulty breathing	Pain/Discomfort
	Severe headaches	Nausea	Incontinence
	Persistently dizzy or lightheaded	Dizzy or lightheaded	Leaking
	Palpitations or chest pain	Vomiting	Heaviness in the vagina
	Difficulty walking because of pain	Excessive muscle soreness or pain	Bulging of the stomach
		Fatigue	Pelvic pressure
		Sudden sharp pain	Diastasis Recti and/or Coning of abs
		Increase in vaginal bleeding	

*PFOT or PFPT (Pelvic Floor Occupational Therapist or Pelvic Floor Physical Therapist)

Programming Considerations

*Drink plenty of water

*It is recommended to have rest days in between workouts, but YOU choose which days of the week work best for you and your workouts. On rest days you can go for a walk, but your body's recovery should be the focus during this time.

*ALL exercises are designed to be performed bodyweight under the assumption many of you will not have access or time to go to the gym. As you progress, if any exercise becomes too easy, slow down the tempo for each rep OR if you have access to weights or items that can be used as weights, you may add when appropriate.

*If you miss a workout or two here and there, just continue back to where you left off. However, if you miss a week or two, repeat the last week you completed to minimize the risk of injury.

*If you are cleared and ready to progress exercises beyond bodyweight, you may add weights. If you do not have weights, find something around the house to utilize as a weight (car seat, diaper bag, baby, etc.).

*If you need assistance on how to safely progress exercises, reach out to your BDE Strength and Conditioning Coach or P3T Instructor Trainer (IT) who can guide you to the appropriate resources for assistance.

**0-18 Weeks
Postpartum at Home
Exercise Guide**

0-2 Weeks Postpartum

Emphasis: Rest & Walking

Session Focus: Rest & Recovery

Mental Readiness

- During the first two weeks postpartum you may feel a wide range of emotions. From joy, excitement, and fulfillment to anxiety, tears, and fatigue. It is essential during this time to rely on your support networks for emotional support.

Spiritual Readiness

- Consider Community- “With Whom Do I Spend My Life?”
 - o What mature parents do you trust to ask questions for advice, and are you willing to receive it?

Nutritional Readiness

- Nutrition is essential to postpartum recovery and to provide energy if you are breastfeeding. Focus on eating nutrient-rich foods and drinking plenty of water, aiming for 16 cups or 128 oz of water each day.

Sleep Readiness

- You will experience disrupted sleep from frequent wakings from the baby. Be flexible with your sleep routine and ask for help with the baby so that you can rest.

Physical Readiness

- Focus on resting and recovery of your body.
- Walk at least 2days/week for 5-15 minutes (up to every day).

3-6 Weeks Postpartum

3-6 Weeks Postpartum

Emphasis: Movement patterns

Session Focus: Total body mobility, bodyweight movement patterns, pelvic and core control

Mental Readiness

- Communicate openly with your social support system about your emotional well-being. If you are experiencing feelings of anxiety, guilt, panic, irritability, or depression, please reach out to your medical provider and let them know.

Spiritual Readiness

- Consider Identity- “Who am I?”
 - o What kind of parent do you want to be?

Nutritional Readiness

- You may find it difficult to eat regularly or have sit down meals throughout the day. It can be helpful to have nutrient dense, convenient snacks readily available to incorporate into your busy day with baby. Ex: trail mix, yogurt and fruit, and granola bars.

Sleep Readiness

- Take naps as needed. Start to establish a bedtime routine and ask for help for nighttime caregiving if needed.

Physical Readiness

- If you have increased bleeding with increased activity, stop and take a break. Increased bleeding is a sign your body isn't ready for that level of activity yet.
- Exercises are bodyweight only.
- Start with 2 times/week, then progress to 3 times/week.
- Walk 5-30 minutes on other days.

Sample Week Template Suggestions

- This is a sample of how you can structure your week. Choose what will work best in YOUR life/schedule to maintain consistency.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Option 1	Functional Movements 1	Walk	Walk	Functional Movements 2	Walk	Rest	Rest
Option 2	Walk	Functional Movements 1	Walk	Rest	Functional Movements 2	Rest	Walk
Option 3	Functional Movements 1	Walk	Functional Movements 2	Walk	Functional Movements 3	Walk/Rest	Rest

3-4 Weeks Postpartum

*Exercises can be completed throughout the day or at one time.

*Please consult and be cleared by your medical provider before starting or continuing this program and if any adverse reactions or setbacks occur.

Functional Movements 1 (2x5ea)	Functional Movements 2 (2x5ea)
Breath Core Pelvic Floor Connection Standing Quadruped Seated Laying on Back	Breath Core Pelvic Floor Connection Standing Quadruped Seated Laying on Back
Pelvic Tilt	Pelvic Tilt
Floor Slide	Prone T & Y
Supine Heel Slide	Supine Marching
Windshield Wiper (supine)	Windshield Wiper (seated)
Open Book	Quadruped Thoracic Reach Through
Prone W & I	Quadruped Hip Abduction (bent leg)
Quadruped Toe Slide	RDL (hands on head)
SL Balance x:30ea	Calf Raise
Sumo Squat	Squat
Ground to Stand	Incline Pushup (wall)
RDL (hands on head)	Chest Stretch (wall)

*Walk 5-15 minutes on other days

*Can do up to every day

Link for all exercise videos:

<https://www.youtube.com/playlist?list=PLXwDvBhn0yYF08iDPNkbPcrelhAfs9biZ>

5-6 Weeks Postpartum

*Please consult and be cleared by your medical provider before starting or continuing this program and if any adverse reactions or setbacks occur.

Functional Movements 1 (2x5ea)	Functional Movements 2 (2x5ea)	Functional Movements 3 (2x5ea)
Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped Seated	Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped Seated	Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped Seated
Pelvic Tilt	Supine Heel Slide	Pelvic Tilt
Floor Slide	Childs Pose-Alt	Open Book
Quadruped Thoracic Reach Through	Prone T & I (2 sec hold)	Supine Marching
½ Kneeling Adductor Stretch	Windshield Wiper (seated)	½ Kneeling Quad/Hip Flexor Stretch
Crawling	Glute Bridge	Quadruped Hip Abduction (bent leg)
SL Balance x:30ea	Thoracic Extension (wall)	Reverse Lunge
Squat	RDL (hands on head)	Prone Y (2 sec hold)
Bent Over W (2 sec hold)	Incline Pushup (wall/chair/couch)	SL RDL (wall support)
Calf Raise (2 sec hold)	Handwalk	Quadruped Toe Slide

*Walk 10-30 minutes on other days

Link for all exercise videos:

<https://www.youtube.com/playlist?list=PLXwDvBhn0yYGhHQNkqQM4gDiNcdWExHI1>

7-8 Weeks Postpartum

7-8 Weeks Postpartum

Emphasis: Integration into strength and hip stability

Session Focus: Total body strength exercises with a focus on single leg hip stability.

Mental Readiness

- Prioritize short breaks in your day for self-care. Connecting with other postpartum Soldiers can be helpful to hear shared experiences and feel supported in your postpartum journey.

Spiritual Readiness

- Consider Hope- “What do I believe about the future?”
 - o How would you explain to your children how you have thrived and struggled with hope in your life?

Nutritional Readiness

- Prioritize staying hydrated. If you are breastfeeding, becoming dehydrated can negatively impact your breastmilk supply. If plain water is unappealing, you can add slices of fresh or frozen fruit to your water bottle to add flavor.

Sleep Readiness

- Have a consistent bedtime routine to help signal you and baby that it's time for sleep. Continue to take short naps during the day if needed.

Physical Readiness

- Walk 20-40 minutes on other days (can use elliptical or bike if you prefer).

Sample Week Template Suggestions

- This is a sample of how you can structure your week. Choose what will work best in YOUR life/schedule to maintain consistency.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Option 1	Workout 1	Walk	Walk	Workout 2	Walk	Workout 3	Rest
Option 2	Rest	Workout 1	Walk	Workout 2	Rest	Workout 3	Walk
Option 3	Workout 1	Walk	Workout 2	Walk	Workout 3	Walk/Rest	Rest

7-8 Weeks Postpartum

*Please consult and be cleared by your medical provider before starting or continuing this program and if any adverse reactions or setbacks occur.

Workout 1 (2-3x5-8ea) Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped	Workout 2 (2-3x5-8ea) Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped	Workout 3 (2-3x5-8ea) Breath Core Pelvic Floor Connection (CHOOSE 1) Standing Quadruped
Floor Slide	Deadbug (keep legs bent, maintain pelvic tilt)	Open Book
Quadruped Thoracic Reach Through	Childs Pose-Alt	Quadruped Shoulder Tap
½ Kneeling Adductor Stretch	Prone I (2 sec hold)	½ Kneeling Quad/Hip Flexor Stretch
Side Plank (knees) x:10-:20ea	Windshield Wiper to Kneeling	Quadruped Hip Extension (bent leg)
SL Balance x:30-:45ea	Glute Bridge (4 sec hold)	Snap Down (keep feet on ground)
Squat (4 sec down, 2 sec pause, 1 sec up)	Wall Slide w/ Lift Off	Fwd Lunge
Bent Over W (4 sec hold)	RDL (w/ weight/car seat/diaper bag/etc)	Prone Y (2sec hold)
Calf Raise (4 sec hold)	T (4 sec hold)	SL RDL
Lateral Lunge (feet in place or step foot out and back)	Handwalk	Incline Pushup (wall/chair/couch)

*Walk 20-40 minutes on other days (Can use elliptical or bike if prefer)

Link for all exercise videos:

<https://www.youtube.com/playlist?list=PLXwDvBhn0yYEHs1n7q38FoCJ1oY-ERNBH>

9-12 Weeks Postpartum

9-12 Weeks Postpartum

Emphasis: Slow integration into low level plyometrics

Session Focus: Building on previous two weeks and adding in lower level plyometrics to prepare for return to run.

Mental Readiness

- Acknowledge the adjustments of parenthood and allow yourself grace as you adapt. Embrace flexibility and seek support as needed.

Spiritual Readiness

- Consider Legacy- “What will I leave behind?”
 - o What do you believe parenthood should look like after your children become adults?

Nutritional Readiness

- Continue to prioritize drinking water and eating foods to help sustain your energy throughout the day. If you are breastfeeding and notice your supply diminishing, make sure you are consuming adequate calories and fluid throughout the day. Between 330-400 calories a day are utilized just to make breastmilk!

Sleep Readiness

- Baby will likely have established day and night wake patterns. Continue to collaborate with your partner to help with nighttime caregiving responsibilities.

Physical Readiness

- Walk 20-40 minutes on other days (can use elliptical or bike if you prefer).
- If you are cleared by your medical provider to return to run, you may begin running following the return to run (R2R) protocol and utilizing the return to run screen.
- 1-2 rest days/week

Sample Week Template Suggestions

- This is a sample of how you can structure your week. Choose what will work best in YOUR life/schedule to maintain consistency.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Option 1	Workout 1	Walk	Workout 2	Bike	Workout 3	Rest	Rest
Option 2	R2R	Workout 1	Bike	Workout 2	Rest	Workout 3	Rest
Option 3	Workout 1	Walk/Bike	Workout 2	R2R	Workout 3	Walk/Rest	Rest

9-12 Weeks Postpartum

*Please consult and be cleared by your medical provider before starting or continuing this program and if any adverse reactions or setbacks occur.

Workout 1 (2-3x10ea)	Workout 2 (2-3x10ea)	Workout 3 (2-3x10ea)
Floor Slide x5	Childs Pose-Alt x5ea	Open Book x5ea
Supine Leg Cradle Stretch x5ea	Windshield Wiper to Kneeling x5ea	½ Kneeling Quad/Hip Flexor/Hamstring Stretch x5ea
Quadruped Thoracic Reach Through x5ea	Downward Dog to Pigeon x5ea	Supine Hip Stretch (w/ strap) x5ea
½ Kneeling Adductor Stretch x5ea	Deadbug (legs bent if needed, maintain pelvic tilt)	Hamstring to Deep Squat Stretch x5
Quadruped Hip Circles (Fwd/Bwd) x5ea	Reverse Clamshell	Bird Dog-Alt
Plank (knees if needed) x:20-:40	Prone I (2 sec hold)	Quadruped Hip Extension (straight leg)
Clamshell	SL Glute Bridge (keep hips level)	Side Plank (knees if needed) x:15-:30ea
SL Balance (knee in line w/ hip) x:30-:60ea	Wall Slide w/ Lift Off	Lateral Bound (stabilizing) x5ea
Fwd Bound (stabilizing) x5ea	Hip Abduction	Walking Lunge
SL Squat (controlled to chair/couch) x5ea	Snap Down (feet slightly off ground)	Prone Y (2 sec hold)
Bent Over W (4 sec hold)	S-S Hop	SL RDL
SL Calf Raise (wall support)	RDL (w/ weight/carseat/diaper bag/etc)	Bear Crawl (Fwd/Bwd)
Lateral Lunge (step foot out and back)	T (4 sec hold)	
	Incline Pushup (chair/couch)	

Cardio Workout 1	Cardio Workout 2
Warmup: Return to Run Screen	Warmup: Return to Run Screen
Follow return to run protocol if cleared OR Bike or other non-impact cardio 15-45 minutes	Bike or other non-impact cardio 15-45 minutes

Link for all exercise videos:

https://www.youtube.com/playlist?list=PLXwDvBhn0yYGnJnu_w8FmgU3vNdE0V5XC

Return to Run (R2R) Screen

Assists with identifying when it is safe to restart running postpartum.

Running is high impact, so control and stability are necessary for success.

Should be able to walk continuously for 30 minutes.

- Single Leg Balance x:10-:30ea
- Single Leg Squat x10ea (only as low as you can control shoulder, hip, knee and ankle in line)
- Jog in Place x1min (March in place if you need to minimize impact)
- Forward Bound x10 (Step instead of bound if you need to minimize impact)
- Double Leg Hop in Place x10ea (Lateral lunge if you need to minimize impact)
- Single Leg Running Man x10ea (Opposite arm and hip flexion/extension w/ bent knee)

If you have any pain, leakage of urine or stool, heaviness or bulging in the vagina, or bulging/coning of stomach during any of these exercises, we recommend you choose a non-impact form of cardio for that day instead of running and notify your primary care provider about your symptoms.

Adapted from Source:

<https://absolute.physio/wp-content/uploads/2019/09/returning-to-running-postnatal-guidelines.pdf>

Return to Run (R2R) Protocol

At least one day of rest between run days.

Perform each phase TWICE before moving on to the next phase.

If more than 3/10 pain, incontinence, bleeding, leaking, heaviness in vagina, or bulging/coning of stomach DO NOT move to next phase.

Phase 1: (walk 4 minutes/ 1 minute jog) x4 = 20 minutes

Phase 2: (walk 3 minutes/ 2 minutes jog) x4 = 20 minutes

Phase 3: (walk 2 minutes/ 3 minutes jog) x4 = 20 minutes

Phase 4: (walk 1 minute/ 4 minutes jog) x4 = 20 minutes

Phase 5: Jog for 20 minutes continuous

13-18 Weeks Postpartum

13-18 Weeks Postpartum

Emphasis: Slow integration into return to run

Session Focus: Continue building strength and cardio while slowing introducing running.

Mental Readiness

- Take a moment to appreciate how adaptable and resilient you have been during this new season of parenthood. As you approach the transition of returning to work, you may notice increased feelings of anxiety and moodiness. Reach out to your social supports and ask for help from a medical provider if needed.

Spiritual Readiness

- Consider Community- “With Whom Do I Spend My Life?”
 - o Who can you call to help with your child if/when you are overwhelmed? Explain why.

Nutritional Readiness

- As you prepare to return to work, you may start thinking more about your body’s current size or shape. Especially if you are breastfeeding, your priority should still be to maintain adequate food and fluid intake. Restricting calories and attempting to exercise more to lose weight could lead to injury and diminish your postpartum recovery. If you have concerns about caloric intake, weight, and recovery postpartum, please schedule an appointment with a registered dietitian for assistance.

Sleep Readiness

- Baby is likely to start sleeping in longer stretches at this time. If you are struggling with sleep and insomnia, reach out to your OBGYN, CNM, or H2F Occupational Therapist.

Physical Readiness

- Walk 20-40 minutes on other days (can use elliptical or bike if you prefer).
- If you are cleared by your medical provider to return to run, you may begin running following the return to run (R2R) protocol and utilizing the return to run screen.
- 1-2 rest days/week

Sample Week Template Suggestions

- This is a sample of how you can structure your week. Choose what will work best in YOUR life/schedule to maintain consistency.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Option 1	Workout 1	Walk	Workout 2	Bike	Workout 3	Rest	Rest
Option 2	R2R	Workout 1	Bike	Workout 2	Rest	Workout 3	Rest
Option 3	Workout 1	Walk/Bike	Workout 2	R2R	Workout 3	Walk/Rest	Rest

13-18 Weeks Postpartum

*Please consult and be cleared by your medical provider before starting or continuing this program and if any adverse reactions or setbacks occur.

Workout 1 (2-3x10ea)	Workout 2 (2-3x10ea)	Workout 3 (2-3x10ea)
Floor Slide x5	Childs Pose-Alt x5ea	Open Book x5ea
Supine Leg Cradle Stretch x5ea	Windshield Wiper to Kneeling x5ea	½ Kneeling Quad/Hip Flexor/Hamstring Stretch x5ea
Quadruped Thoracic Reach Through x5ea	Downward Dog to Pigeon x5ea	Supine Hip Stretch (w/ strap) x5ea
½ Kneeling Adductor Stretch x5ea	Deadbug (legs bent if needed, maintain pelvic tilt)	Hamstring to Deep Squat Stretch
Quadruped Hip Circles (Fwd/Bwd)	Reverse Clamshell	Bird Dog-Alt (touch opposite knee to elbow)
Plank (knees if needed) x:30-:60	Prone W & T (move from W to T w/ squeezing the shoulder blades at each letter)	Quadruped Hip Abduction to Extension (straight leg) x5-10ea
Lateral & Medial Leg Raise (from Army HSD)	Glute Bridge March (keep hips level)	Side Plank (knees if needed) x:20-:30ea
SL Balance ABCs (spell ABC upper or lowercase w/ ankle) x1ea	SA Bent Over Row (w/ weight/car seat/diaper bag/etc)	Lateral Bound (stabilizing- try to bound further than previous- as long as have control) x5ea
Fwd/Bwd Bound (stabilizing- try to bound further than previous- as long as have control) x5ea	Vertical Jump (jump as high as you can, land as soft as you can in a ¼ squat) x5	Walking Lunge
Bulgarian Split Squat (back foot up on chair/couch)	Plank Up-Down (from elbows to hands) x5ea	Prone Y & T (move from Y to T w/ squeezing the shoulder blades at each letter)
Bent Over I & W (move from I to W w/ squeezing the shoulder blades at each letter)	SL Fwd/Bwd Hop	SL RDL (w/ weight/car seat/diaper bag/etc)
SL Calf Raise (2 sec hold w/ wall support)	RDL (w/ weight/car seat/diaper bag/etc)	Bear Crawl Hold x:20-:60
Lateral Lunge (keep feet in place, stay low and shift side to side)	SA Overhead Press (w/ weight/diaper bag/etc)	HRPU x5-10

Cardio Workout 1	Cardio Workout 2
Warmup: Return to Run Screen	Warmup: Return to Run Screen
Follow return to run protocol if cleared OR Bike or other non-impact cardio 15-45 minutes	Bike or other non-impact cardio 15-45 minutes

Link for exercise videos:

<https://www.youtube.com/@phoenixoccupationaltherapy2940/videos>

Return to Run (R2R) Screen

Assists with identifying when it is safe to restart running postpartum.

Running is high impact, so control and stability are necessary for success.

Should be able to walk continuously for 30 minutes.

- Single Leg Balance x:10-:30ea
- Single Leg Squat x10ea (only as low as you can control shoulder, hip, knee and ankle in line)
- Jog in Place x1min (March in place if you need to minimize impact)
- Forward Bound x10 (Step instead of bound if you need to minimize impact)
- Double Leg Hop in Place x10ea (Lateral lunge if you need to minimize impact)
- Single Leg Running Man x10ea (Opposite arm and hip flexion/extension w/ bent knee)

If you have any pain, leakage of urine or stool, heaviness or bulging in the vagina, or bulging/coning of stomach during any of these exercises, we recommend you choose a non-impact form of cardio for that day instead of running and notify your primary care provider about your symptoms.

Adapted from Source:

<https://absolute.physio/wp-content/uploads/2019/09/returning-to-running-postnatal-guidelines.pdf>

Return to Run (R2R) Protocol

At least one day of rest between run days.

Perform each phase TWICE before moving on to the next phase.

If more than 3/10 pain, incontinence, bleeding, leaking, heaviness in vagina, or bulging/coning of stomach DO NOT move to next phase.

Phase 1: (walk 4 minutes/ 1 minute jog) x4 = 20 minutes

Phase 2: (walk 3 minutes/ 2 minutes jog) x4 = 20 minutes

Phase 3: (walk 2 minutes/ 3 minutes jog) x4 = 20 minutes

Phase 4: (walk 1 minute/ 4 minutes jog) x4 = 20 minutes

Phase 5: Jog for 20 minutes continuous

Additional Resources

Pelvic Floor Occupational Therapist or Pelvic Floor Physical Therapist (PFOT or PFPT)

- Specialize in the muscles of the pelvic floor, helps to restore function and movement, alleviate pain, strengthen muscles of and around the pelvic floor.
- Located within your local Army Medical Center or request an in-network off-site referral.

BDE Chaplain

Occupational Therapy

Behavioral Health

Readiness and Resilient (R2) Performance Center

Military and Family Life Counselor (MFLC)

Defense Health Agency Service Women's Health Education- Deployment Readiness Education for Service Women (DRES) App:

- <https://mobile.health.mil/Dres>
- Written by military medical providers to provide healthy practices and available resources to support service women's healthcare needs.

DHA Pregnancy & Childbirth Purple Book

Military One Source

- 1 (800) 342-9647
- <https://www.militaryonesource.mil/>
 - Chill Drills App (includes progressive muscle relaxation and imagery)
 - Family Advocacy Program (FAP)

Hear Her- from CDC (includes information for spouses, suggestions, and questions to ask SM's medical provider)

- <https://www.cdc.gov/hearher/index.html>

DOD/VA Apps

- Couples Coach - designed for partners who want to improve their relationship and explore new ways to connect. Couples choose missions—small commitments to improve your relationship—to work through on their own or with their partner. There are five levels of couples training with dozens of missions to choose from. Missions help couples increase positive communication and work through conflict. The app also includes comprehensive relationship information for couples living with PTSD.
- Virtual Hope Box- simple tools to help users with coping, relaxation, distraction, and positive thinking using personalized audio, video, pictures, games, mindfulness exercises, activity planning, inspirational quotes, and coping statements.
- Mindfulness - Learn how to practice mindfulness to reduce stress and improve emotional balance.
- Breathe to Relax - stress management tool which provides detailed information on the effects of stress on the body and instructions and practice exercises to help users learn the stress management skill called diaphragmatic breathing.

Pregnancy and Postpartum Army Regulation

AR 350-1, F-5 (e) and (f) – Details requirements for P3T

AD 2022-06 – Details timelines for pregnancy and postpartum

FM 7-22 – Places P3T under H2F

DoD Memorandum Feb 16, 2023: Changes to Command Notification of Pregnancy Policy

Authors

Samantha Miller, COTA, HSP, P&PA Coach

Jennifer Fallon, CSCS, CSAC

Kelsey Mathias, OTR, PRPC

Kimberly Schorn, MS, RDN, CSSD, LDN, EP-C, EIM(2)

Amanda Musgrove-Currie, MS, CPT, TSAC-F

Kristin Jaskolski, MS, ATC

CH (CPT) Joshua Cook