



Are you Free to Move?

Get Intu-Flow Now!

Is Your Neck Free to Move?

The neck has the smallest vertebrae and yet must carry 1/7th of your body-weight - your head.

Any deviation from perfect anti-gravitation resting your head on top of your spring-like spine means that muscle tension must hold your neck in place rather than balance. Over time you adapt to that tension and the pain grows chronically defiant. That lasts until you must suddenly move your head, and then a stretch reflex causes an injury.

When not "Free to Move" from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Spasms
- Tight and tender
- Muscle strain
- Whiplash
- Neck stinger
- Torticollis
- Herniated disk
- Osteoarthritis

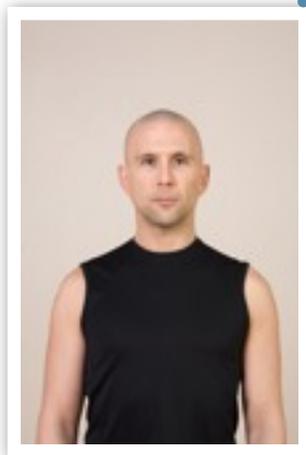
Drop your ear to your shoulder.

Drop your opposite shoulder reaching your fingers down to the outside of your knee.

Lift your opposite jaw directly skyward.

Inhale and lift your jaw.

Exhale and drop your shoulder walking your



fingers down.

Lengthen that tight tissue along the side of your neck.

*Perform Intu-Flow Loose
Noose three times per side
throughout the day, at the
beginning of each hour for
optimal benefits.*



Common mental and emotional issues faced as a result of the area not being "Free to Move" :

- Not wanting to see other's points of view
- Trying to fix others
- Feeling like you've stuck your neck out
- Feeling like such and such is a pain in the neck
- Feeling like you want to wring his/her neck
- Feeling suffocated or strangled
- Fearing that you'll choke

Common organ referral affecting sensory-motor function of the area:

- The eyes (including visual problems) can refer pain to the back of the head and cause neck tightness
- Difficulty breathing may affect the lower muscles of the neck

Exhale as you allow it to melt.

Hold for 3 seconds.

If you feel any pops, cracks or snaps, don't be surprised, as your spine decompresses.

Bend your knees to catch your head back on your spine.

Is Your Neck Free to Move?

*Perform Intu-Flow Neck Nod
Mobility Drill three times per side
throughout the day, at the beginning of
each hour for optimal benefits.*

- Twist your head to the left and look over your shoulder.
- Exhale as you tilt the back of your head to your right shoulder without untwisting your head.
- Drop your left shoulder by reaching your fingers to the outside of your left knee.
- Lift your chin and look at the sky.
- Twist your chin down to your right shoulder with an inhale.
- Exhale as you tilt the back of your head to your left shoulder without untwisting.
- Drop your right shoulder by reaching your fingers to the outside of your right knee.
- Lift your chin and look at the sky.
- If you feel any pins and needles, make the motion shallower until it ceases; challenge the muscular tension, not inflammation in the nerve sheath.
- Repeat 3X per direction.



Are Your Shoulders Free to Move?

When not “Free to Move” from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Tendonitis
- Rotator cuff impingement
- Tendonitis
- Sternoclavicular joint dislocation
- Acromio-clavicular joint separation.
- Dislocation and subluxation
- Osteoarthritis
- Bursitis
- Neck problem (like a herniated disc in the neck, or a nerve entrapment

The shoulder is one of the most complex series of joints in the human body offering us nearly infinite movement capabilities due to the synergy of the joints acting in unison. Unfortunately, this allows us to compensate for weakness by sacrificing delicate connective tissue meant only for stabilization rather than load. These movements act as much for motor education as they do for preventing injury!

Common mental and emotional issues faced as a result of area not being “Free to Move”:

- We carry our experiences and their emotions here
- Feeling that life is a heavy burden
- Sometimes shouldering too much responsibility is possible
- Feeling that we don’t have a shoulder to cry on

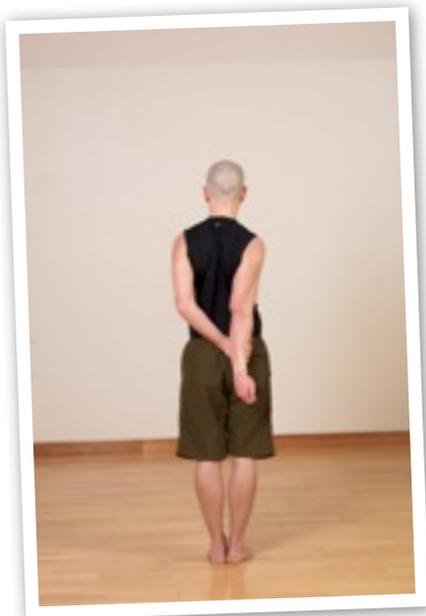
Common organ referral affecting sensory-motor function of the area:

The heart, liver and diaphragm can refer pain most commonly to the left shoulder but in some instances the right shoulder is also involved. If there is pancreatic inflammation or disease, pain or discomfort can be referred to the left shoulder indirectly through irritation of the left diaphragm.

The gallbladder can refer pain to the right scapular (shoulder blade) region.

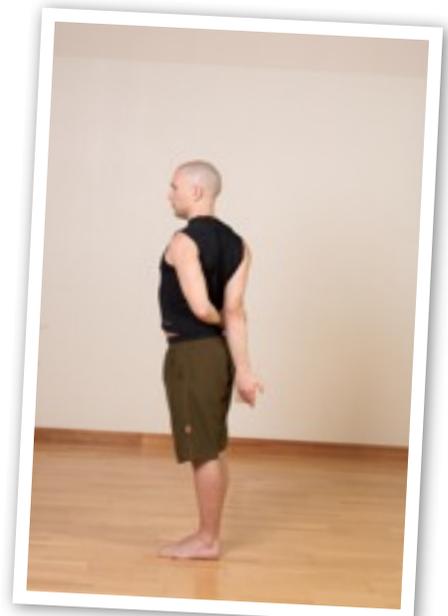
Sometimes the lungs refer pain to the shoulders.

Grab one wrist from behind your back.
Hook it with the other hand without your thumb.



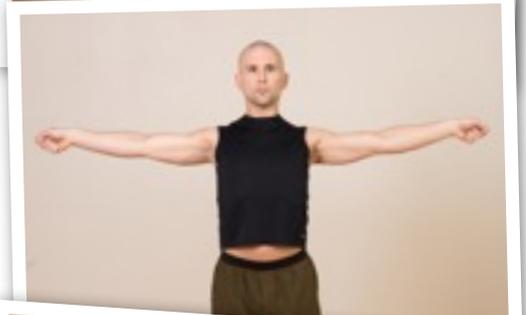
Inhale and lift the captured arm’s shoulder toward your ear.
Roll it backward as you exhale and rotate your thumb outward and away.
Keep your elbow locked the entire movement.

Prevent your spine from twisting; focus on the shoulder roll.
Inhale and unroll your shoulder.
Perform 3X per shoulder.



The Intu-Flow Arm Screw Mobility Drill

- Lift your arms parallel to the ground, elbows locked, wrists straight.
- Lift your right shoulder to your right ear.
- Keeping your arms parallel, roll that shoulder forward.
- Exhale and start to squat to the same side as you shoulder roll.
- Keep rolling until you can no longer roll more
- If you feel any pins and needs down your arm, release your neck by looking down your right arm toward your fingers.
- Hold for 3 seconds.
- At the same time, twist your opposite arm backward.
- Imagine wringing out the stress like wringing out a wash-cloth.
- Inhale as you unwind back to center.
- Exhale and perform the left side shoulder roll.
- If you feel any pins and needs down your arm, release your neck by looking down your left arm toward your fingers.
- Repeat 3X each side.



Are Your Elbows Free to Move?

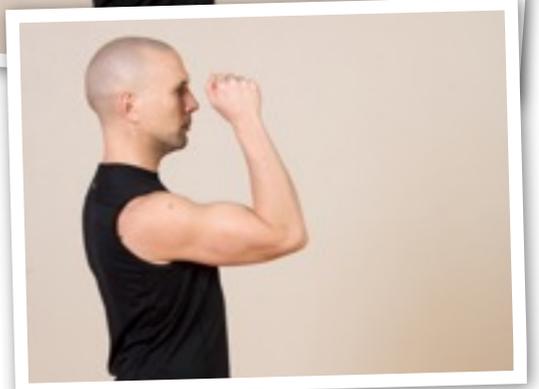
The Intu-Flow Hitch Hiker Mobility Drill

- Lift your upper arm parallel to the ground with your thumb pointing toward your nose.
- Turn your thumb outward, rotating your forearm.
- Keeping maximal pressure, exhale and continue to spiral your forearm around.
- When you reach elbow lock, turn your thumb over and rotate it back toward your nose.
- Exhale on the outside; inhale on the inside of the circle.
- Perform 5 circles with each arm.

Elbows tend to be over-trained in flexion and under-used in rotation. Full extension into “elbow lock” allows nutrients to return to the areas which need it, and rotation smooths off and revitalizes fraying connective tissue from chronic flexion.

When not “Free to Move” from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Lateral Epicondylitis, also referred to as “tennis elbow”
- Medial Epicondylitis, also referred to as “golfer's elbow”
- Osteoarthritis
- Neck problem (like a herniated disc in the neck or a nerve entrapment syndrome) can cause elbow pain.



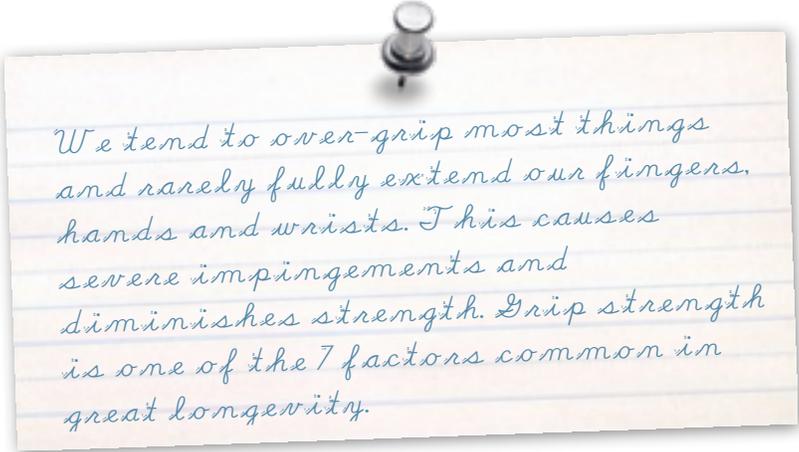
Are Your Hands Free to Move?

When not “Free to Move” from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Sprained and strained wrist
- Tendonitis
- Carpal tunnel syndrome
- Osteoarthritis
- Finger fracture
- Neck problem (like a herniated disc in the neck or a nerve entrapment syndrome) can cause wrist, hand and finger pain.

The Intu-Flow Wrist Chopper Drill

- Lift your arms up at a 45 degree angle like holding the hands of a chopper motorcycle.
- Inhale and lift your wrists toward the sky.
- Bring your knuckles back toward your forearm.
- Hold for 3 seconds.
- Exhale and drive your palm heels forward.



We tend to over-grip most things and rarely fully extend our fingers, hands and wrists. This causes severe impingements and diminishes strength. Grip strength is one of the 7 factors common in great longevity.



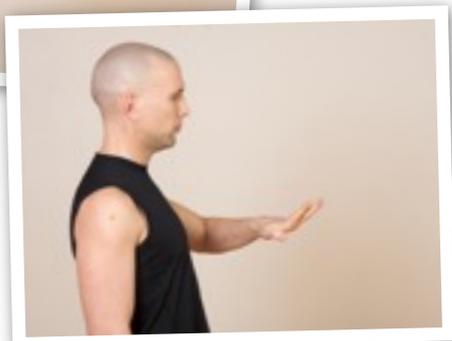
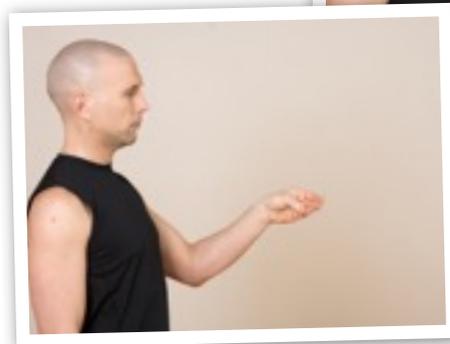
Common mental and emotional issues faced as a result of area not being “Free to Move”:

- Not being able to grasp or let go of the situation
- Feeling like you’re not being given a hand,
- Or like your hand has been slapped
- Difficulty handling experiences

The Intu-Flow Okay Cone and Jellyfish Mobility Drills

The Intu-Flow Okay Cone

- Form “Okay” sign with your fingers, but stack the top fingers upon one another.
- Splay your fingers outward, arching them back toward your forearm at maximal extension.
- Form a “cone” with your hands, stacking your fingers upon one another.
- Rotate back and forth fluidly, but at maximal rotation for your fingers.
- Focus on the middle component of full extension, since we rarely if ever do so.
- Perform 5 repetitions up and down.
- Shake out your hands briskly when finished.

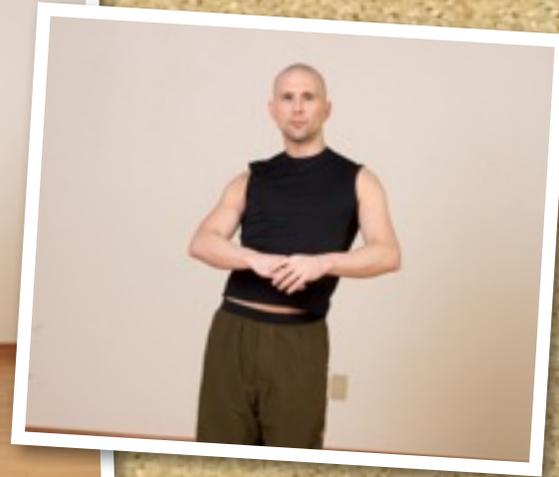
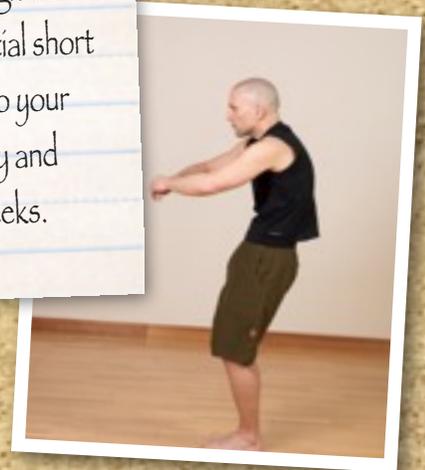
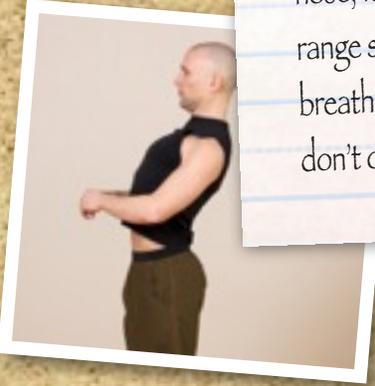


The Intu-Flow Jellyfish Drill

- Make a tight fist with your thumb over your fingers. Squeeze and exhale.
- Extend your second knuckles back and press your first knuckles of your hand in the opposite direction, like a tiger about to slash with his claws.
- Keep the tension of pressing your first knuckles, but extend your fingers fully straight and flex them back in a circle toward your forearm.
- Drop your hand and bend your wrist to release all tension.
- Repeat in waves fluidly for 5 repetitions per hand.

Are Your Mid-back and Ribcage Free to Move?

Your ribs are designed to open up like French bay doors, so full inhalation practices are crucial for preventing torso tension from decreasing the amount of volume you can breath. Don't hold your breath, but as it leaks out, sniff it back in through the nose; keep "topping off the tank". It takes about 20 seconds to melt the initial short range stiffness, and about 2 weeks of practice to return significant volume to your breath. If you feel giddy from the new oxygen in your blood, just take it easy and don't over-exert yourself with the extra energy potential for the first few weeks.



The Intu-Flow Thoracic Circle Mobility Drill

Inhale as you lift your heart to the sky, while driving your shoulders down to the ground. Continue to lift until you must sniff in air to fill your lungs. Begin to exhale as you slide your ribs to the right. Drive your left shoulder down, while keeping both shoulders parallel to the ground, to make sure you're moving your mid-back spine. Keep your hips even with your shoulders parallel with the ground to make sure you're not compensating with your knees and hips.

Fully exhale as you reach your mid-back toward the wall behind you. Tilt your tailbone between your legs, and pull your navel toward your spine.

Squeeze everything out down, and feel yourself pull up your pelvic wall (like a Kegel for gals, and for guys, like the sensation of preventing yourself from urinating.) Slide your shoulder blades off the sides of your ribs and roll your shoulders forward to drive your mid-back behind you.

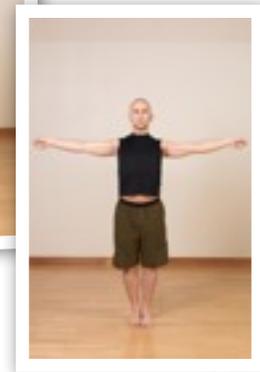
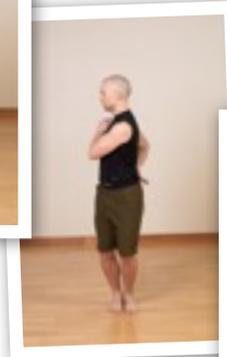
Begin to inhale as you slide your ribs to the left. Drive your right shoulder down, while keeping both shoulders parallel to the ground, and your hips parallel to your shoulders to avoid compensating with your knees or hips.

Inhale back forward lifting your heart.

Perform 5 strong and full circles clockwise and 5 counter-clockwise, focusing on increasing the range of motion each repetition.

The Intu-Flow Taiji Twist

- Begin with your arms at your side.
- Twist to the right leading with your shoulders, and your arms hanging loosely.
- Exhale into the twist at the trunk to your maximal range.
- As you stop twisting, let your arms swing free with the momentum.
- Let your right arm swing behind you.
- Allow your right elbow to bend with your hand coming to touch gently around your left kidney.
- Let your left arm swing in front of you.
- Allow your left elbow to bend with your hand coming to touch gently around your left ribs under your pec.
- Start twisting your trunk in the opposite direction, and repeat the obverse directions to the left.
- Perform 10 loose twists in each direction.



When not “Free to Move” from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Osteoarthritis
- Costochondritis
- Inflammation or injury involving the chest muscles
- Scoliosis
- Hyperkyphosis
- Hyperlordosis

Common mental and emotional issues faced as a result of area not being “Free to Move”:

- feeling like you’re vulnerable

- feeling heart-ache
- feeling stabbed in the back
- feeling rage
- mood swings between sorrow and anger

Common organ referral affecting sensory-motor function of the area:

- The gallbladder can refer pain to the right scapular (shoulder blade) region
- The liver can refer pain or discomfort to the right side of the mid back
- The stomach can refer pain or discomfort to the mid back and chest

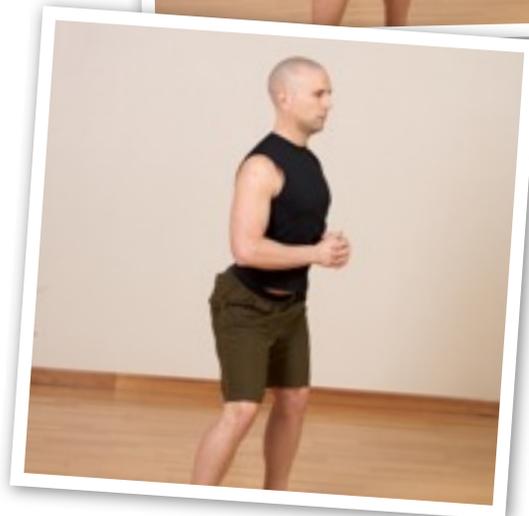
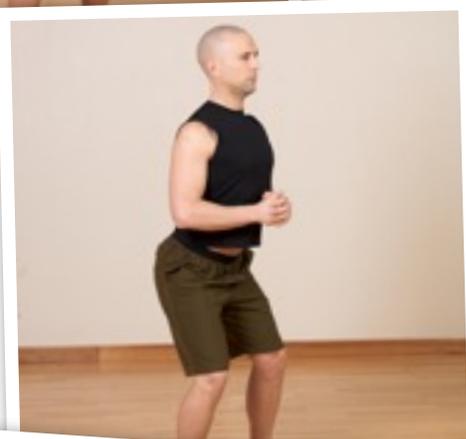
- The esophagus can refer pain or discomfort to the mid back and chest
- The heart and large blood vessels can refer pain to the mid back and chest (heart attacks and aortic aneurysms are examples)
- The lungs can refer pain to this area
- The pancreas can also refer pain to the lower aspect of the mid back
- The kidneys can refer pain to the lower aspect of the rib cage as well as the lower back
- The adrenal glands can refer pain to the lower mid back

Is Your Pelvis Free to Move?



The Intu-Flow Hula Hoop Mobility Drill

- Begin by tucking your tailbone between your legs.
- Exhale and pull your navel toward your spine (your transverse abdominus), contract your pelvic wall (like a Kegel for gals, and for guys, like the sensation of preventing yourself from urinating.) Squeeze the glutes and imagine rolling your pelvis up toward your chest.
- Begin to inhale as you tilt your right hip toward the sky and drop your left hip. Lock out your right knee and sink down on your left side, unless you feel “pins and needles” in which case just keep your knee softly bent. Lift that right hip maximally feeling the opening on the outside where that “can-opener” socket releases the thickened tissue from standing and walking.
- Inhale through the nose and arch your tailbone in a circle toward the back of your head. Keep your chin down and lift your crown toward the sky. Let your belly hang out relaxed. Squeeze that fan of connective tissue across your lower back, unless you feel “vulnerable” there, in which case just work on the arch softly. You want to challenge the muscular tension, not any inflammation.
- Begin to exhale as you tilt your left hip toward the sky and drop your right hip. Lock out your left knee and sink down on your right side, unless you feel “pins and needs” in which case just keep your knee softly bent. Lift that left hip maximally feeling the opening on the outside.
- Exhale maximally as you begin the next forward tilt of your tailbone.
- Perform 5 fluid and maximal circles clockwise and 5 counter-clockwise, focusing on increasing the range of motion each repetition.



Is Your Pelvis Free to Move?

Many “pains in the neck” result from favoring one hip or the other.

And it can often be as simple as removing your wallet from your back-pocket so that both sits-bones can come into contact with your seat. Imagine if you always had to walk with one foot higher than the other; that’s what your pelvis must endure, and which sends “chains” of distorted tension to your neck.

Common mental and emotional issues faced as a result of area not being “Free to Move”:

- Feeling powerless
- Not wanting to let go of old anger or pain
- Feeling out of balance with yourself
- Blaming yourself for things out of your control



When not “Free to Move” from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Osteoarthritis
- Acute pelvic pain
- Chronic pelvic pain such as dysmenorrhea
- Hip pointer injury

Common organ referral affecting sensory-motor function of the area:

- The rectum (an example would be hemorrhoids) can refer pain to this region
- The appendix can refer pain to the lower back and pelvis
- The ovaries, uterus, prostate, and bladder can also refer to the low back and pelvis
- The bladder refers pain to the pelvis, especially with infection or inflammation
- The colon can also refer pain to the pelvis
- The large blood vessels can refer pain to the pelvis (aneurysms are an example)

Is Your Lower Back Free to Move?

The Intu-Flow Lumbar Circle Mobility Drill

- With your knees softly bent, exhale and drop forward. Allow your spine to round. Let gravity create length in your spine. Don't use effort to press your head to the ground. Keep your chin toward your chest and let your crown fall toward the floor. Don't look at the floor; release your neck completely and allow your gaze to cast between your legs.
- Inhale as you begin twisting your right side ribs up toward your right outside thigh. Drive your right hip forward, bringing your shoulders in one line perpendicular to the ground, left over the right. Allow your neck to release, right ear toward the ground. Relax your left side, opening up and relaxing all of the tissues from your crown to your sits-bones.
- Exhale as you drive your glutes forward, strong and flexed to protect your neck. Allow your neck to release backward. Relax your shoulders and allow your neck to release down. Roll your left shoulder back until two shoulders are in one line parallel to the ground. Keep your teeth together but don't grind them; open up the tight tissues along your throat.
- Begin to inhale as you remove and dip your left hip allowing your torso to swing to the left. Bring your shoulders in one line perpendicular to the ground, right over left. Allow your neck to release, left ear toward the ground. Relax your right side, opening up and relaxing all of the tissues from your crown to your sits-bones.
- Exhale as you release to hang forward again.
- Perform 5 slow and smooth circles clockwise and 5 counter-clockwise, focusing on increasing the range of motion each repetition.



Is Your Lower Back Free to Move?

As you tuck your tailbone, you're creating space under the thick thoraco-lumbar ligament which is like a "fan" of connective tissue across your lower back. The more that you squeeze the glutes and pull your tummy toward your spine, the greater the amount of nutrition you can flush into the area which is literally starved to decay by the act of prolonged "sitting."

Arching the tailbone toward the back of the head aids in retracting the sacro-iliac and lumbar vertebrae to help massage back bulging spinal discs (which everyone over 40 suffers to some degree throughout the day - due to "sitting"). The arch also creates a sponge like effect on squeezing out toxins and preparing to flush the lower back with nutritive and lubricative flow with the subsequent tilt to follow, called "ischemic compression".

Always begin by creating space with the "tuck" first before the "arch" because you want space to be available after you release the arch's squeeze, just like you don't want to squeeze out a sponge with nothing but dirty water available to suck back in.

When not "Free to Move" from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

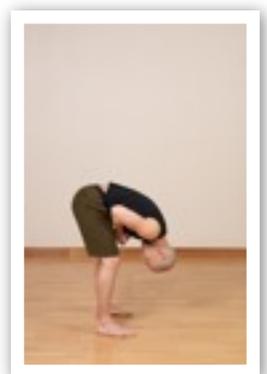
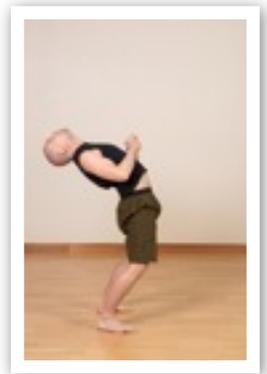
- Osteoarthritis
- Sciatica
- Low back pain
- Scoliosis
- hyperkyphosis
- hyperlordosis

Common mental and emotional issues faced as a result of area not being Free to Move:

- Feeling unsupported
- Feeling insecure
- Lacking stability
- Lacking community development

Common organ referral affecting sensory-motor function of the area:

- The kidneys can refer pain to the lower aspect of the rib cage as well as to the lower back.
- The ureters (tubes running from your kidneys to your bladder) can refer pain to the lower back
- The small and large colon can refer pain to the lower back
- The appendix can refer pain to the lower back and pelvis
- The ovaries, uterus, prostate, and bladder can also refer to the low back and pelvis
- Aortic aneurysms can cause pain in the lower back.



Are Your Hips Free to Move?

We rarely use the full range of motion of our hip due to short range motions like standing, walking, running, cycling and swimming.

Opening up the entire range of motion ensures that no compensations happen, especially with “turn-out” where one leg start to rotate outward. Turn-out sets up a chain of events which can cause not just knee and hip pain, but even shoulder pain as is seen with many professional in racquet and ball sports.

When not Free to Move from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

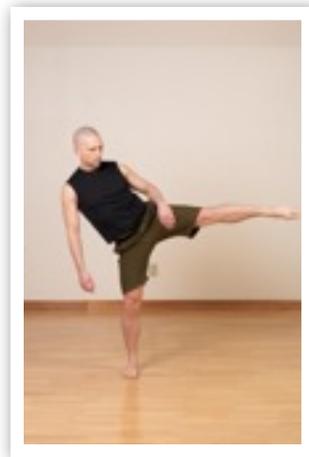
- Osteoarthritis
- Iliopsoas Syndrome
- Piriformis Syndrome

Stand on your left leg, balance by placing a hand on a wall or sturdy chair if needed. Swing your right leg forward, knee locked. Point your toes away from your shin and drive toward the ground with your toes. Exhale. Begin to exhale as you rotate your locked leg to the right. Swing your leg directly to



your right as high as you can safely in balance. Keep your toes pointed, and drive your toes toward the wall to the right of you. Turn your toes toward the wall behind you externally rotating your entire leg maximally.

Inhale as you swing your leg behind you leaning slightly forward with your torso to counter-balance. Keep your toes pointed and drive your toes toward the wall behind you. Keeping your knee locked, exhale lift



your heel as high as you can. Hold for a count of 3. Keeping your toes pointed and your knee locked, swing your entire leg forward and up higher in front of you than last time. Perform on the opposite side.

Complete 3X on each side.



Common mental and emotional issues faced as a result of area not being Free to Move:

- Fear of moving forward with major decisions
- Fear that there is nothing to move forward to

Common organ referral affecting sensory-motor function of the area:

- Though it is not common, the ovaries, testicles, uterus, and prostate can refer pain to the hip region
- While not technically organ referral, sometimes a lower back or pelvic problem (like a herniated disc in the lower back or a nerve entrapment syndrome) can cause hip pain.

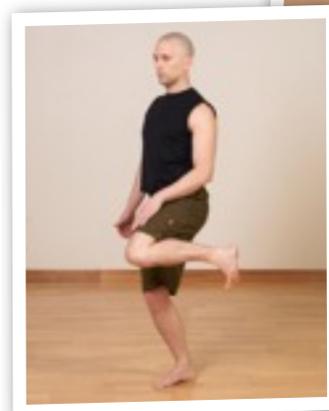
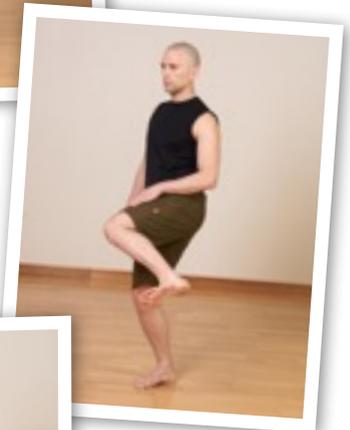
Are Your Knees Free to Move?

The Intu-Flow Knee Circle Drill

- Lift one leg in front of you with your thigh parallel to the ground, knee bent at a 90 degree angle. Balance on a chair or against the wall if you must; however, there are great advantages for your proprioception by practicing without a prop.
- Extend your leg straight pulling your toes toward your shin and kicking your heel as far forward as possible, without distorting the line of your hips.

Although most people concentrate on the hamstrings, even athletes neglect the rotary, angular/diagonal strength of the knee; and yet, nearly 80% of knee injuries are related to shearing and torsional forces. In 2001, 40% of side-lining knee injuries were non-contact related, simply from twisting to change directions. This movement will help prevent these injuries..

- Keeping your thigh parallel to the ground, internally rotate your thigh as you pull your heel to the side, with your foot parallel to the ground.
- Rotate the inside of your heel back to the original position, to begin again.
- Perform 10 rotations in both directions with both knees.



Are Your Knees Free to Move?

When not Free to Move from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Osteoarthritis
- Knee pain
- Iliotibial (IT) Band Friction Syndrome
- Hamstring injuries
- Patellofemoral Pain Syndrome
- Plica syndrome
- Chondromalacia
- Meniscal injury
- Chronic compartment syndrome
- Shin splints



Common mental and emotional issues faced as a result of area not being Free to Move:

- Pride and ego can be too great
- Fear of failure over moving forward with life
- Feeling like you have to kneel down in subjugation
- Feeling a lack of foundation
- Feeling like your legs are giving out

Common organ referral affecting sensory-motor function of the area:

- There are no organs which refer pain directly to the knees, however, patients with kidney issues will sometimes report achy knees
- While not technically organ referral, sometimes a lower back or pelvic problem (like a herniated disc in the lower back or a nerve entrapment syndrome) can cause knee pain.

Are Your Ankles Free to Move?

The Intu-Flow Ankle Roll Mobility Drill

- Take your shoes off for a minute.
- Begin by rolling the outside of your foot over the inside of your big toe, turning your heel skyward.
- Keep rotating your knee inward until you are off just the top of your toes and can feel your the top 1/3 of the top of your foot. When you do, exhale and curl your toes as you drive your heel down toward your toes to facilitate that perfect arch in your foot. Hold for a count of 3.
- Continue the rotation by letting the outside of your heel drop over and release your toes.
- Allow your toes to pop back to the surface as you swing your heel and knee around to the outside again.
- Exhale as you pull your toes toward your shin to complement the foot curl component.
- Perform 3 strong and slow repetitions per foot.



The ankle is an accessory “pump” for the heart. Protracted sitting or standing causes stress to the heart even in young athletes where excess tension, restrictive or protracted footwear can mimic the same dangers that elderly face with circulation to extremities. This is why “rocking chairs” are less hazardous than normal chairs because it encourages “ankle pump” - an essential function of improving circulation.

Even for young athletes, over-stabilization of the ankles can lead to problems as distal and remote as the neck! This movement will encourage full range of motion and prevent “over-treading” injuries from sudden changes in terrain or rapid directional changes.

Are Your Ankles Free to Move?

When not Free to Move from lack of prehabilitative movement due to stress, trauma, fear, overuse, under use, or misuse, the following issues may result:

- Osteoarthritis
- Achilles tendonitis
- Plantar Fasciitis
- Heel Spur
- Stress fracture
- Turf toe

Common mental and emotional issues faced as a result of area not being Free to Move:

- Guilt
- Fear of the future
- Not wanting to step forward in life
- Letting minor details prevent you from moving forward
- Feeling like you don't have the footing, a foot to stand on

Common organ referral affecting sensory-motor function of the area:

- There are no organs which refer pain directly to the ankles, feet, or toes.
- While not technically organ referral, sometimes a lower back or pelvic problem (like a herniated disc in the lower back or nerve entrapment syndrome) can cause pain in the ankles, feet, and toes.

