Luna

5 Steps to Return to Golf

A physical therapist-guided plan for resuming play with improved mobility, strength, and swing mechanics. Golf places big demands on the spine with forces up to 8 times your body weight with every full swing. The good news: most golf injuries are non-surgical and highly responsive to targeted physical therapy. With the right mobility, strength, and movement retraining, most golfers return to full play within 8-10 weeks.

1 Protection Phase

Listen to your Body

Respect the Signal

What success looks like:

- Muscle guarding, when surrounding muscles tighten involuntarily to protect an injured area, is your body's early warning system. As it quiets, movement becomes easier.
- Hip and mid-back rotation range is tested and recorded as your starting point, giving Luna therapists a precise baseline to measure your progress against from session one.
- Everyday tasks: walking, sitting, sleeping. Resume without significant pain. Returning to normal daily function is the first milestone before any golf-specific work begins.

2 Mobility Phase

Restore Mobility

Hips, Mid-Back & Neck

What success looks like:

- Hips rotate freely. Hip rotation, particularly inward rotation on the lead side, is directly linked to lower back health in golfers. When the hips can't rotate, the lower back is forced to compensate.
- Mid-back rotates at least 45° each way, the engine of a full, powerful golf swing. A stiff mid-back doesn't just limit your turn: it shifts the rotational load into the lumbar spine, where it causes damage over time.
- Neck rotates to keep your eye on the ball through impact. Without neck rotation, the body compensates by shortening the backswing or over-rotating the lower back, both injury risks.

3 Rehab Phase

Rebuild Strength

Rebuild the Engine

What success looks like:

- Side plank hold time is equal on both sides. Left-right core imbalance is the single strongest predictor of golf-related back injury—the trail side almost always tests weaker. Closing that gap is protective.
- Balance on one leg for 10+ seconds in golf posture is the foundation of a controlled weight shift, the movement that drives power while protecting the lower back through impact.
- Glutes drive hip rotation without the lower back compensating. When the glutes don't fire properly, the lumbar spine picks up the rotational load, the root cause of the most common pattern of golf-related back pain.

4 Readiness Phase

Training & Swing

Golf-Specific Mechanics

What success looks like:

- Swing posture and spine tilt hold steady throughout the swing. Maintaining your spine angle is the single biggest factor in consistent ball contact and losing it is one of the most common sources of back strain.
- Chipping and putting are pain-free, and half-swing iron shots avoid pain or compensation. Short game first, then half-swings, then full swings. This progression protects healing tissue while rebuilding confidence.
- Power transfers efficiently from the ground up: hips, torso, arms. Proper sequencing makes a swing feel effortless. When it breaks down, the body compensates with force, and injuries follow.

5 Active Life Phase

Full Return to Play

Injury Prevention

What success looks like:

- Full swings with all clubs (driver included) are pain-free, and 9 holes completed without a symptom flare.
- Swing volume and practice time increased gradually, not all at once. The #1 predictor of re-injury in golfers is a history of the same injury. Ramping up too fast (not physical weakness) triggers relapse.
- A pre-round warm-up routine is established and used consistently. Golfers who warm up are significantly less likely to be injured. Your PT builds a routine targeting your specific mobility and strength gaps.