



FREE GUIDE · 5-MIN READ

THE SHOULDER RESET

Your **Shoulder** Pain Isn't Coming From Your **Shoulder.**

3 self-tests across 15 checkpoints that reveal where the problem actually starts — so you can stop chasing symptoms and finally fix it.

- ✓ Hurts to press, reach overhead, or sleep on it
- ✓ Stretching and rest haven't fixed it
- ✓ Comes back every time you press, throw, or train

FROM THE FAIRFIELD CLINIC ACTIVE ADULTS TRUST TO GET BACK TO TRAINING

By **Dr. Sam Kavarsky, DC, MS** · Align Sports Therapy

WHY THIS GUIDE EXISTS

Most providers ask if your shoulder **hurts**. We ask how it **moves**.

If you're an active adult in Fairfield — you press overhead at the gym, you golf, you swim, you throw, you play pickup, you lift — and your shoulder has started complaining, you've probably been told to rest it, ice it, or stretch it.

None of that explains **why one direction loads fine and another lights up**. Or why the rotator cuff has three external rotators and only one internal rotator — and why that asymmetry matters when your shoulder won't load.

Inside, you'll run through three self-assessments. We didn't pick twenty tests. We picked the three that reveal where most shoulder pain actually starts. The first one alone tests range, control, and capacity in three directions — because your shoulder works in all three, and most providers only check one.

You'll score yourself through the same framework we use in the clinic every day: **Range. Control. Capacity**. That tells us where you're actually stuck — not just where it hurts.

One thing to know up front: these are assessments, not exercises. We're not trying to fix anything in 15 minutes. We're trying to stop you from *chasing a feeling* and start *chasing objective function* — the way the joint, the chain, and the load tolerance actually work.

WHAT'S INSIDE

SECTION 02

The chain, not the spot — why the shoulder is rarely the cause

SECTION 03

The AST 3-Phase Model: how care should actually progress

SECTION 04

The Range · Control · Capacity scorecard

SECTIONS 05–08

Three assessments — 15 checkpoints total

SECTION 09

Your next step — book a free Discovery Call

Want to talk to us instead?

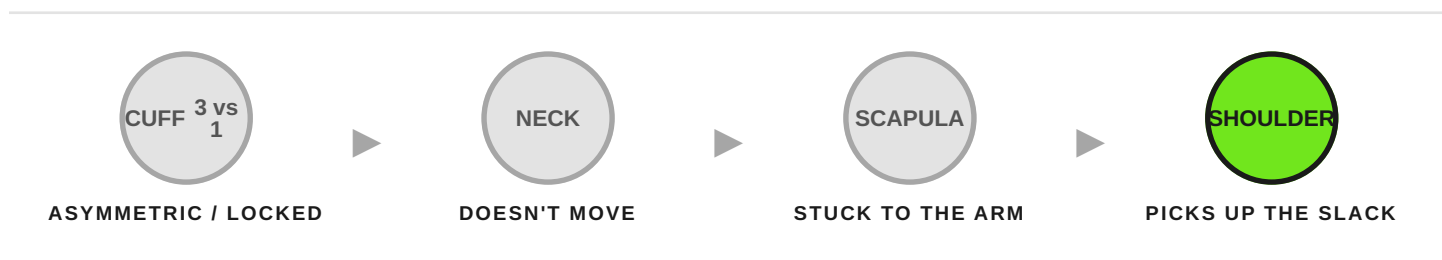
Skip to the last page to book a free Discovery Call — the first step in our process.

HOW TO READ YOUR SHOULDER PAIN

Shoulder pain doesn't always come from the shoulder.

The shoulder is one of the most mobile joints in your body. That's a feature — until it's a problem. When the system around it stops doing its job, the shoulder ends up working overtime. The pain shows up there. The cause usually doesn't live there.

Three things almost always need to be working for a shoulder to feel good and stay healthy. When any one of them is off, the shoulder is the area that pays for it — even if the pain isn't telling you why.



What we test in this guide

- 1 Rotator cuff capacity (in 3 directions)** — your rotator cuff has three external rotators and one internal rotator. That's not symmetric, and it's not supposed to be. But when those muscles can't share the load evenly across external rotation, internal rotation, and overhead flexion, the shoulder loses the small-muscle support it depends on.
- 2 Cervical spine mobility** — if your neck can't move like it should, your shoulder can't either. A stiff cervical spine is one of the most common hidden drivers of shoulder pain in lifters and desk-workers alike.
- 3 Scapular control** — if you can't move your shoulder blade independently of your arm, every press, pull, and reach asks the shoulder joint to do work the scapula should be sharing.

Most providers test if your shoulder hurts. We test how it moves, controls, and produces force in every direction it needs to work in.

— DR. SAM KAVARSKY

HOW CARE SHOULD ACTUALLY PROGRESS

Pain relief isn't **the finish line.** It's **mile one.**

Most providers in this area stop the moment your pain quiets down. That's not care — that's symptom management. At AST, getting out of pain is the entry ticket. The actual work is graduating you back to overhead pressing, throwing, swinging, swimming, and the rest of the loads your shoulder needs to handle.

PHASE 01

Reduce pain

Calm the system down. Hands-on care, soft tissue work, and targeted treatment to take the alarm volume off so you can move and assess clearly.

PHASE 02

Improve movement strategy

Restore range and rebuild control. Re-teach the chain how to share work — rotator cuff in all three directions, cervical spine moving, scapula dissociating from the arm. The shoulder stops compensating.

PHASE 03

Build capacity

Train load tolerance back to where your sport, your training, and your life actually demand. Press, push, pull, throw — under load and under fatigue. This is where most clinics never go. It's where we live.

Why this matters for the assessments ahead

Each of the self-assessments in this guide maps to **Phase 2 — movement strategy**. They're designed to help you see where in the chain you've lost *range*, *control*, or *capacity*.

If the shoulder isn't the weak bucket (and it usually isn't), one of these three is. Knowing which one tells us where to start so we don't waste your time — or your training.

We have a toolbox that includes everything — manual therapy, dry needling, shockwave, soft tissue, capacity training, you name it. But we focus less on tools and more on solutions. The free Discovery Call is how we figure out what your actual solution looks like. *See the last page.*

THE 3 BUCKETS WE SCORE ON EVERY PAGE AHEAD

Range. Control. Capacity.

Every assessment in this guide gets scored through three lenses — three buckets you can fall into. This is the same framework we use in the clinic to figure out exactly where you're stuck and exactly what to work on next.

01 · RANGE

Can you get there?

The available motion. If a joint can't physically reach the position, nothing else matters yet.

02 · CONTROL

Can you own it?

Owning the position without compensation. Range you can't control isn't usable — and it's where injuries hide.

03 · CAPACITY

Hold up under load?

Producing the position rep after rep, under load, when you're tired. Capacity is what makes mobility durable when minute 45 of the class hits.

Mobility without control is fragile. Control without capacity is incomplete. You need all three for the chain to share the load.

How to use the scorecards

For each assessment ahead, you'll do the test and circle one of three boxes for each pillar:

○ STUCK

Can't get there, can't hold it, or can't hold up to fatigue. This is the bucket.

○ LIMITED

Some range or control, but compensating, asymmetric, or fading under load.

○ SOLID

Full range, fully owned, holds up under load and fatigue. Not your weak bucket.

If you score Stuck or Limited on any pillar of any assessment, you've found a bucket — a link in the chain — that's likely contributing to your shoulder pain. The free Discovery Call is the first step to turn that finding into a plan.

THE MULTI-DIRECTION TEST

01 Rotator Cuff Capacity

Tests range, control, and capacity in all three directions your shoulder needs to work.

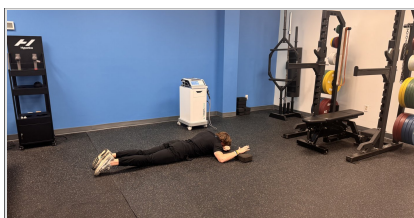
3 Most providers test **one direction**. We test **three**. This single assessment covers **9 checkpoints** across external rotation, internal rotation, and shoulder flexion.

WHY IT MATTERS

Your rotator cuff has **three external rotators and one internal rotator**. That asymmetry is by design — but it's also why the cuff is so easy to under-train in one direction and overload in another. To know whether your rotator cuff is doing its job, you have to look at all three directions it works in. Anything less is a guess.

Run all three sub-tests below. Then turn the page to score yourself across all 9 checkpoints.

A External Rotation



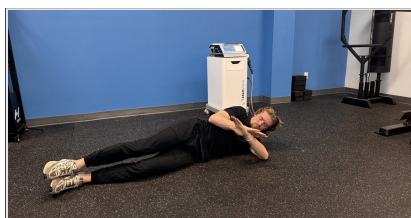
Setup: Lie face-down. Rest your head on the opposite forearm. Test arm out to the side, elbow bent 90°, pressing into the floor.

Range: Place a yoga block under the back of your hand. Can you hold the position?

Control: Remove the block. Can you keep the arm in the exact same spot, no drop?

Capacity: Press into the block at 20–100% effort. Hold 60 seconds.

B Internal Rotation



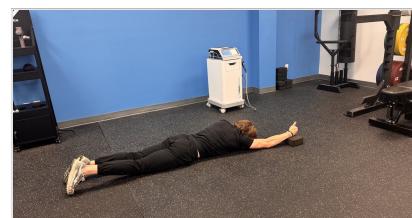
Setup: Lie on your side. Test arm on top, abducted to 90°, elbow bent. Forearm rotates downward toward the floor.

Range: Without help, how far down can your forearm rotate?

Control: Hold the bottom of your range. Can you own it (imagine holding a dumbbell)?

Capacity: Place opposite hand on the wrist, press down while forearm presses up. Isometric hold 30s–2 min.

C Shoulder Flexion



Setup: Lie face-down. Test arm extended overhead, bicep next to your ear. Other forearm supports your head.

Range: Can you safely get into this position at all? Bicep all the way to the ear?

Control: Hold the position without the elbow drifting out, hand drifting up, or low back arching.

Capacity: If you can't reach this position, anything pressing overhead — and a lot of throwing — is going to be a problem.

→ Turn the page to score yourself across all 9 checkpoints.

01. Rotator Cuff — The 9-Checkpoint Scorecard

★ SCORE YOURSELF

For each of the three sub-tests, circle one box per row. Repeat on both arms — we want symmetry across all three directions on both sides.

A EXTERNAL ROTATION			<i>Prone, arm at 90°, with yoga block</i>
RANGE GET THERE?	<input type="radio"/> STUCK Can't hold the block on the back of the hand.	<input type="radio"/> LIMITED Block holds with strain or asymmetry side-to-side.	<input checked="" type="radio"/> SOLID Full ER range, both arms, block sits cleanly.
CONTROL OWN IT?	<input type="radio"/> STUCK Hand drops as soon as the block comes out.	<input type="radio"/> LIMITED Holds for a moment, then drifts or compensates.	<input checked="" type="radio"/> SOLID Stays in the exact same position with no block.
CAPACITY UNDER LOAD?	<input type="radio"/> STUCK Can't sustain pressing into the block 60 sec.	<input type="radio"/> LIMITED 60 sec at low effort but quality drops past 50%.	<input checked="" type="radio"/> SOLID 60+ sec near max effort, both arms, no fade.
B INTERNAL ROTATION			<i>Side-lying, modified sleeper position</i>
RANGE GET THERE?	<input type="radio"/> STUCK Forearm barely rotates downward at all.	<input type="radio"/> LIMITED Partial rotation, big asymmetry between sides.	<input checked="" type="radio"/> SOLID Forearm rotates near floor, both arms, even.
CONTROL OWN IT?	<input type="radio"/> STUCK Can't hold the bottom — drops or springs back.	<input type="radio"/> LIMITED Holds bottom briefly but couldn't manage a dumbbell.	<input checked="" type="radio"/> SOLID Owns the bottom — could safely hold light load.
CAPACITY UNDER LOAD?	<input type="radio"/> STUCK Can't sustain the isometric press for 30 sec.	<input type="radio"/> LIMITED 30 sec at low effort, breaks down past 50%.	<input checked="" type="radio"/> SOLID 2+ min at high effort, both arms, no fade.
C SHOULDER FLEXION			<i>Prone, arm overhead, bicep to ear</i>
RANGE GET THERE?	<input type="radio"/> STUCK Can't get into the position safely. Arm doesn't lie flat.	<input type="radio"/> LIMITED Position reachable but bicep doesn't reach the ear.	<input checked="" type="radio"/> SOLID Bicep next to ear, both arms, no compensation.
CONTROL OWN IT?	<input type="radio"/> STUCK Hand drifts up, elbow flares, or low back arches.	<input type="radio"/> LIMITED Hold the position but only with effort or asymmetry.	<input checked="" type="radio"/> SOLID Position holds clean, both arms, ribs and back quiet.
CAPACITY UNDER LOAD?	<input type="radio"/> STUCK Can't actively press the arm down into the floor.	<input type="radio"/> LIMITED Some active press, but fades fast or one-sided.	<input checked="" type="radio"/> SOLID Active press into the floor, both arms, sustained.

WHAT IT MEANS IF YOU SCORED STUCK OR LIMITED

Your rotator cuff isn't sharing the load symmetrically across all three directions. Anything that demands one of those directions — overhead pressing, throwing, swimming, golf — is being managed by the wrong tissues. That's how shoulders get worn down, and it's why a single-direction stretch rarely fixes it.

→ **Next step:** book a free Discovery Call to talk through your scorecard. See the last page.

THE NECK TEST

02 Cervical Spine Circles

Tests whether your neck moves like it should — because if it doesn't, your shoulder won't either.

WHY IT MATTERS

If your cervical spine can't move freely, you're not getting the most out of your shoulder. A locked-up neck almost always reveals a muscle imbalance pulling on the shoulder system — and it's one of the most overlooked drivers of shoulder pain in lifters and desk-workers.

This is a simple control test for the neck. We're looking for smooth motion through the full range — no skipping, no compensating, no big jumps where it should be a slow draw.

HOW TO DO IT

- 1 Sit or stand tall. Tuck your chin gently — start the circle from a neutral, packed neck.
- 2 Draw a line with your chin like a crayon along your collarbone, across to one shoulder.
- 3 Drop your ear back behind your shoulder — keep tracing the same arc.
- 4 Extend your head and neck up and back, then continue rotating across to the other side.
- 5 Repeat 3–4 circles in each direction. Smooth, controlled, full range.



★ THE SCORECARD — SCORE YOURSELF

Circle one for each row.

RANGE

CAN YOU GET THERE?

STUCK

Major sticking points — circle barely happens, or one direction is locked.

LIMITED

Can complete the circle but with skips, jumps, or asymmetry.

SOLID

Full range both directions, no obvious dead zones.

CONTROL

CAN YOU OWN IT?

STUCK

Shoulders shrug or torso shifts to "help" the neck through.

LIMITED

Mostly clean but speeds up through hard sections.

SOLID

Slow, smooth, controlled. Shoulders stay quiet.

CAPACITY

HOLD UP UNDER REPS?

STUCK

Quality drops fast — circle 4 looks nothing like circle 1.

LIMITED

Holds for 2–3 reps, then breakdown sets in.

SOLID

All 4 reps each direction stay smooth and even.

WHAT IT MEANS IF YOU SCORED STUCK OR LIMITED

Your cervical spine is restricting motion that the shoulder relies on. Almost every overhead movement — pressing, reaching, throwing, swimming — needs the neck to free up. When it can't, the shoulder either compensates or flat-out can't reach the position. Restoring this often unlocks shoulder mobility that no amount of stretching the shoulder itself can.

→ **Hint:** if you scored Limited or worse here AND on Assessment 01, your shoulder is doing the work of multiple regions. Discovery Call recommended.

03 THE DISSOCIATION TEST Scapular Control

Tests whether your shoulder blade can move independently of your arm.

WHY IT MATTERS

Your shoulder blade (the scapula) is supposed to move on its own — gliding across your back to support every press, pull, and reach your arm makes. When it can't dissociate from the arm, every overhead motion asks the shoulder joint to do work the scapula should be sharing.

This is one of the fastest ways to find out if your shoulder is overworked because the scapula isn't pulling its weight. It's also one of the most fixable buckets when caught early.

HOW TO DO IT

- 1 Stand tall. Reach both arms straight out in front of you, parallel to the floor. Keep arms straight the entire time.
- 2 Without bending the elbows, move your shoulder blades through four positions: **UP** (shrug toward ears), **FORWARD** (push them around the ribcage), **DOWN** (pull them down your back), **BACK** (squeeze them together).
- 3 Cycle through up → forward → down → back, 3–4 times each direction. Watch for arms bending or torso shifting to "help."



★ THE SCORECARD — SCORE YOURSELF

Circle one for each row.

RANGE

CAN YOU GET THERE?

STUCK

Scapula barely moves — arms move instead, or directions blur together.

LIMITED

Some directions clean, others (often "down" or "back") barely register.

SOLID

All four directions clearly visible. Scapula glides on the ribcage.

CONTROL

CAN YOU OWN IT?

STUCK

Can't isolate one direction without arms bending or torso shifting.

LIMITED

Isolation works on some directions but not all four cleanly.

SOLID

Each direction isolated — arms stay locked, only the scapula moves.

CAPACITY

HOLD UP UNDER REPS?

STUCK

Quality drops within the first cycle — directions start blurring.

LIMITED

3–4 cycles work but become sloppy or compensated.

SOLID

3–4 clean cycles each direction with no fade.

WHAT IT MEANS IF YOU SCORED STUCK OR LIMITED

Your scapula isn't doing its share of the work. Every press, pull, and overhead reach is putting load on the shoulder joint that should be distributed across the scapular system. This is one of the highest-leverage buckets to address — scapular control is often the single biggest unlock for stubborn shoulder pain in active adults.

→ **Reminder:** these are Phase 2 strategy tests. Real Phase 3 capacity training under load is what we do. Book a Discovery Call to start.

YOU DID THE ASSESSMENTS. NOW WHAT?

Take your scorecard **further** than a PDF can.

If you found a Stuck or a Limited anywhere across those 15 checkpoints, you've found a real piece of the puzzle. The next move is turning that finding into a plan that's actually built for your body, your sport, and the load you want to handle.

The first step in our process is a free **Discovery Call**.

How our process works

STEP 01 · FREE

Discovery Call

A short call with Allison from our team. She'll learn about what you're experiencing, walk you through our process, and answer any questions. If we're not the right fit, she'll tell you straight and point you somewhere that is. If we are, she'll book Step 02.

STEP 02 · FREE

Discovery Visit

30–45 minutes in our Fairfield office with Dr. Sam. We do these assessments together — plus the rest of your chain. You leave with clarity on where you're stuck, why, and what a real plan looks like. No pressure.

We're transparent about everything. We only take patients we're confident we can get results with. If that's not you, we'll say so and refer you to a provider who can help.

Book your free **Discovery Call**.

The first step. Short. Free. No commitment. Real answers about whether we can help.

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