

# Sweetwater Pain & Spine

Home Exercise Handout

## Sacroiliac Joint (SIJ) Stabilization Exercises

**Sacroiliac joint (SIJ) dysfunction** occurs when the joint connecting your lower spine to the pelvis becomes painful due to inflammation, injury, or poor muscular support. The exercises below target the key stabilizing muscles — including the gluteus medius, gluteus maximus, and deep core — to reduce stress on the SIJ, improve pelvic control, and decrease pain with daily activities. Perform consistently — results build over 4–6 weeks.

### 1 Posterior Pelvic Tilt with Core Set

1–2 sets · Hold 5–10 seconds · 2–3 times per day

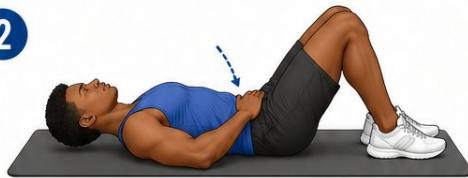
1



#### START POSITION

Lie on your back with knees bent and feet flat.  
Arms at your sides.  
Relax your shoulders and take a breath in.

2



#### ENGAGE LOWER ABDOMINALS

Lightly activate the lower abdominals (gentle navel-in, not a forceful suck-in).  
Think about drawing your navel slightly toward your spine.  
Keep breathing normally.

3



#### POSTERIOR PELVIC TILT (CORE SET)

Simultaneously press your lower back into the floor (flattening it) by tilting your pelvis posteriorly.  
Maintain the abdominal activation while pressing the low back down.  
This creates muscular force closure of the SIJ.

4

  
HOLD  
5–10  
SECONDS



#### HOLD & BREATHE

Hold for 5–10 seconds while breathing normally.  
Then relax and repeat.  
Perform 1–2 sets.

### 2 Clamshell (Hip External Rotator Strengthening)

2–3 sets · 10–15 reps per side · 4–6 days per week

1



#### START POSITION

Lie on your side with your hips stacked.  
Knees bent to 45°.  
Feet together.  
Support your head with your bottom hand.  
Keep your core lightly engaged and pelvis stable.

2



#### RAISE TOP KNEE

Keeping your feet together, slowly raise your top knee as high as you can — without rotating your hips backward.  
Hold the top position for 2 seconds.

3



#### LOWER SLOWLY

Lower your top knee slowly over 3 seconds.  
Ensure the pelvis does not roll backward.  
Keep your core engaged throughout.

4



#### PROGRESS

Progress by placing a resistance band just above the knees.  
Focus on control, stability, and muscle activation — not speed or height.

### 3 Side-Lying Hip Abduction

2–3 sets · 10–15 reps per side · 4–6 days per week

1



#### START POSITION

Lie on your non-affected side. Support your head with your bottom arm. Bottom leg slightly bent for stability. Top leg straight. Foot slightly internally rotated (toes toward floor). Keep your core engaged and pelvis stacked.

2



#### RAISE TOP LEG

Raise your top leg to approximately 30–40°. Keep your hips stacked — do not let your hip roll backward. Hold the top position for 2 seconds.

3



#### LOWER SLOWLY

Lower your top leg slowly and with control. Do not let your lower back arch or your hips roll backward. Maintain a slight internal rotation (toes toward floor).

4



#### REPEAT

Complete all reps on one side, then switch sides. Focus on control, stability, and muscle activation.

### 4 Single-Leg Glute Bridge

2–3 sets · 10–15 reps per side · 4–6 days per week

1



#### START POSITION

Lie on your back, knees bent. Perform a posterior pelvic tilt and core set first. Extend one leg so it is straight and parallel to the floor at the level of the opposite knee. Drive the standing foot into the floor to lift the hips. The pelvis must remain level — no drop to the extended leg side.

2



#### HIPS DOWN

Hips on the floor. Keep the extended leg parallel to the floor. Engage glutes and core. Maintain a level pelvis.

3



#### LIFT HIPS

Drive through your heel. Squeeze your glute. Lift your hips until your body forms a straight line from shoulders to knee. Keep pelvis level — no dropping to the side.

4



#### HOLD

Hold the top position for 3 seconds. Maintain a level pelvis and strong core. Lower with control and repeat.

■ Stop any exercise that causes sharp pain, new numbness or weakness, or worsening of symptoms, and contact our office. These exercises supplement but do not replace your provider's individualized plan.

Questions or concerns? Call Sweetwater Pain & Spine: (775) 870-1480

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