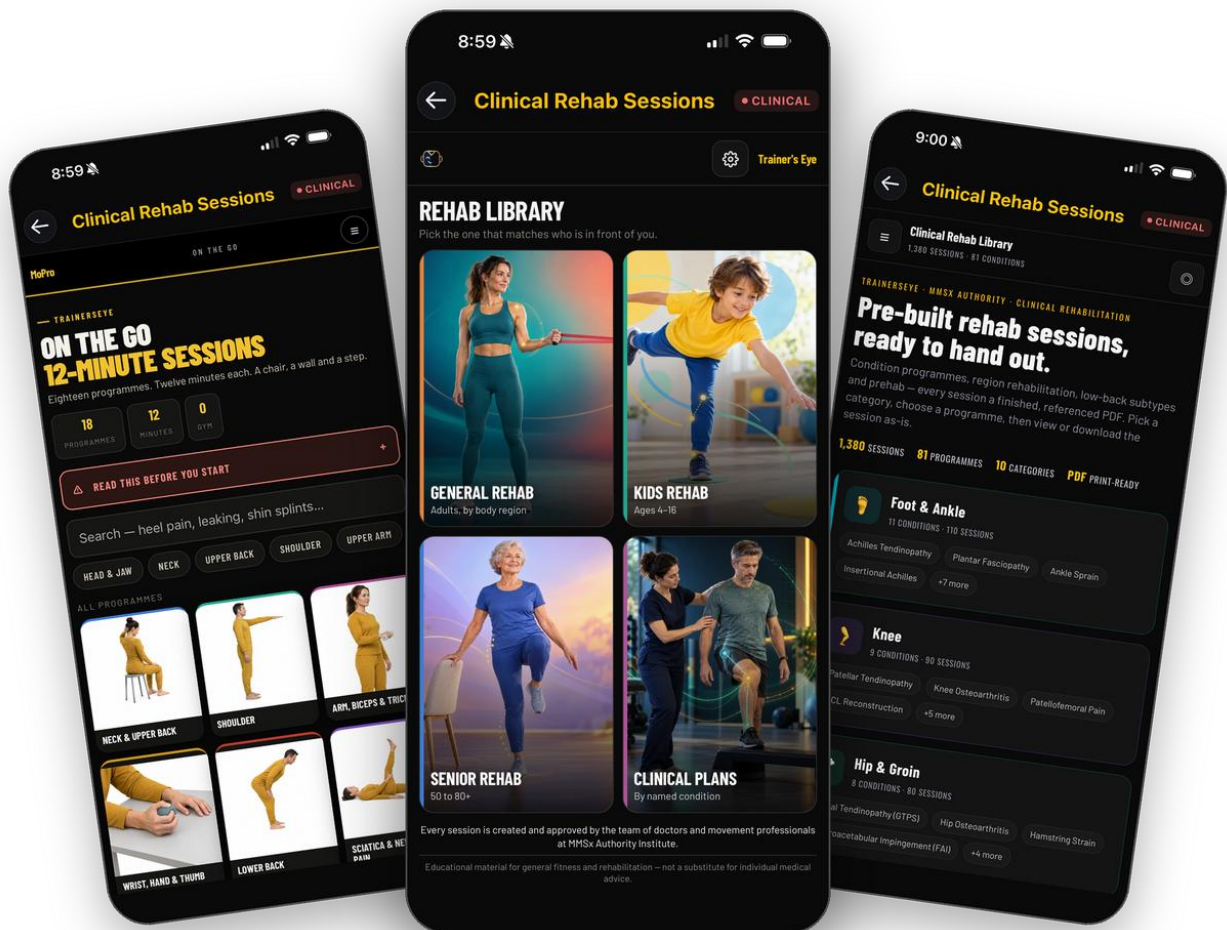


USER GUIDE

Clinical Rehab Sessions

Four rehab libraries behind one door – adults by body region, kids 4–16, seniors 50 to 80+, and clinical plans by named condition – every session created and approved by MMSx Authority Institute.

How to use the tool, step by step – in the TrainersEye app



What is Clinical Rehab Sessions?

Clinical Rehab Sessions is the TrainersEye rehab library — four doors, one for whoever is in front of you. General Rehab: eighteen On the Go 12-minute programmes for adults, by body region, run on a chair, a wall and a step, each with a pain rule, red flags and a printable session sheet. Kids Rehab: the Kids Movement Map, fifteen places for ages 4 to 16 with lettered sessions and a printable card. Senior Rehab: Senior Active Longevity, home sessions for adults 50 and over, chosen by age or by condition, in four languages. Clinical Plans: 1,380 pre-built sessions across 81 programmes in ten categories, each a finished, referenced PDF to view or download as-is. Every session is created and approved by the team of doctors and movement professionals at MMSx Authority Institute — educational material, not a substitute for individual medical advice.

Four libraries, one door

General Rehab for adults by body region, Kids Rehab for ages 4–16, Senior Rehab for 50 to 80+, Clinical Plans by named condition.

Sessions, not lectures

Twelve-minute couplets on a clock, lettered kids sessions, senior sessions worked in order from A, timed clinical blocks.

Rules built in

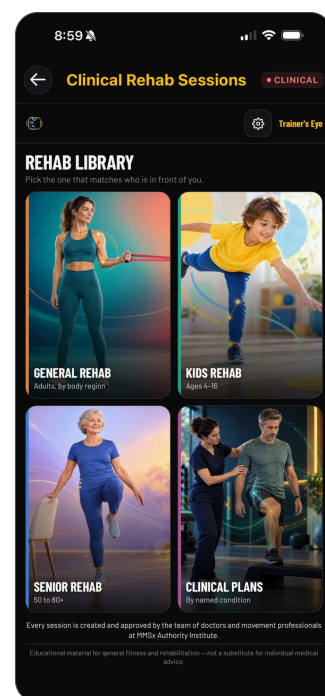
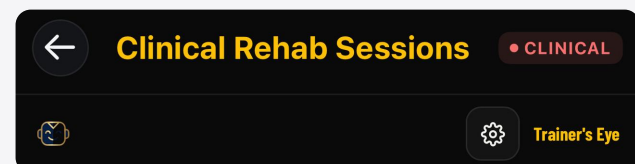
A pain rule, Read this before you start, red flags and see-a-doctor-first lists sit inside every library.

Hand-out ready

Session sheets, kids cards and referenced clinical PDFs print or save straight from the phone.

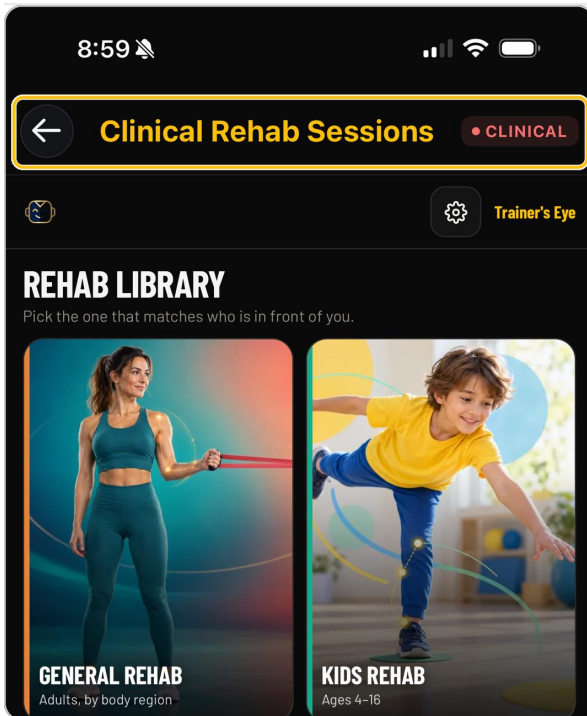
Where to find it

Open the TrainersEye app, go to the Dashboard and tap Clinical Rehab Sessions. It is a Clinical-plan tool — the CLINICAL badge sits beside the title.



This guide in thirteen steps

- 1 Open the tool
- 2 Pick the library
- 3 General Rehab: On the Go
- 4 Open a programme
- 5 Run the session
- 6 Kids Rehab: the Movement Map
- 7 A kids programme
- 8 Sessions A to T
- 9 Senior Rehab: by age or by condition
- 10 A senior programme and its sessions
- 11 Clinical Plans: the library
- 12 Find a condition and download
- 13 Print, save and hand out


PART 1 · GETTING STARTED

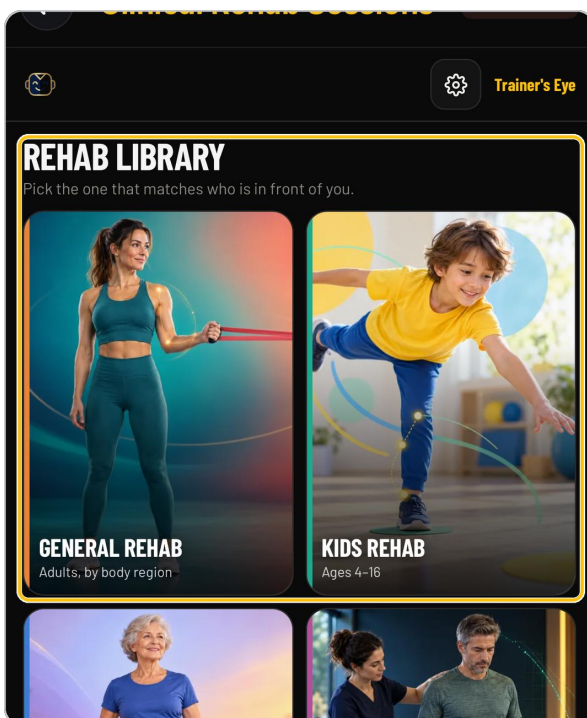
STEP 1

Open the tool

From the Dashboard, tap Clinical Rehab Sessions. It is a Clinical-plan tool – the CLINICAL badge sits beside the title. The bar beneath carries the MoPro mark, the settings gear and the Trainer's Eye name.

TIP

The back arrow at the top left returns to the Dashboard; each library has its own back route inside.


PART 1 · GETTING STARTED

STEP 2

Pick the library

The Rehab Library asks you to pick the one that matches who is in front of you: General Rehab – adults, by body region; Kids Rehab – ages 4 to 16; Senior Rehab – 50 to 80+; Clinical Plans – by named condition. Every session is created and approved by the team of doctors and movement professionals at MMSx Authority Institute.

TIP

Educational material for general fitness and rehabilitation – not a substitute for individual medical advice, as the library itself says.

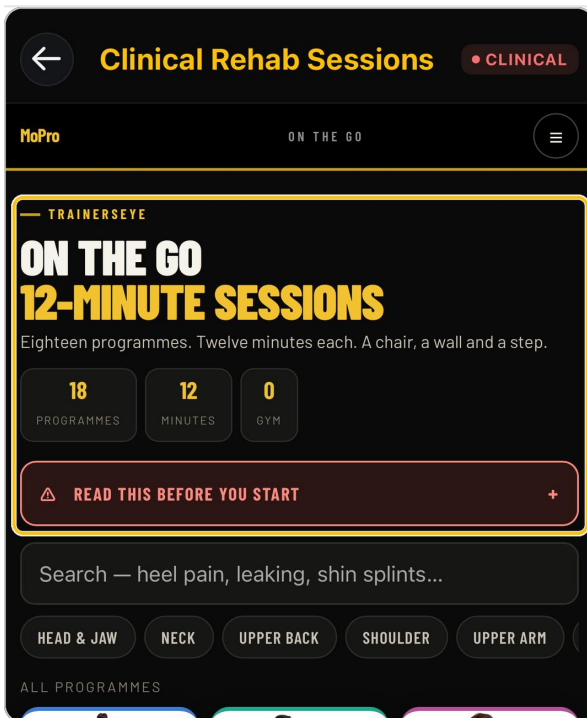
PART 2 · GENERAL AND KIDS
STEP 3

General Rehab: On the Go

General Rehab opens On the Go — eighteen 12-minute programmes and no gym: a chair, a wall and a step. Open Read this before you start, search by symptom (heel pain, leaking, shin splints...) or use the region chips from Head & Jaw downwards, and scroll the programme cards — Neck & Upper Back, Shoulder, Arm, Biceps & Triceps, Wrist, Hand & Thumb, Lower Back, Sciatica & Nerve Leg Pain and on.

TIP

Search understands symptoms, not only regions — heel pain, leaking, shin splints.

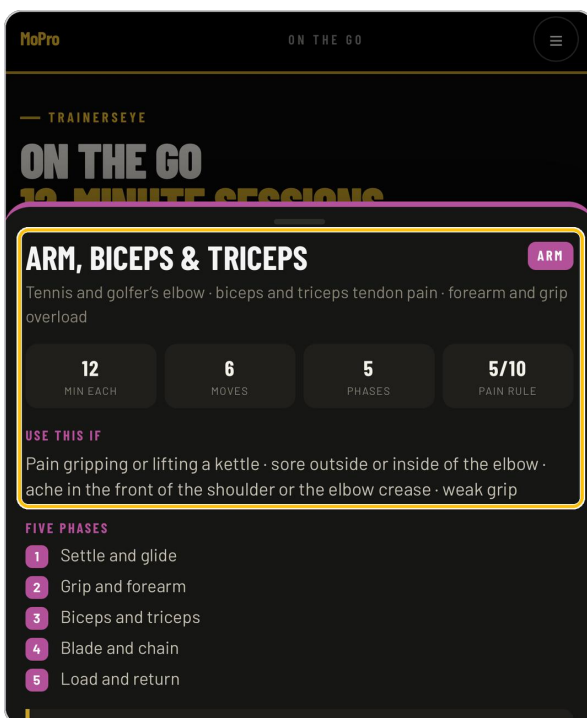

PART 2 · GENERAL AND KIDS
STEP 4

Open a programme

A programme sheet says what it covers — Arm, Biceps & Triceps: tennis and golfer's elbow, biceps and triceps tendon pain, forearm and grip overload — and its shape: 12 minutes each, 6 moves, 5 phases, a 5/10 pain rule. Use this if lists the signs, Five phases runs from Settle and glide to Load and return, the tracked number is stated, a Red flag box says what needs a surgeon, and Kit lists the household objects. Start Session A, or All sessions.

TIP

Read the Red flag before you start anyone: a pop at the elbow with a lump and weak twisting is a surgical window, not a session.



9:00

←
 Clinical Rehab Sessions
CLINICAL

PRINT / SAVE PDF
 START CLOCK
 SHEET VIEW

MOVE THE ARM. LOAD NOTHING.

Six drills that restore elbow and wrist range and load the tendons with isometrics only – no gripping hard, no weight.

A
session

P1
Settle

12:00
on the clock

0 done
completed

ISOMETRICS SETTLE A TENDON
 Sustained holds under moderate load can lower tendon pain for a period afterwards. Useful before a task you cannot avoid.

RANGE AT THE ELBOW
 Full straightening and full bending are needed for lifting, washing and eating. Lost range at the elbow is difficult to win back late.

PAIN IS NOT DAMAGE
 Pain is an alarm, not a measure of harm. It can stay switched on long after tissue has healed.

PART 2 · GENERAL AND KIDS

STEP 5

Run the session

Session A opens on its phase headline – Settle the elbow. Move the arm. Load nothing – and its six drills. The tiles show the session letter, the phase, 12:00 on the clock and drills done; three principle boxes explain the why. Start the 12-minute clock runs three couplets over two rounds, each drill with a photo, a dose, a cue and Easier / Harder. Print / Save PDF and Sheet view sit in the top bar.

TIP

Each couplet is 60 seconds scored, then the loading set, then 10 seconds to move on – done at 12:00.

Kids Movement Map
 English

Map
 For parents
 Clinical index

Where would you like to go today?

Just starting
 Growing up
 Breathing
 Aches and injuries
 Sport


 4-7
 The Meadow


 8-11
 The Training Ground


 7-14
 The Balance Bridge


 4-11
 The Sandy Path


 8-16
 The School Gate


 5-12
 The Playground


 10-16
 The Throwing Field


 12-16
 The Pitch


 10-16


 8-16


 11-15


 12-16

PART 2 · GENERAL AND KIDS

STEP 6

Kids Rehab: the Movement Map

Kids Rehab opens the Kids Movement Map – Where would you like to go today? Fifteen places, each with an age range: The Meadow 4-7, The Training Ground 8-11, The Balance Bridge 7-14, The Sandy Path 4-11, The School Gate, The Playground, The Throwing Field, The Pitch, The Comeback Track, The Front Door, The Growing Tree, The Strength Barn, The Running Trail, The Big Field and The Breezy Hill. Filter with Just starting, Growing up, Breathing, Aches and injuries or Sport; the tabs switch to For parents and the Clinical index.

TIP

How it works, at the bottom right, explains the map out loud; the language selector sits at the top right.

CLINICAL REHAB SESSIONS · USER GUIDE

5

Fundamental Movement Skills

The Meadow · Ages 4–7

Before starting

An adult stays with the child throughout. Clear, non-slip space. Stop if the child is in pain, dizzy or unwell, and see a doctor for a limp or joint pain with no injury, pain at night, or a joint that is hot and swollen.

Fundamental movement skills do not arrive on their own with age. They are taught, practised, and then they stay. This programme takes the three families of skill – travelling, balancing and controlling an object – and teaches them through play across twenty sessions. Movements repeat from one session to the next on purpose: at this age repetition is the method, not a shortcut.

The four blocks in every session

Travel Balance & body control Send & receive Play

Five phases

PART 2 · GENERAL AND KIDS

STEP 7

A kids programme

A place opens as a programme – Fundamental Movement Skills, The Meadow, ages 4–7. Before starting sets the rules: an adult stays with the child throughout, a clear non-slip space, stop if the child is in pain, dizzy or unwell, and see a doctor for a limp or joint pain with no injury. The programme explains what it teaches, names the four blocks in every session – Travel, Balance & body control, Send & receive, Play – and walks its five phases with guidance for the adult.

TIP

Movements repeat from session to session on purpose: at this age repetition is the method, not a shortcut.

PART 2 · GENERAL AND KIDS

STEP 8

Sessions A to T

Sessions run A to T; check-in sessions are ringed. Tap a letter to open it – Previous session and Next session move along, Copy link shares it, View & save and Print the card make the card. Each movement card carries a photo, a dose chip such as 10 each foot, a cue and Easier / Harder. See a doctor first if any of these apply closes the programme.

TIP

A limp or joint pain that starts without an injury always needs a doctor, not a programme.

Sessions

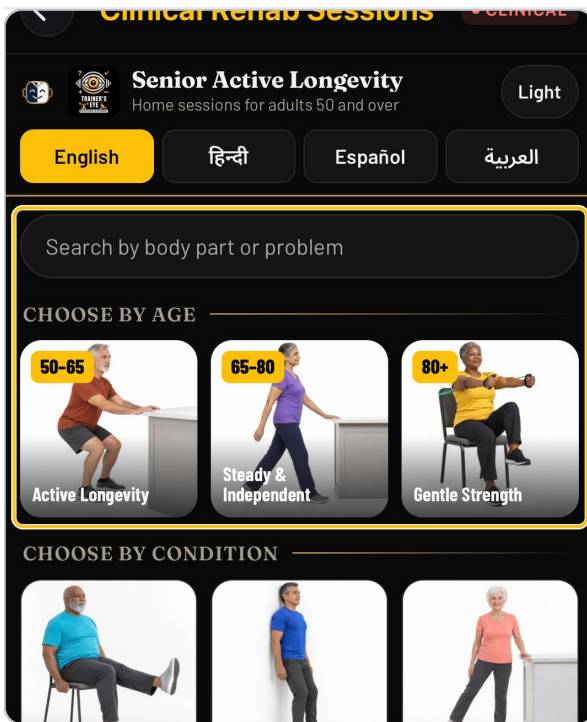
Check-in sessions are ringed.

A	B	C	D	E	F	G
H	I	J	K	L	M	N
O	P	Q	R	S	T	

Copy link

See a doctor first if any of these apply

1. A limp, or joint pain, that starts without an injury – this always needs a doctor, not a programme.
2. Pain in the knee or thigh in a child who is limping: hip



PART 3 · SENIOR AND CLINICAL PLANS

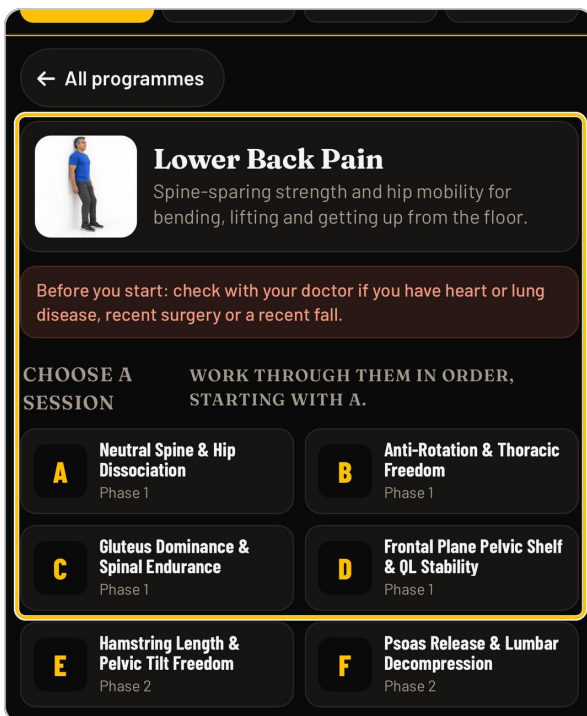
STEP 9

Senior Rehab: by age or by condition

Senior Rehab opens Senior Active Longevity – home sessions for adults 50 and over, with its own English / हिन्दी / Español / العربية pills and a Light switch. Search by body part or problem, choose by age – 50-65 Active Longevity, 65-80 Steady & Independent, 80+ Gentle Strength – or by condition: Knee Osteoarthritis, Lower Back Pain, Hip Stiffness & Mobility, Shoulder Pain & Reach, Diabetes & Muscle Loss, Bone Health & Osteopenia and more.

TIP

Choose by age when there is no named problem; choose by condition when there is.



PART 3 · SENIOR AND CLINICAL PLANS

STEP 10

A senior programme and its sessions

A programme – Lower Back Pain: spine-sparing strength and hip mobility for bending, lifting and getting up from the floor – opens with Before you start (check with your doctor if you have heart or lung disease, recent surgery or a recent fall) and Choose a session: work through them in order, starting with A. Each lettered session names its focus and phase and opens as a white sheet – four blocks, twelve movements, each with a photo, a dose, a cue and Easier / Harder.

TIP

All programmes, at the top, returns you to the age and condition lists.

Pre-built rehab sessions, ready to hand out.

Condition programmes, region rehabilitation, low-back subtypes and prehab — every session a finished, referenced PDF. Pick a category, choose a programme, then view or download the session as-is.

1,380 SESSIONS 81 PROGRAMMES 10 CATEGORIES PDF PRINT-READY



Foot & Ankle

11 CONDITIONS · 110 SESSIONS

Achilles Tendinopathy Plantar Fasciopathy Ankle Sprain
 Insertional Achilles +7 more



Knee

9 CONDITIONS · 90 SESSIONS

Patellar Tendinopathy Knee Osteoarthritis Patellofemoral Pain
 ACL Reconstruction +5 more

PART 3 · SENIOR AND CLINICAL PLANS

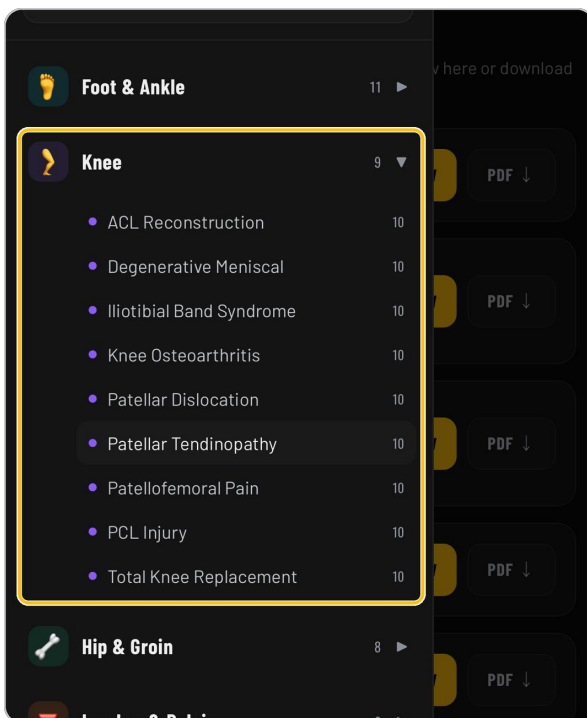
STEP 11

Clinical Plans: the library

Clinical Plans opens the Clinical Rehab Library — 1,380 sessions, 81 programmes, 10 categories, every session a finished, referenced PDF, print-ready: condition programmes, region rehabilitation, low-back subtypes and prehab. Each category card lists its conditions — Foot & Ankle, 11 conditions and 110 sessions; Knee, 9 and 90; Hip & Groin, 8 and 80. Pick a category, choose a programme, then view or download the session as-is.

TIP

These sessions are handed out as they are — the app does not edit them.



PART 3 · SENIOR AND CLINICAL PLANS

STEP 12

Find a condition and download

The menu lists the categories with their counts and a Search condition box. Expand one — Knee: ACL Reconstruction, Degenerative Meniscal, Iliotibial Band Syndrome, Knee Osteoarthritis, Patellar Dislocation, Patellar Tendinopathy, Patellofemoral Pain, PCL Injury and Total Knee Replacement, ten sessions each — and tap a condition. Its sessions list with a PDF button on every row: view here or download.

TIP

Theme and TrainersEye sit at the foot of the menu.

PART 4 · PRINT AND HAND OUT

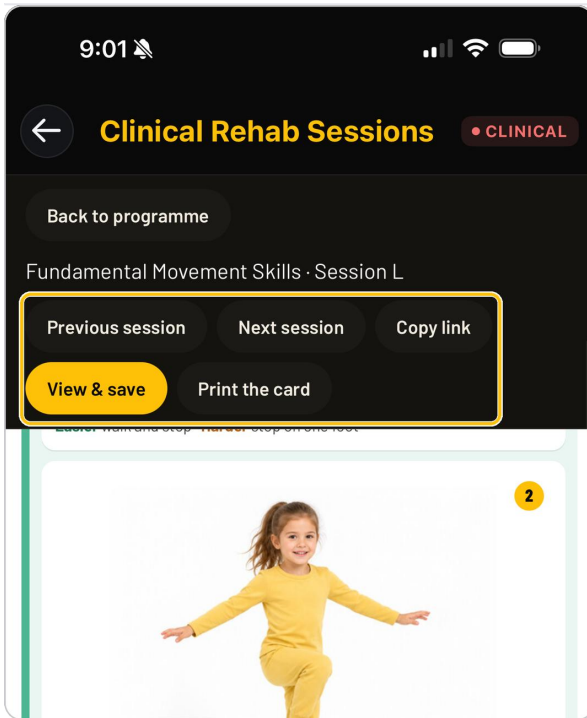
 STEP **13**

Print, save and hand out

Every library prints. General: Print / Save PDF and Sheet view make the 12-minute session sheet. Kids: View & save and Print the card make the session card; Copy link shares it. Senior: the session sheet prints as it stands. Clinical Plans: PDF on each session row. The phone's print sheet prints it or saves it to Files.

TIP

Hand out the sheet with its pain rule and red flags on it – they are part of the session.



You're ready

That's it. Open Clinical Rehab Sessions and pick the library that matches who is in front of you.

Reading a clinical plan session

Every Clinical Plans session is one referenced PDF. Here is what each part of it means.



1 Header line
MMSx Authority · Clinical Rehabilitation · LATERAL PATELLAR DISLOCATION (CONSERVATIVE) · SESSION 2 OF 10 · SERIAL NO. 432/155

2 Title and aim
Stage 2 · Quadriceps & Hip Strengthening
Build quadriceps/VMO and hip strength with controlled range.

3 Serial · Stage · Outcome · Monitoring · Frequency
SERIAL No. 432 | STAGE Stage 2 | OUTCOME Kujala / redislocation | MONITORING Acceptable pain | FREQUENCY 2-3 x/wk

4 Clinical rationale
CLINICAL RATIONALE
Quadriceps and hip strengthening restore patellofemoral control¹.

5 Monitoring & safety
MONITORING & SAFETY
First-time dislocations are often managed conservatively (quadriceps/VMO strengthening, bracing/taping early, neuromuscular control); recurrence is notable²³. Refer for surgical assessment (e.g. MPFL reconstruction) where there is an osteochondral fragment, recurrent instability or risk factors such as patella alta or high Q-angle²³.

6 Timing
8' WARM-UP | 22' MAIN | 8' CONTROL | 4' REVIEW

7 Blocks
1 - Strengthening 18 min RCT-SUPPORTED
1 Closed-chain quadriceps (range-limited)¹ 3 x 12 Patellofemoral-friendly load.
2 VMO-focused strengthening¹ 3 x 12 Medial control.
3 Hip abductor / external-rotator strengthening¹ 3 x 12 Limb alignment.
2 - Control 10 min CONSENSUS-BASED
1 Single-leg control (low)¹ 3 x 30 s Limb control.
2 Step / squat (controlled range)¹ 3 x 10 Functional load.
3 Patellar taping as needed¹ wear Support tracking.
3 - Review 4 min GUIDELINE-BASED
1 Strength / tracking¹ --- Track progress.
2 Symptom / apprehension¹ --- Monitor.
3 Plan¹ --- Progress load.

8 Key clinical points, progression and outcome
KEY CLINICAL POINTS (EVIDENCE-BASED)
• First-time patellar dislocations are commonly managed conservatively with quadriceps strengthening and bracing; recurrence remains a recognised limitation¹.
• Surgery (MPFL reconstruction) yields lower redislocation rates in selected patients; treatment is a shared, individualised decision²³.
• General quadriceps and targeted VMO strengthening with neuromuscular control underpins conservative rehabilitation¹.
PROGRESSION / REGRESSION (CRITERIA-BASED)
Progress strengthening and range as control improves¹.
OUTCOME MEASURE & REVIEW
Track the Kujala score and redislocation/instability episodes at baseline and review¹. Reassess quadriceps strength, patellar tracking and apprehension. Refer where osteochondral injury or recurrent instability is present².

9 References (verified)
REFERENCES (VERIFIED)
1. Smith, T. O., Chertok, R., Cross, J., Hunt, N., Clark, A., & Dorell, S. T. (2015). Rehabilitation following first-time patellar dislocation: a randomised controlled trial of purported vastus medialis obliquus muscle versus general strengthening exercises. *The Knee*, 20(6), 323–329.
2. Blaz, A. C., Demange, M. K., O'Dell, C. O., & Camarillo, G. L. (2012). Traumatic patellar dislocation: nonoperative treatment compared with MPFL reconstruction using patellar tendon. *American Journal of Sports Medicine*, 40(1), 114–122.
3. Camarillo, G. L., Vargas, A. C., Blaz, A. C., Demange, M. K., & Hernandez, A. J. (2009). Conservative versus surgical treatment for repair of the medial patellofemoral ligament in acute dislocations of the patella. *Arthroscopy*, 25(6), 620–625.

10 Framework, citation and disclaimer
MMSx AUTHORITY FRAMEWORK & REGISTERED RESEARCH
Produced within the MMSx Authority methodological framework. Registered programmes & frameworks: MOVE™ Protocol — ClinicalTrials.gov NCT07220200; BPT™ S-Line Principle — Zenodo 10.5282/zenodo.1759477; ClinicalTrials.gov NCT07226540 & NCT07226737. These are the Institute's own registered works; the prescriptions above are anchored to the external peer-reviewed evidence cited under References.
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This information is educational and is intended to support, not replace, individual clinical assessment, diagnosis or treatment by a qualified professional. Dosage should be individualised; the clinician and reader are responsible for assessing suitability and setting professional guidelines where appropriate.

Created by TrainerEye · Powered by MMSx Authority Institute Team of Experts

- 1 Header line**
MMSx Authority · Clinical Rehabilitation, the condition and its variant, the session and the serial number.
- 2 Title and aim**
The stage and its name, what the session builds, and the note that it supports, not replaces, individual clinical assessment.
- 3 Serial · Stage · Outcome · Monitoring · Frequency**
The session's identity tiles — the outcome measure, the monitoring rule and how often to run it.
- 4 Clinical rationale**
Why this session, with its reference number.
- 5 Monitoring & safety**
How the condition is usually managed, and when to refer for surgical assessment.
- 6 Timing**
Warm-up, main, control and review, in minutes.
- 7 Blocks**
Numbered exercises with dose and purpose; each block carries its evidence badge — RCT-supported, consensus-based or guideline-based.
- 8 Key clinical points, progression and outcome**
Evidence-based points, the criteria for progressing or regressing, and the outcome measure to track at review.
- 9 References (verified)**
The peer-reviewed sources the prescriptions are anchored to.
- 10 Framework, citation and disclaimer**
The MMSx registered frameworks, how to cite under CC BY 4.0, and the educational-use statement.

Move with **Precision.** Live with **Confidence.**

CLINICAL REHAB SESSIONS IS PART OF TRAINERSEYE

Support: support@trainerseye.com · trainerseye.com

Sessions created and approved by the doctors and movement professionals of MMSx Authority Institute · Backed by MMSx Authority Institute

Educational material for general fitness and rehabilitation — every session supports, not replaces, individual clinical assessment; its pain rule and red flags are part of it. Not a substitute for individual medical advice.