Exercises Following Groin or Pelvic Dissection
It is natural for your skin and muscles to feel tight after surgery. Gradual introduction to specific exercises will help prevent stiffness and will improve your movement.

These exercises are designed so that you can perform them at home. The frequency and duration of the exercises are individualised for you by your physiotherapist, and this decision will be made based on the extent of your surgery, possible complications, and your fitness level.

All movements should be performed within your comfort levels. This is to ensure that you do not place unnecessary tension on your new surgical incision site and increase leakage from your wound or drain site. If you experience strong pain cease the exercises and notify your health care professional at your next appointment.

EARLY EXERCISES (when drains are still in)
Exercises can be performed for 10–20 repetitions, 3–4 times per day.

1. **Knee bend/straighten**
   Start lying on back with both knees bent, heels resting on bed. Slide foot along bed to straighten knee, then return to starting position.

2. **Ankle up/down**
   Keeping leg rested on bed, move ankle by pulling toes back towards you, and then pointing them down to the ground.

3. **Hip rotation**
   Keeping heels on the bed and knees bent, gently roll your affected hip out to the side, then return it to the starting position.
ADVANCED EXERCISES (after drains have been removed)
The exercises should be slowly progressed to an advanced level once your drains have been removed. It is expected that you will regain normal hip movement and gait around 6 weeks after removal of drains. You may still feel stiff in your movement so these exercises may need to be continued. Please note these exercises are to be used as a guide only. Aim for 3×10 seconds of gentle stretch, 3 times per day.

4. Calf stretch
Stand facing the wall. Place hands on wall to steady yourself. Keep heel on ground, slide affected foot backwards until you can feel a stretch below the back of the knee and lower leg.

5. Stretch for inside part of thigh
Stand facing the wall. Place hands on wall to steady yourself. Stand with legs apart and lunge towards unaffected side until a gentle pull is felt on the inside of your affected thigh.

If you are unsure about your exercises, please ask to speak to a physiotherapist or your treating health professional.
ADVANCED EXERCISES continued

6. Stretch for front of thigh

Only perform this stretch if you can lie on your stomach comfortably and your wounds are healed and fully closed.

Bend both knees. Use the unaffected foot to gently increase the knee bend on the affected leg. A stretch should be felt at the front of the affected thigh. 3×5 seconds, 3 times per day.

7. Bridging – Lifting bottom

Keeping knees bent and heel rested on the ground, gently lift up bottom a few centimetres to strengthen buttock. Return to starting position by lowering bottom slowly. 5–10 repetitions, 3 times per day.

If you feel a cramp at the back of your leg, please discontinue the exercise until review by your physiotherapist.

Additional strengthening exercises may also be appropriate once full range has been achieved.

Please speak to your physiotherapist or health professional for further progression of exercises.

Your referrer’s details:

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