

Posture Improvement — Workbook

This workbook accompanies the Posture Improvement course and gives you structured space to record your assessment findings, track corrective exercise progress, and design your personalised daily routine. Complete each section after its corresponding module — the exercises build on each other, so your assessment data directly drives your corrective prescription.

Understanding Posture and Postural Deviations

Anchor the core concepts by journaling your current postural experience and identifying which deviation pattern fits you before running formal tests.

Exercise: Deviation Pattern Recognition

Read the descriptions of the four Janda deviation patterns (LCS, UCS, PDS, Layer Syndrome) from Lesson 2. Without running any formal tests yet, answer the prompts below based on how your body currently feels and looks.

- Which one or two deviation patterns sound most like your current posture and why? Be specific about which muscles you suspect are tight or weak.

- Where in your body do you notice the most daily discomfort or tension? List up to five locations and rate each on a 1–10 scale.

- What daily habits (sitting, phone use, sleeping position, bag carrying) do you believe are the biggest contributors to your posture pattern?

- What is your primary motivation for improving your posture — pain relief, aesthetics, athletic performance, or something else? How will you measure success at the end of 8 weeks?

Worksheet: Daily Habit Audit

Fill in your typical daily routine to map the postural stressors you are exposed to on an average weekday. Be honest — this baseline is for your eyes only and drives your ergonomic priorities in Module 4.

Hours seated per day (total)

Hours looking at a screen (computer, phone, tablet)

Hours driving per day

Hours standing per day

Sleep position (side / back / front / mixed)

Bag type and dominant carrying side

Current weekly exercise type and hours

Any existing pain, injury, or medical condition relevant to posture

Checklist: Module 1 Concept Checklist

- I can explain the difference between a tonic (postural) muscle and a phasic (movement) muscle
- I can name the four Janda deviation patterns and their primary tight and weak muscles
- I understand why static stretching alone does not produce lasting postural change
- I understand the four-phase corrective sequence: inhibit, lengthen, activate, integrate
- I have identified my likely primary deviation pattern based on self-observation
- I have recorded my daily habit audit honestly and completely

Self-Assessment — Finding Your Fault Lines

Record every assessment result in one place so you can return to this section as your corrective prescription reference throughout Modules 3 and 4.

Worksheet: Assessment Results Log

Complete each test exactly as described in Module 2, then record your results below. For each test, note whether the result is Normal, Borderline, or Positive (confirmed restriction or weakness), and any qualitative observation. Retest at weeks 2, 4, and 8 and record in the additional columns.

Wall Test — Head contact (Normal / Positive / Notes)

Wall Test — Low back gap in finger-widths

Wall Test — Thoracic contact (Normal / Positive / Notes)

Wall Test — Shoulder contact (Normal / Positive / Notes)

Wall Test — Heel lift or foot flare (Normal / Positive / Notes)

Plumb-line photo — forward head deviation in cm

Plumb-line photo — shoulder height difference (level / right high / left high)

Plumb-line photo — hip height difference

Thomas Test — Left thigh rise (Normal / Positive — iliopsoas / Positive — rectus femoris)

Thomas Test — Right thigh rise (Normal / Positive — iliopsoas / Positive — rectus femoris)

Ober Test — Left drop to neutral (Normal / Positive)

Ober Test — Right drop to neutral (Normal / Positive)

Doorway Pec Stretch — pectoral tension at 10–15 deg lean (Normal / Positive)

OHSA — foot flare or flatten (Normal / Positive — note compensation)

OHSA — knee valgus (Normal / Positive — note which side)

OHSA — excessive forward lean (Normal / Positive)

OHSA — arms fall forward (Normal / Positive)

Single-leg balance LEFT — eyes open time in seconds

Single-leg balance LEFT — eyes closed time in seconds

Single-leg balance RIGHT — eyes open time in seconds

Single-leg balance RIGHT — eyes closed time in seconds

Single-leg balance — hip drop or knee cave noted (describe)

Exercise: Corrective Priority List

Based on your completed assessment log, answer the prompts below to distil your top corrective priorities. This list becomes the input to your Module 3 exercise selection.

- List your top three tight muscles confirmed by assessment tests (e.g., left iliopsoas, bilateral pectorals, right TFL). These are your SMR and stretch targets.
 - List your top three inhibited or weak muscles inferred from the tests (e.g., bilateral gluteus maximus, deep cervical flexors, right gluteus medius). These are your activation targets.
 - Which deviation pattern does your assessment most strongly confirm — LCS, UCS, PDS, or a combination? How confident are you (high / medium / uncertain)?
 - Which single test result surprised you the most and why?
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Checklist: Assessment Completion Checklist

- Wall test completed and all five points recorded
- Plumb-line photos taken from front, side, and back — saved with date
- Modified Thomas test done both sides and result recorded
- Ober test done both sides and result recorded
- Doorway pec stretch test done and result recorded
- Overhead squat assessment observed from all three views
- Single-leg balance timed both sides, both eyes-open and eyes-closed
- Corrective Priority List completed with at least three tight and three weak muscles identified

Assessment photos labelled and saved for week 2, 4, and 8 comparison

The Corrective Exercise Sequence

Plan your personalised corrective program by selecting exercises for each phase that match your assessment findings, then track your adherence and progress.

Worksheet: My Personalised Corrective Program

Using your Corrective Priority List from Section 2 and the exercise menu from Module 3, fill in your specific exercise selections for each phase of the NASM corrective sequence. Use the provided spaces for sets, reps, duration, and any modification notes.

SMR Exercise 1 — muscle target, tool (foam roller / lacrosse ball / tennis ball), duration per side

SMR Exercise 2 — muscle target, tool, duration per side

Static Stretch 1 — muscle target, stretch name, duration per side

Static Stretch 2 — muscle target, stretch name, duration per side

Activation Exercise 1 — muscle target, exercise name, sets x reps, tempo, compensation to watch for

Activation Exercise 2 — muscle target, exercise name, sets x reps, tempo, compensation to watch for

Integration Exercise 1 — exercise name, sets x reps, primary cue, progression criteria

Total estimated daily routine time in minutes

Planned daily schedule (time of day, linked daily anchor event)

Exercise: Compensation Troubleshooting Journal

After each of your first five corrective sessions, answer the reflection prompts below. Honest tracking of compensation patterns is the fastest route to clean motor patterns.

- Which activation exercise showed the most compensation today and what form did it take (e.g., hamstring cramp during bridge, hip roll during clamshell)?

- What coaching cue or modification reduced the compensation most effectively?

- On a 1–10 scale, how strongly did you feel the target muscle working in each activation exercise today? List each exercise and its score.

- Is there any exercise in your program that consistently produces pain (not discomfort or effort) — if yes, which joint, what type of pain, and have you modified or removed it?

Checklist: Weekly Corrective Exercise Compliance

Week 1: completed daily corrective routine at least 5 of 7 days

Week 1: performed all SMR holds for 30–90 seconds without rushing

Week 1: static stretches held for full 60 seconds minimum

Week 2: activation exercises completed without noted compensation on at least 3 sessions

- [] Week 2: re-ran wall test and single-leg balance — recorded results in Assessment Log
- [] Week 3: added at least one integration exercise to daily sequence
- [] Week 3: integration exercise completed without dominant compensation pattern
- [] Week 4: completed full four-phase sequence (SMR + stretch + activate + integrate) daily
- [] Week 4: re-ran full assessment and compared to baseline — recorded all results

Daily Habits, Ergonomics, and Long-Term Maintenance

Audit and redesign your environment and daily habits to protect your postural gains and build the long-term maintenance routine that keeps results permanent.

Worksheet: Ergonomic Audit — Before and After

Complete the Before column now, before making any changes. Then make the adjustments described in Module 4 Lesson 1 and complete the After column. Include a note on cost or effort required for each change — prioritise the free and easy wins first.

Monitor top edge height relative to eye level — Before / After

Monitor distance from eyes in cm — Before / After

Chair seat height — thighs parallel to floor? Before / After

Lumbar support present and positioned at L3-L4? Before / After

Armrest height — shoulders relaxed? Before / After

Mouse distance from body — elbows close? Before / After

Phone position during desk use — level / below eye level / above? Before / After

Movement break frequency — current minutes between breaks / target

Biggest ergonomic change made and estimated cost

Exercise: Micro-Habit Design

Design your five personal postural micro-habits using the habit-stacking format (When I [anchor event], I will [postural micro-habit]). The anchor must be something you already do at least twice daily without thinking.

- Write out your five habit stacks in the format: When I [anchor], I will [postural action]. Include the specific exercise, duration, and which postural fault it addresses.

- Which two micro-habits feel most likely to stick based on how reliably you currently do the anchor behaviour? Why?

- After one week of attempting all five, which two have you actually been doing consistently and which fell off? What barrier caused each dropout?

Checklist: 8-Week Maintenance and Progress Checklist

- [] Ergonomic audit completed — Before column filled
- [] At least three ergonomic changes implemented within first 3 days
- [] Five micro-habits written out using habit-stacking format
- [] Phone alarm or Pomodoro timer set for 20–25 minute movement breaks
- [] Week 4 full assessment completed and compared to baseline
- [] Week 8 full assessment completed — plumb-line photos, wall test, Thomas test, balance test
- [] Maintenance frequency adjusted to 3x per week after week 8 if full assessment is near-normal
- [] Progressive load added to integration exercises (light weight) after week 8
- [] Referred any persistent pain (not DOMS) to a physiotherapist or sports medicine physician

Your Action Plan

1. Day 1: Complete the Daily Habit Audit worksheet and Deviation Pattern Recognition exercise before watching any module lessons
2. Day 2–3: Complete Module 2 assessments — wall test, plumb-line photos, Thomas test, Ober test, doorway pec test, OHSA, and single-leg balance; record all results in the Assessment Results Log
3. Day 3: Complete the Corrective Priority List exercise and use it to fill in the Personalised Corrective Program worksheet before starting any exercises
4. Day 4: Begin your first corrective session using your personalised program; complete the Compensation Troubleshooting Journal entry afterward
5. Days 4–14: Perform daily corrective routine (target 5 of 7 days minimum); journal compensation observations for the first five sessions
6. Day 14: Re-run wall test and single-leg balance; record results in the Assessment Log second column; adjust program if a compensation has not resolved
7. Day 15: Complete the Ergonomic Audit Before column; implement at least three changes same day; write out five habit-stack micro-habits
8. Days 15–28: Continue daily corrective routine; add one integration exercise in week 3; track micro-habit compliance honestly
9. Day 28: Re-run full assessment; take comparison photos; celebrate measurable wins and identify any remaining priority targets
10. Day 56: Final 8-week assessment; shift to 3x per week maintenance; add load to integration exercises; review Blackbook for any new FRC or PNF techniques to deepen remaining restrictions

