

Yoga for Back Pain — Workbook

This workbook accompanies each module of the Yoga for Back Pain course with hands-on exercises, self-assessment worksheets, and daily checklists designed to move your learning off the screen and into your body. Complete each section after watching the corresponding module — not before — so that the exercises build on what you have just practiced. Track everything: the data you collect here will reveal your personal pain patterns faster than memory alone.

Understanding Your Back Pain

Map your anatomy, classify your pain pattern, and document your contraindications before touching the mat.

Exercise: Pain Pattern Classification Exercise

Work through the three directional preference questions from Lesson 2. Perform each movement slowly and note your exact pain response. Record before, during, and after pain scores (0–10) and the location of symptoms (local back vs radiating to leg). Based on your responses, circle your track: F (flexion-intolerant), E (extension-intolerant), or N (non-directional).

• Slowly bend forward to touch your toes (or as far as comfortable). Pain score before: ___ / During: ___ / After: ___. Location: ___. Did pain increase, decrease, or stay the same?

• Stand and gently arch backward with hands on hips for 10 seconds. Pain score before: ___ / During: ___ / After: ___. Location: ___. Did pain centralise (move closer to the spine) or peripheralise (spread further)?

• Based on both movements, your directional preference classification is: ___ (F / E / N). Write one sentence explaining your reasoning:

• List any red-flag symptoms you have experienced in the past month (bladder changes, saddle numbness, progressive leg weakness, constant positionally unchanged pain). If any are present, note that you will seek medical clearance before beginning Module 2 sequences.

Worksheet: Personal Contraindication Profile

Fill in this profile sheet to create a reference card you will keep at your mat throughout the course. Check each diagnosis you have been given and circle the corresponding avoidance rules from the lesson. Diagnoses or imaging findings (e.g. L4-L5 herniation, facet arthritis, spondylolisthesis):

My directional preference track (F / E / N):

Poses or movements my physiotherapist or doctor has specifically told me to avoid:

Props I own and will use (blocks, strap, bolster, chair, wall, blanket, SI belt):

Medical clearance status (cleared / pending / not required):

Pain specialist or physiotherapist contact name and phone (for red-flag escalation):

Checklist: Module 1 Readiness Checklist

- I have read all ten contraindicated scenarios and identified which apply to me
- I have completed the directional preference screen and recorded my track (F / E / N)
- I have noted any red-flag symptoms and understand to seek medical evaluation if present
- I have gathered at least two props (minimum: one block or folded blanket, one strap or belt)
- I have a dedicated practice surface (non-slip mat, at least 2m x 0.7m clear space)
- I have recorded my baseline morning stiffness score for today: ___ / 10
- I understand the modify-vs-stop decision rule (pain below 4/10 during and resolves within 24 hours)

Foundation Sequences — Decompression and Core Activation

Practice log, self-assessment, and habit-building tools for the morning decompression and core activation protocols.

Exercise: Morning Stiffness Tracking Exercise

For 7 consecutive days, complete the morning decompression sequence exactly as taught and record your stiffness scores immediately before and 10 minutes after the sequence. Do this before checking your phone or doing any other activity. At the end of 7 days, compute your average before and after scores.

• Before-sequence stiffness scores for Days 1–7 (0–10, where 10 = cannot move): Day 1:___ Day 2:___ Day 3:___ Day 4:___ Day 5:___ Day 6:___ Day 7:___

• After-sequence scores for Days 1–7: Day 1:___ Day 2:___ Day 3:___ Day 4:___ Day 5:___ Day 6:___ Day 7:___

• Average before-score: ___ / 10. Average after-score: ___ / 10. Average reduction: ___ points. Note any days where the sequence did not help and describe what was different that day:

• Which step in the 8-step sequence is most effective for you? Which feels least beneficial? Based on this, how will you prioritise your time if you only have 10 minutes on busy days?

Worksheet: Core Activation Self-Assessment

After practicing the six-step deep core activation protocol for 3 sessions, use this worksheet to honestly assess your technique against the three mastery criteria taught in Lesson 5.

Can I breathe normally (without breath-holding) while maintaining TrA contraction at 30%? (Yes / Partially / Not yet) — Notes:

Does my lower back remain in contact with the floor throughout the dead bug? (Yes / Partially / Not yet) — Notes:

Can I feel the multifidus swell outward under my fingers before any limb movement in bird-dog? (Yes / Partially / Not yet) — Notes:

Which of the six steps is hardest for me? Step number: ___ Description of the difficulty:

What modification am I using for the hardest step, and what is my goal for mastering it by end of Module 2?

Checklist: Foundation Practice Daily Habits

- Complete morning decompression sequence within 10 minutes of waking (before loading the spine with sitting or standing)
- Complete core activation protocol before any standing yoga session
- Perform psoas release sequence at least 3x this week (modified lunge 90 seconds per side, supported bridge, supine figure-four)
- Record my hip flexor tightness test result: standing hip flexion hold for 60 seconds — note whether trunk shifted and which side
- Identify whether my psoas pattern is tightness (pulling sensation in lunge) or weakness (trunk shift in standing hold) — note finding
- Set a reminder for my practice time and kept it for at least 5 of 7 days this week
- Morning stiffness 7-day tracking complete with before and after scores recorded

Targeted Sequences for Common Back Pain Types

Pose-by-pose practice logs and response tracking for your track-specific sequence, with flare documentation and modification notes.

Exercise: Track-Specific Sequence Response Journal

Practice your assigned track sequence (F, E, or N) three times this week. After each session, complete this brief journal entry within 30 minutes of finishing. The 24-hour and 48-hour follow-up checks are critical — pain that appears with a delay is still caused by the session.

• Session date and time: _____. Track practiced: F / E / N. Session RPE (0–10): _____. Identify the one pose that felt most beneficial and one that felt challenging — record both by name and describe the sensation:

• 24-hour follow-up check: Pain score now: _____. Compared to before the session: better / same / worse. Any residual sensations (stiffness, mild soreness, radiating feeling): describe:

• 48-hour follow-up check: Pain score now: _____. Overall trend across 3 sessions this week: improving / stable / worsening. If worsening, which specific poses preceded the worsening?

• Based on the lesson, should you progress, hold, or regress next week? Cite the specific progression trigger or regression rule that applies to your situation:

Worksheet: Pose Modification Record

Use this sheet to document every modification or substitution you make during the track-specific sequences. Over time this becomes your personal modified pose library — the most clinically useful document you will build in this course.

Original pose name:

Why this pose was modified or skipped (pain, contraindication, insufficient mobility, prop unavailable):

Modification used (prop, reduced range, substitute pose):

Pain score during modification (0–10):

Will this modification be permanent or temporary? Goal for returning to the full pose (or confirmation it will not be revisited):

Notes from Lesson 7 (F-track), Lesson 8 (E-track), or Lesson 9 (SI-track) that apply to this modification:

Checklist: Track-Specific Safety Checks

- I have confirmed my track label is visible at my mat before each session
- I have reviewed the track-specific avoidance list and removed or marked contraindicated poses from my sequence
- I am completing the core activation protocol before each track-specific session
- I am using the 4/10 pain threshold rule during practice (stopping or modifying if pain exceeds this)
- I have documented at least one modification or substitution in the Pose Modification Record this week
- I have not practiced during an acute flare (pain 7+/10) — if a flare occurred, I rested appropriately and documented it
- SI belt is available and being used during practice if SI joint dysfunction is present

Building Your 4-Week Progressive Practice

Tools for designing, tracking, and sustaining your personalised practice plan — including the RPE progression log, daily movement integration tracker, and flare protocol card.

Exercise: 4-Week Practice Plan Design Exercise

Use the RPE progression framework from Lesson 10 to design your personal 4-week plan. Fill in each week's schedule before beginning that week (not all four weeks at once) — this prevents over-planning ahead of your body's actual progress.

- Week 1 plan: Sessions per week: _____. Sequence(s) to include: _____. RPE target: 3–4/10. Morning stiffness baseline for Week 1 (average of first 3 days): ____/10. What does a successful Week 1 look like for you specifically?

- Progression check at end of Week 1: Morning stiffness average this week: ____/10. Number of flares: _____. Ready to progress to Week 2? (Yes / Hold / Regress). Reason based on progression trigger or regression rule:

- Write your personalised flare protocol: Level 1 action (pain 3–5/10): _____. Level 2 action (pain 5–7/10): _____. Level 3 action (pain 7+/10 or neurological symptom): _____ (include the specific physiotherapy contact you will call).

- After completing Week 4: Overall morning stiffness change from Week 1 baseline to Week 4 average: ____ points. Three specific improvements you notice in daily life (not just on the mat):

Worksheet: Daily Movement Integration Audit

Complete this worksheet after reading Lesson 11 on integrating yoga principles into daily movement. For each of the five high-risk activities, document your current habit and the specific cue you will apply from today. Sitting at desk — current habit: ____ / New cue I will apply: ____ / Standing break reminder set at: ____

Lifting from floor — current habit (do I round my back? hold my breath?): ____ / Hip hinge cue I will use: ____

Carrying loads — current habit (one side dominant?): ____ / Bilateral or symmetry strategy: ____

Sleeping position — current position: ____ / Modification to try: ____ / Pillow placement: ____

Driving — seat height and lumbar support currently: ____ / Lumbar roll in place? Yes / No / Plan to add one: ____

2-minute micro-practice: I will perform this at ____ times per day at ____ (specify when — e.g. every hour alarm, after lunch, before leaving my desk)

Checklist: Long-Term Maintenance Commitment Checklist

- My 15-minute daily maintenance practice is scheduled in my calendar as a recurring event (time: ____)
- I have written my personalised flare protocol on paper and placed it on my mat or in my practice space
- I have assessed my sleep position and made at least one modification (pillow between knees, removing prone sleeping, or adjusting mattress firmness)
- I am performing at least 5 position changes per hour during the workday (set and track with a phone timer for at least one full work week)
- I have calculated my Orebro score or identified whether fear-avoidance is a factor in my pain (honest self-assessment) — if score exceeds 105 or catastrophising is present, I have noted this and will explore ACT resources
- I have identified one physical activity beyond yoga that I will return to or add once my maintenance practice is consistent for 4 weeks (e.g. swimming, walking, cycling)
- Course complete — I understand my pain pattern, have a personalised practice, and know my escalation pathway if pain changes

Your Action Plan

1. Complete the directional preference screen (3 movements, 5 minutes) and record your track label (F / E / N) on a sticky note for your mat — do this today before your first session
2. Fill in the Personal Contraindication Profile worksheet and photograph it so you have a digital copy — if you have an imaging report, read it and map the findings to the anatomy lesson
3. Gather your minimum props: two yoga blocks or stacked books, a non-slip mat, and a belt or necktie as a strap substitute if a yoga strap is unavailable
4. Complete the 7-day morning stiffness tracking exercise — record before and after scores each morning and do not miss a day; the data from this week is the baseline against which all progress is measured
5. Practice the six-step core activation protocol daily for the first 14 days before adding any standing or track-specific sequences — rushing past this step is the most common cause of early-course setbacks
6. Build your track-specific sequence into a recurring calendar block (minimum 3 sessions in Week 2) and complete the Session Response Journal entry within 30 minutes of each session
7. Complete the Daily Movement Integration Audit and implement at least three of the five cues in the first week — start with the sitting desk habit as it has the highest daily repetition and therefore the fastest payoff
8. Write your three-level flare protocol on paper before you need it — a moment of mild discomfort is the wrong time to design your response; do this during Module 4 study, not during a flare
9. Schedule the 15-minute daily maintenance practice as a calendar recurring event before finishing Module 4 — treat it as a non-negotiable appointment with a 2-week no-cancellation policy to establish the habit
10. At the end of Week 4, complete the final section of the Practice Plan Design worksheet and identify one next-level resource (a physiotherapist, a yoga teacher trained in yoga therapy, or a spine health programme) to continue your progress beyond this course

