

ETHIX

PERSONAL TRAINING

FOR ETHIX CLIENTS AND MEMBERS

RECOVERY GUIDE

Pain, soreness, soft-tissue work and the everyday habits that help you bounce back and keep training.

Use it like a toolbox. Read Parts 1 and 2 once. After that, jump to the body part or symptom you're dealing with today.

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BEFORE YOU START

This guide is general education, not medical advice. Use it to train smarter around normal aches, never to push through something that needs a professional.

1-on-1 clients: message me and we'll adjust your program.

STANDARD MEMBERS

Sharp, pinching or joint pain: stop that exercise and skip it until it's pain-free. I can't swap exercises for pain through the Standard. If it doesn't clear up in a week or two, see a PT, sports chiropractor or doctor.

RED FLAGS

STOP AND GET MEDICAL HELP NOW

- Chest pain, fainting, dizziness or unusual shortness of breath.
- Numbness in the groin or inner thighs, or new trouble controlling your bladder or bowels. This is an emergency.
- A pop or snap with fast swelling, or you can't put weight on the leg or use the arm.
- A swollen, warm, tender calf, especially after travel or surgery.
- Pain after a fall, crash or hard hit.

BOOK AN APPOINTMENT SOON

- Numbness, tingling or weakness that spreads, stays or gets worse.
- Pain that wakes you up and doesn't ease when you change position.
- Pain with fever, feeling unwell or weight loss you can't explain.
- A joint that keeps swelling, locking or giving way.
- No improvement after 2–3 weeks of the steps in this guide.

PART 1

HOW PAIN WORKS

What your body is telling you, and how to keep training while it settles down.

I PAIN ISN'T DAMAGE

Pain is your body's alarm system. It's real, but how loud it is doesn't tell you how much tissue damage there is. Stress, poor sleep, fear of the movement and a big jump in training can all turn the volume up. Most gym aches come from doing a bit too much, too soon, in a position your body isn't ready for yet.

That's good news. It means the fix is usually changing **how much**, **how heavy** and **which position**, not stopping everything.

SORENESS OR PAIN?

	NORMAL SORENESS	PAIN TO RESPECT
Feels like	Dull, achy, tight	Sharp, pinching, burning or electric
Where	Spread through the muscle you trained	One spot, or in a joint or tendon
When	Peaks 1–2 days after, eases as you warm up	During the rep, or worse as you warm up
Lasts	2–4 days, then gone	Hangs around or keeps coming back

TEST, DO THE WORK, RETEST

Before any mobility or soft-tissue drill, test the movement that bugs you. Do 2 minutes of work, then test again. Better? Keep it. No change? Try a different drill.

THE TRAFFIC LIGHT RULE

Rate pain from 0 (none) to 10 (worst imaginable) during and after training.

0-2 GREEN

Train as planned.

3-5 YELLOW

OK if it doesn't climb during the session and is back to normal by the next morning.

6+ RED

Stop that exercise today. Standard members: skip it until it's pain-free.

The 24-hour check. If it's worse the next morning, you did too much. Pull back next time.

CHANGE IT, DON'T SKIP IT (1-ON-1 CLIENTS)

For 1-on-1 clients, or to try with your PT. Work down this list until the movement is green or yellow.

- **Less range.** Box squats, block pulls, floor press, partial reps in the range that feels fine.
- **Less load.** Drop the weight 20–40% and add reps.
- **Slower.** A 3-second lowering and a pause lets you own the position.
- **Different grip, stance or tool.** Neutral grip, dumbbells instead of a barbell, a machine, a landmine.
- **Different exercise.** Same muscle, a version that feels fine.
- **Isometric holds.** 5 × 30–45 sec of a hard, pain-free hold (like a wall sit) often calms a cranky tendon.

LOOK ABOVE AND BELOW

The sore spot is often the victim, not the cause. Stiff ankles push stress into knees, stiff hips and upper back push it into the low back and shoulders. Each body part section tells you where to look.

BACK TO FULL TRAINING

Climb one step at a time. **Move up** when 2 sessions in a row stay green or yellow and you feel normal the next morning. **Drop back a step** if it goes red or you're worse the next morning.

1 CALM IT DOWN

Walk daily. Pain-free range only. Isometric holds 5 × 30–45 sec. Train everything else as normal.

2 REBUILD

Light weight (about 50–60% of normal), 2–3 × 12–15, slow lowering. Range a little bigger each session.

3 STRENGTHEN

Back to your program's rep ranges. Add about 5–10% load a week.

4 SPEED AND POWER

Jumps, sprints, throws and heavy top sets come back last, at about half the usual volume.

5 FULL TRAINING

Back to the plan. Keep the "Build it up" exercises in your warm-up 2–3 times a week for a month.

USUAL TIMELINES

Muscle tweak or stiff back	Days to 2 weeks
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Mild muscle strain	2–6 weeks
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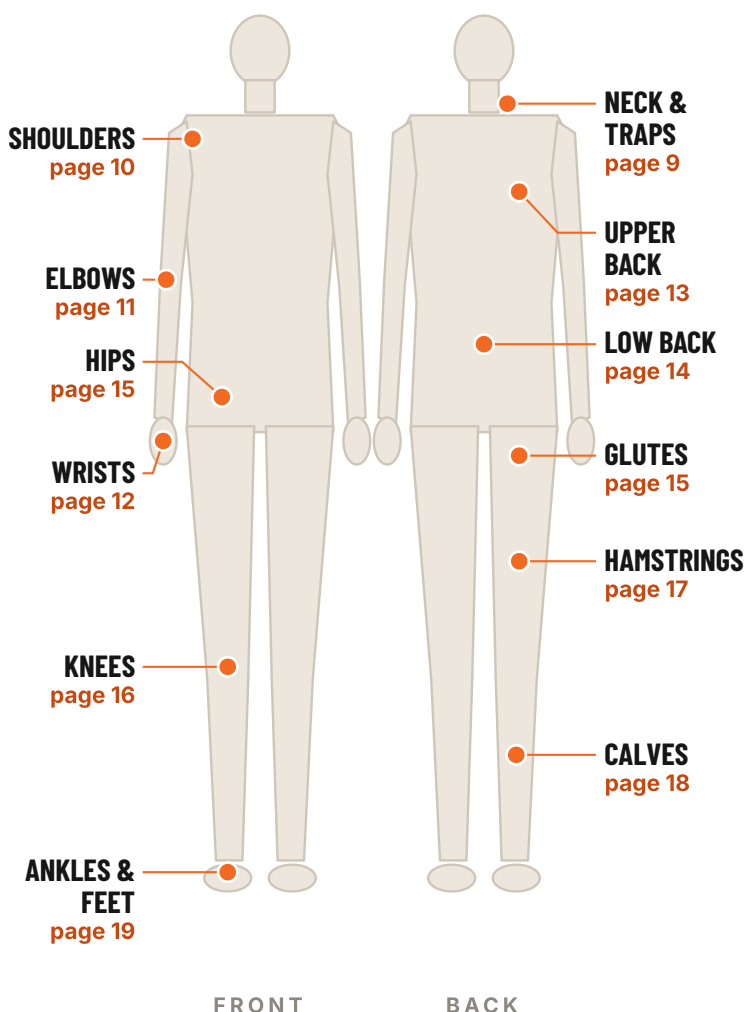
Cranky tendon	6–12 weeks, sometimes longer
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Everyone heals at a different pace. Not moving forward after 2–3 weeks? Get it checked.

PART 2

WHERE DOES IT HURT?

Tap an area to jump to its page. Each page starts with a first move to try today.



Pain that moves around, burns or tingles, or doesn't fit one area? Use the **symptom finder**. "3 × 10" means 3 sets of 10 reps; "per side" means each arm or leg. Start light, 2–3 times a week.

SYMPTOM FINDER

Not sure which body part it is, or it's more of a feeling than a spot? Start here. Some moves in this guide aren't in your app's video library yet.

YOU FEEL

DO THIS

Achy, sore muscles 1–3 days after a workout

Normal. Walk, sleep, eat protein, roll or gun after training. Train; it eases as you warm up.

Sharp pain mid-rep

Stop that exercise. Standard: skip it until it's pain-free. 1-on-1: use the **"Change it" list** in Part 1. Don't test it again with heavy weight today.

Pinch at the end of a range

Shorten the range, change stance or grip, add mobility for the joints above and below.

Tendon pain that warms up, then hurts worse later

Classic tendon pattern. Isometric holds, then slow heavy work. Cut jumps and sprints.

Stiff in the morning, loosens up

Usually fine. Move early: walk, mobility, heat. Check sleep and steps.

Clicking or popping with no pain

Usually harmless. Keep training.

Numbness, tingling, burning

A nerve is irritated. Don't stretch or roll hard on it. Change position. See a professional if it stays.

A knot that sends pain somewhere else

Trigger point. Ball pressure 60–90 sec, then move the area.

Swelling, heat or redness in a joint

Rest that area and get it checked.

Everything aches, sleep is bad, lifts are going backward

You're under-recovered. Take an easier week, sleep more, eat enough.

NECK AND UPPER TRAPS

FIRST MOVE

Ball on the upper trap against a wall for 90 seconds, then 10 chin tucks.

WHAT YOU MIGHT FEEL

- Stiff neck or tight traps, often after desk days or heavy pulls.
- Headaches at the temple or behind the eye.

TRAIN AROUND IT

- Keep your chin tucked slightly on shrugs, deadlifts and rows. Don't crane forward.
- Swap heavy barbell shrugs for lighter dumbbell shrugs, and lower the weight on upright rows or drop them.

RELEASE

- Ball against a wall on the upper trap (top of the shoulder, not the neck), 60–90 sec per side.
- Gentle side-bend stretch: ear toward shoulder, opposite hand reaching to the floor, 30 sec each.
- Foam roll the upper back (see [Upper back](#)) to free up the area below.

BUILD IT UP

- **Chin tucks:** 2 × 10, 3-sec hold.
- **Band pull-aparts** 2 × 15–20 and **face pulls** 3 × 12–15.
- **Rows:** 3 × 10–12.
- Get up from your desk every 30–45 minutes.

GET IT CHECKED IF

- Pain or tingling runs down the arm, your grip gets weaker, or headaches are sudden and severe.

SHOULDERS

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Switch to dumbbells with a neutral grip and press only in the range that stays green.

WHAT YOU MIGHT FEEL

- A pinch at the top or front of the shoulder pressing overhead.
- A front-of-shoulder ache at the bottom of a bench press or dip.

TRAIN AROUND IT

- Use a neutral grip (palms facing) and dumbbells instead of a barbell.
- Shorten the range: floor press or board press instead of a full bench; stop dips at 90°.
- Landmine press instead of strict overhead press.
- Keep the shoulder blades back and down on presses, and tuck the elbows to about 45°.

RELEASE

- Ball on the back of the shoulder blade, lying on the floor or against a wall, 60–90 sec.
- Ball on the pec near the armpit, 60 sec.
- Foam roll the upper back and lats. A stiff upper back makes overhead pinches worse.

BUILD IT UP

- **Band external rotations:** 2–3 × 12–15 per side.
- **Face pulls:** 3 × 12–15. **Rows:** 3 × 10–12, at least as often as you press.
- **Wall slides** 2 × 10 or **scapular push-ups** 2 × 12.

GET IT CHECKED IF

- Weakness lifting the arm, the shoulder feels like it slips out, night pain, or pain after a fall.

ELBOWS

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Neutral grips and straps today, then 5 × 30–45 sec wrist isometric holds.

WHAT YOU MIGHT FEEL

- **Outside:** pain gripping, curling or rowing. **Inside:** pain on pull-ups and curls.
- Tingling into the ring and pinky fingers: a nerve, not a tendon.

TRAIN AROUND IT

- Use neutral grips, straps on heavy pulls, and thicker handles.
- Cut down curl and pull-up volume for a few weeks. Swap straight-bar curls for hammer curls.
- Don't sleep with your arms tightly bent if you have pinky-side tingling.

RELEASE

- Ball or roller on the forearm muscles (top for outside pain, underside for inside pain), 60–90 sec. Stay off the bony points.
- Massage gun along the forearm on low.

BUILD IT UP

- **Wrist curls and reverse wrist curls:** 3 × 15, 3 sec down.
- **Isometric holds:** hold a dumbbell with the wrist bent back, 5 × 30–45 sec.
- **Farmer carries:** 3 × 30–40 yards once it calms down.

GET IT CHECKED IF

- Tingling or numbness that stays, a weak grip, or a pop with bruising at the front of the elbow.

WRISTS AND HANDS

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Keep the wrist straight: push-ups on handles and the bar stacked over your forearm.

WHAT YOU MIGHT FEEL

- Pain on the back of the wrist in front squats, push-ups or the bottom of a bench.
- Tingling in the thumb and first two fingers, often worse at night.

TRAIN AROUND IT

- Keep the bar over the forearm on presses, not tipped back in the hand.
- Push-ups on dumbbells or handles to keep the wrist straight.
- Cross-arm or strap grip for front squats.
- Wrist wraps for heavy pressing.

RELEASE

- Forearm work from the [Elbows](#) page.
- Gentle wrist circles and rocking forward and back on hands and knees.

BUILD IT UP

- **Wrist curls and reverse wrist curls:** 2–3 × 15, 3 sec down.
- **Wrist rotations** with a light dumbbell or hammer: 2 × 10 each way.

GET IT CHECKED IF

- Pain after a fall on an outstretched hand (especially at the base of the thumb), swelling, or tingling that doesn't go away.

UPPER BACK

FIRST MOVE

Extend back over a foam roller at 3–4 spots, 5 breaths each.

WHAT YOU MIGHT FEEL

- Stiffness between the shoulder blades, worse after sitting.
- A sharp catch when you twist or breathe deep after a tweak.

TRAIN AROUND IT

- Lighter, higher-rep rows and pulldowns keep it moving.
- Use a supported row (chest on a bench) if heavy bent-over rows bother it.

RELEASE

- Foam roller across the upper back with hands behind your head. Extend back over the roller at 3–4 spots for 5 breaths each. Don't roll the low back.
- Two balls taped together (one either side of the spine) for a more targeted version.

BUILD IT UP

- **Open books** and **quadruped thoracic rotations**: 2 × 8–10 per side.
- **Rows** 3 × 10–12, **face pulls** 3 × 12–15, **Y-raises** 2 × 10–12 (light).

GET IT CHECKED IF

- Pain with chest pressure or shortness of breath, pain after a fall, or pain that's there all the time regardless of position.

LOW BACK

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Go for a 10-minute walk, then swap barbell lifts for goblet squats and hip thrusts until it's green.

WHAT YOU MIGHT FEEL

- A tweak or tight, guarded low back after lifting.
- An ache that's worse bending forward, or worse arching back.

Most tweaks settle in days to a couple of weeks.

Movement beats bed rest.

TRAIN AROUND IT

- Walk every day: several short walks beat one long one.
- Bending hurts? Skip deep hinges; lie propped on your elbows. Arching hurts? Try knees-to-chest.
- Until it's green, use goblet squats, block pulls, hip thrusts and single-leg work instead of barbell squats and deadlifts. Brace before every rep.

RELEASE

- Ball on the glutes, roller on the upper back. Don't roll the low back itself.
- Half-kneeling hip flexor stretch, 60 sec each side.

BUILD IT UP

- **Bird dogs** 2 × 6 per side (10-sec hold), **dead bugs** 2 × 8 per side, **side planks** 3 × 15–30 sec per side, **curl-ups** 3 × 5 (10-sec hold). Once calm, add **back extensions** 2 × 12 and light **RDLs** 3 × 8.

GET IT CHECKED IF

- Pain travels below the knee, leg numbness or weakness, groin numbness or bladder/bowel changes (emergency), or pain after a fall.

HIPS AND GLUTES

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Squat to a box at a depth that stays green, with a slightly wider stance.

WHAT YOU MIGHT FEEL

- A pinch in the front of the hip at the bottom of a squat.
- A deep buttock ache, or outer hip ache lying on that side.

TRAIN AROUND IT

- Hips are built differently: try a wider stance with toes turned out more.
- Squat to a box at the depth that stays green, or use split squats and step-ups for a while.

RELEASE

- Ball on the glutes and outer hip, 60–90 sec per side.
- Roller on the quads and outer thigh muscles (not the IT band itself).
- Banded hip work: band around the top of the thigh pulling backward in a half-kneeling stretch, 2 minutes per side.

BUILD IT UP

- **Glute bridges or hip thrusts:** 3 × 10–15.
- **Side-lying leg raises or banded walks:** 2 × 15–20 per side.
- **Single-leg RDLs** 3 × 8 per side and **Copenhagen side planks** 3 × 10–20 sec per side.

GET IT CHECKED IF

- Groin pain that catches, clicks or locks, pain when you put weight on the leg, or night pain.

KNEES

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Box squat to a pain-free depth, then 5 × 30–45 sec wall sits.

WHAT YOU MIGHT FEEL

- An ache around the kneecap on stairs, squats or after sitting.
- Pain just below the kneecap on jumps and deep squats (tendon).

TRAIN AROUND IT

- Box squats to a pain-free depth, or reverse lunges instead of forward lunges.
- Keep the knee tracking over the middle toes. Don't let it cave in.
- For tendon pain: cut jumping and sprinting for a while, but keep loading the leg.

RELEASE

- Roll the quads, outer thigh and calves 1–2 minutes each.
- Ankle mobility (see [Ankles](#)). A stiff ankle pushes stress into the knee.

BUILD IT UP

- **Tendon plan:** wall sits or Spanish squats 5 × 30–45 sec. Then slow, heavy leg press, leg extensions and split squats, 3–4 × 6–10 with 3 sec down. Add jumps once those feel easy.
- Glute work from the [Hips](#) page. Weak hips let the knee cave in.
- **Step-downs** from a low box: 3 × 8–10 per side.

GET IT CHECKED IF

- Fast swelling after a twist, the knee locks or gives way, or you can't straighten it.

HAMSTRINGS

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Swap deep RDLs for bridges and light leg curls in a pain-free range.

WHAT YOU MIGHT FEEL

- Tightness that doesn't change no matter how much you stretch.
- A sharp grab mid-sprint or RDL, or an ache near the sit bone.

"Tight" hamstrings are often protective or weak, not short. Strength usually helps more than stretching.

TRAIN AROUND IT

- After a strain: no sprinting or heavy stretching for a while. Bridges and light leg curls in a pain-free range.
- For high hamstring pain: avoid deep hinges and long sitting. Use shorter-range RDLs and hip thrusts.

RELEASE

- Roller or ball on the hamstrings and glutes, 1–2 min. Massage gun on low.

BUILD IT UP

- **Long-lever bridges** 3 × 10, **leg curls** 3 × 10–12, slow **RDLs** 3 × 8.
- **Nordic curls** (assisted at first): 2–3 × 3–6 once you're pain-free. One of the best tools to prevent strains.

GET IT CHECKED IF

- A pop with bruising on the back of the thigh, trouble walking, or pain with tingling down the leg.

CALVES AND ACHILLES

FIRST MOVE · 1-ON-1 CLIENTS OR WITH YOUR PT

Cut jumps and sprints, then 5 × 30–45 sec calf raise holds.

WHAT YOU MIGHT FEEL

- A stiff Achilles in the morning that loosens as you walk.
- Tight calves or a sudden grab after more jumping, running or steps.

TRAIN AROUND IT

- Increase steps, running and jumping gradually: about 10% more a week.
- Cut jumping and sprinting while the tendon is cranky, but keep doing calf strength.

RELEASE

- Roll or ball the calves 1–2 min each, rotating the foot in and out. Stay off the Achilles tendon itself.
- Calf stretch against a wall, knee straight then bent, 30–60 sec each.

BUILD IT UP

- **Tendon plan:** calf raise holds 5 × 30–45 sec. Then slow, heavy calf raises, straight-knee and bent-knee, 3–4 × 8–12 (3 sec up, 3 sec down). Add hops, 3 × 20, once those feel easy.

GET IT CHECKED IF

- A pop or feeling of being kicked in the back of the leg, you can't rise onto your toes, or a calf that's swollen, warm and tender.

ANKLES AND FEET

FIRST MOVE

Roll your foot on a ball for 1–2 minutes, then knee-to-wall ankle mobility.

WHAT YOU MIGHT FEEL

- Heels lift at the bottom of a squat, or the ankle feels wobbly after old sprains.
- Sharp heel pain with your first steps in the morning.

TRAIN AROUND IT

- Squat with small plates or wedges under your heels, or in lifting shoes.
- Supportive shoes for walking while the heel is sore.

RELEASE

- Roll the bottom of your foot on a ball 1–2 min, especially before getting up in the morning.
- Knee-to-wall ankle mobility: 10 reps each side, moving the wall farther away as you improve. A band pulling the ankle backward makes it more effective.

BUILD IT UP

- **Calf raises** (see [Calves](#)), **toe yoga** 2 × 10, **short-foot holds** 3 × 10 sec.
- **Single-leg balance**: 3 × 30 sec per side, then on a pillow or with eyes closed.

GET IT CHECKED IF

- You can't walk 4 steps after a sprain, there's pain on the bony points of the ankle, or the foot is numb or changes color.

PART 3

SOFT-TISSUE WORK

Foam rollers, balls, massage guns and bands: what they do, and how to use them.

WHAT IT DOES

Rolling and percussion don't break up scar tissue or "release" fascia the way people say. They change how your nervous system reads the area for a while: less tightness, more range, less soreness. That window is when you should move well.

- **Before training:** short bursts for range of motion. It won't hurt your performance.
- **After training or on rest days:** longer, gentler work for soreness.
- **Always follow it with movement**, ideally the movement you're trying to improve.

TRIGGER POINTS

Tender knots in a muscle can send pain somewhere else. A knot in the upper trap can feel like a headache at the temple. A knot in the back of the shoulder blade can ache deep in the front of the shoulder. If pressing a spot recreates your familiar pain, you've found something worth working on.

FOAM ROLLER AND BALL

- **Pressure:** about a 5–7 out of 10. You should be able to breathe slowly and relax. If you're holding your breath or tensing up, ease off.
- **Roll slowly:** about an inch per second. Spend 30–60 seconds per area before training, 1–2 minutes after.
- **Find a hot spot and hold** it for 30–90 seconds while you breathe, until it eases by about half.
- **Add movement.** While holding pressure, bend and straighten the joint underneath (like the knee while rolling your quad). It covers more ground than rolling alone.
- **Contract, then relax.** On a tight spot, push into the tool for 5 seconds, then relax and sink deeper. Repeat 3–5 times.
- A lacrosse or massage ball reaches smaller spots: glutes, feet, the back of the shoulder blade, pecs.

MASSAGE GUN

- Use the round ball head for most areas. Let the gun float. Don't press hard.
- **Before training:** 30–60 seconds per muscle to loosen up for range.
- **After training or on rest days:** 1–2 minutes per muscle on a lower speed.
- Keep it moving along the muscle. Don't park it on one spot.
- Skip it right before heavy lifts or jumps if you notice it makes you feel flat.

BANDS AND MOBILITY DRILLS

- **Banded joint work:** loop a band around the joint (hip, ankle, shoulder) to gently pull it into a better position while you move. Should feel like a stretch in the joint, not a pinch.
- **Hold mobility positions for at least 2 minutes**, moving in and out of the tight spot instead of sitting still.
- **Lock it in with strength.** New range you can't control won't last. Follow mobility with a light set of the real exercise.
- A daily 10 minutes beats a 60-minute session once a week.

DON'T ROLL OR GUN

- Directly on bones, joints, the spine, the front or sides of the neck, the armpit, the back of the knee or the groin.
- Over a fresh injury, bruise, open cut, rash, swelling or varicose veins.
- On a calf that's swollen, warm and tender (possible blood clot: see a doctor).
- If you take blood thinners, have osteoporosis, a nerve condition or a pacemaker, or are pregnant, without your doctor's okay.
- If it causes numbness, tingling, shooting pain or leaves bruises. Back off.

PART 4

RECOVERY FOUNDATIONS

Sleep, food, water and stress do most of the work. Foam rollers and massage guns are the extras.

SLEEP

Sleep is when you rebuild. Adults need **7 or more hours a night**, and hard training usually means the top end of that.

- Same bedtime and wake time, even on weekends (within about an hour).
- Cool, dark, quiet room. Around 65–68°F works for most people.
- Screens down and lights dim for the last 30–60 minutes.
- **Caffeine stops at least 8 hours before bed.**
- Alcohol wrecks sleep quality even when you fall asleep faster.
- Short on sleep? A 20–30 minute nap before 3 pm helps.

Snoring loudly, waking up gasping or always tired despite 8 hours? Ask your doctor about a sleep check.

HYDRATION

Even mild dehydration makes workouts feel harder and recovery slower. In Arizona heat, you lose more than you think.

- **Check your pee.** Pale yellow most of the day is the goal. Dark means drink more.
- Start the day with a big glass of water and keep a bottle with you.
- Weigh yourself before and after a sweaty session: each pound lost is roughly 16–24 oz to replace.
- Sweating a lot or training over an hour? Add electrolytes (sodium especially), not just plain water.
- More isn't always better. Huge amounts of plain water during long sessions can be dangerous.

SUNLIGHT

Morning light sets your body clock, which makes it easier to fall asleep at night.

- Get outside for 5–10 minutes within an hour of waking (longer on cloudy days). A morning walk counts toward your steps.
- Keep evenings dim. In Arizona, use sunscreen and shade for longer midday exposure.

FOOD AND HEALING

Food is part of recovery every day, and part of the treatment when something's hurt.

EVERY DAY

- **Hit your protein target.** It's the raw material for repair. Spread it across 3–5 meals.
- **Eat carbs around training** if you train hard or twice a day.
- **Fruit, vegetables and fatty fish** (salmon, sardines) twice a week cover a lot of bases.

WHEN YOU'RE HURT

- **Don't crash your calories.** Healing takes energy. If you're cutting, move to maintenance or a small deficit until it settles.
- **Keep protein at target or a little above** so you hold on to muscle while you train less.
- **Go easy on alcohol.** It slows repair and wrecks sleep.

FOR TENDONS AND LIGAMENTS

Early research suggests about 15 g of gelatin or collagen with around 50 mg of vitamin C (a small glass of orange juice), about an hour before your tendon exercises, may help your body build collagen. Optional, cheap and low-risk. Check with your doctor first if you have a medical condition.

IMMOBILIZED OR IN A BOOT?

Muscle drops fast when a limb can't move. Keep protein high, keep training everything else, and eat close to maintenance.

SUPPLEMENTS

None of these are required. Food, sleep and training come first. Check with your doctor before starting anything, especially if you take medication, are pregnant or have a medical condition.

WORTH CONSIDERING

- **Creatine monohydrate.** 3–5 g a day, any time. The most researched supplement there is for strength and muscle.
- **Protein powder.** Just convenient food when you can't hit protein with meals.
- **Caffeine.** Helps performance. Keep it early (see [Sleep](#) for timing).

ONLY IF YOU NEED IT

- **Vitamin D.** Worth a blood test, especially if you're indoors most of the day. Supplement based on your result.
- **Omega-3 (fish oil).** If you rarely eat fatty fish.
- **Magnesium.** Some people find it helps sleep. Evidence is mixed.
- **Electrolytes.** For heavy sweaters and hot days.

Pick third-party tested products (NSF Certified for Sport or Informed Sport). Skip anything that promises to "melt fat" or "boost testosterone".

STRESS AND BREATHING

Stress uses the same recovery budget as training. A hard week at work is a reason to keep training, but maybe not to chase PRs.

- 2–5 minutes of slow nasal breathing after training or before bed: in for 4 seconds, out for 6–8.
- Walks, time with people you like and time off your phone all count as recovery.

ACTIVE RECOVERY

- Easy walking or cycling on rest days moves blood without adding fatigue.
- Hit your daily steps. They help recovery and appetite control.
- Every 4–8 hard weeks, take an easier week if your body is asking for it.

HEAT, COLD AND ICE

- **Heat** (warm shower, heating pad, sauna) is great for stiffness and relaxing before bed. Hydrate after a sauna.
- **Ice** is fine for short-term pain relief on a fresh tweak. Long, repeated icing doesn't speed healing; gentle movement usually does more.
- **Cold plunges** help with soreness, but right after lifting they may blunt muscle growth. If muscle is the goal, keep cold 6+ hours away from lifting or use it on rest days.
- Heart condition or blood pressure problem? Get your doctor's okay before saunas or cold plunges.

ROUTINES

Plug-and-play routines you can use every day.

WARM-UP IN 6 STEPS

Start with 5 minutes of easy cardio, then:

- **1. Soft tissue.** 2–3 minutes of rolling or the massage gun on the areas you'll train.
- **2. Mobility.** 1–2 drills for your stiffest spots (hips, ankles, upper back).
- **3. Correctives.** One drill for your problem area from [Part 2](#).
- **4. Activation.** Wake up the glutes, core and upper back: bridges, band pull-aparts, dead bugs.
- **5. Movement practice.** Bodyweight or light versions of the day's main lift.
- **6. Prime.** A few fast, explosive reps: jumps, med ball throws or fast push-ups.

Then do 1–2 lighter sets before each main lift.

10-MINUTE DAILY RESET

On rest days or before bed:

- Foam roll upper back: 1 min.
- Ball on glutes: 1 min per side.
- Half-kneeling hip flexor stretch: 1 min per side.
- Knee-to-wall ankle mobility: 10 per side.
- Open books: 8 per side.
- Roll calves and feet: 1 min.
- Slow breathing lying on your back, legs up on a couch: 2 min.

AFTER A TOUGH SESSION

- 5 minutes of easy walking or cycling.
- Roll or gun the muscles you trained, 1–2 min each.
- Protein and water within a couple of hours.
- In bed on time.

Consistency wins. 10 minutes most days does more than an hour once in a while.

SPECIAL SITUATIONS

Extra recovery notes for competitors, lifters over 40, desk workers and women.

COMPETITORS IN PREP

Late in a prep you're lean, low on calories and recovering slower than usual. Aches pop up more easily, so plan for it.

- **Cut volume before intensity.** When recovery slips, drop sets first and keep the weights as heavy as you safely can.
- **Skip new max attempts** in the last 6–8 weeks. Keep the strength you have.
- **Protect sleep.** Hunger and cardio make it harder, so be strict with the routine. Keep caffeine early.
- **Cardio:** low-impact options (incline walk, bike) are kinder on joints than running when you're depleted.
- **Posing practice counts as training.** Cramping, low back and calf soreness from posing are common; build it up gradually.
- **Peak week:** don't try anything new. Keep training light and pumping, and follow your coach's plan for water and sodium.
- **After the show:** bring calories up steadily and expect to feel beat up for a couple of weeks. Use the [ladder in Part 1](#) to get back to heavy training.

LIFTING OVER 40

You can still build muscle and strength at any age. Recovery just takes a little more planning.

- **Warm up longer:** 10–15 minutes, with more ramp-up sets before heavy lifts.
- **Keep lifting heavy-ish.** Strength training protects muscle, bones and joints as you age. Work in the 6–15 rep range. Over 40? Keep main lifts 1–2 reps short, and you can stop isolation sets 1 rep short instead of going to failure.
- **Give joints a break from repeats.** Rotate exercise variations every block rather than grinding the same barbell lift.
- **Recovery days matter more.** Two hard days in a row may need an easier day after them.
- **Protein matters more too.** Hit your target every day and get a solid serving at each meal.
- **Train balance and power.** Single-leg work and light, fast reps (like med ball throws) keep you quick and steady.

DESK WORKERS

- **Move every 30–45 minutes.** Stand, walk to refill water, do 5 squats. Your best posture is your next one.
- **Screen at eye level,** elbows close to your sides, feet flat.
- **Daily desk antidote (5 min):** chin tucks, band pull-aparts, half-kneeling hip flexor stretch, open books, glute bridges.
- **Hit your steps.** A walk at lunch helps your back and your recovery.

WOMEN

YOUR CYCLE

- Strength, energy and recovery can feel different at different points in your cycle. There's no need to plan around it unless you notice a pattern.
- If certain days always feel harder, use the [readiness check](#) and train lighter on those days.
- Water weight before your period can add several pounds. Compare weights and photos from the same point in your cycle.
- **Missed or stopped periods are not normal**, even when training hard or dieting. It can be a sign of eating too little for your training. See your doctor.

PREGNANCY AND POSTPARTUM

- Get your doctor's clearance before training during pregnancy or after giving birth.
- Most healthy pregnancies can keep exercising, usually with less intensity and no lying flat on your back for long periods later on.
- Stop and call your doctor for bleeding, fluid leaking, dizziness, chest pain, painful contractions or calf swelling.
- After birth, rebuild slowly with breathing, pelvic floor and core work first. A pelvic floor physical therapist is worth seeing, especially for leaking, heaviness or a gap in the stomach muscles.

DAILY READINESS CHECK

Each morning, rate these four from 1 (bad) to 5 (great), then add them up.

	1	3	5
Sleep	Under 5 hrs or awful	OK	7+ hrs, rested
Soreness	Very sore, stiff	A little	None
Stress	Very high	Normal	Calm
Energy	Drained	Normal	Ready to go

16-20

Train as planned. Good day to push.

11-15

Train, but drop 1 set per exercise and skip PR attempts.

4-10

Recovery day: walk, 10-minute reset, early night.

Any single score of 1? Treat the day as yellow at best. Several red days in a row? Look at sleep, food and stress before adding more training.

THIS WEEK

	M	T	W	T	F	S	S
Sleep							
Soreness							
Stress							
Energy							
Total							

PAIN LOG

Rate pain 0–10 during the exercise and the next morning. Use the traffic light rule to decide your next step.

DATE	EXERCISE OR AREA	DURING	NEXT AM	NOTES

SOURCES

My own summary of ideas from these books and studies.
Want to go deeper? Start with the books.

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