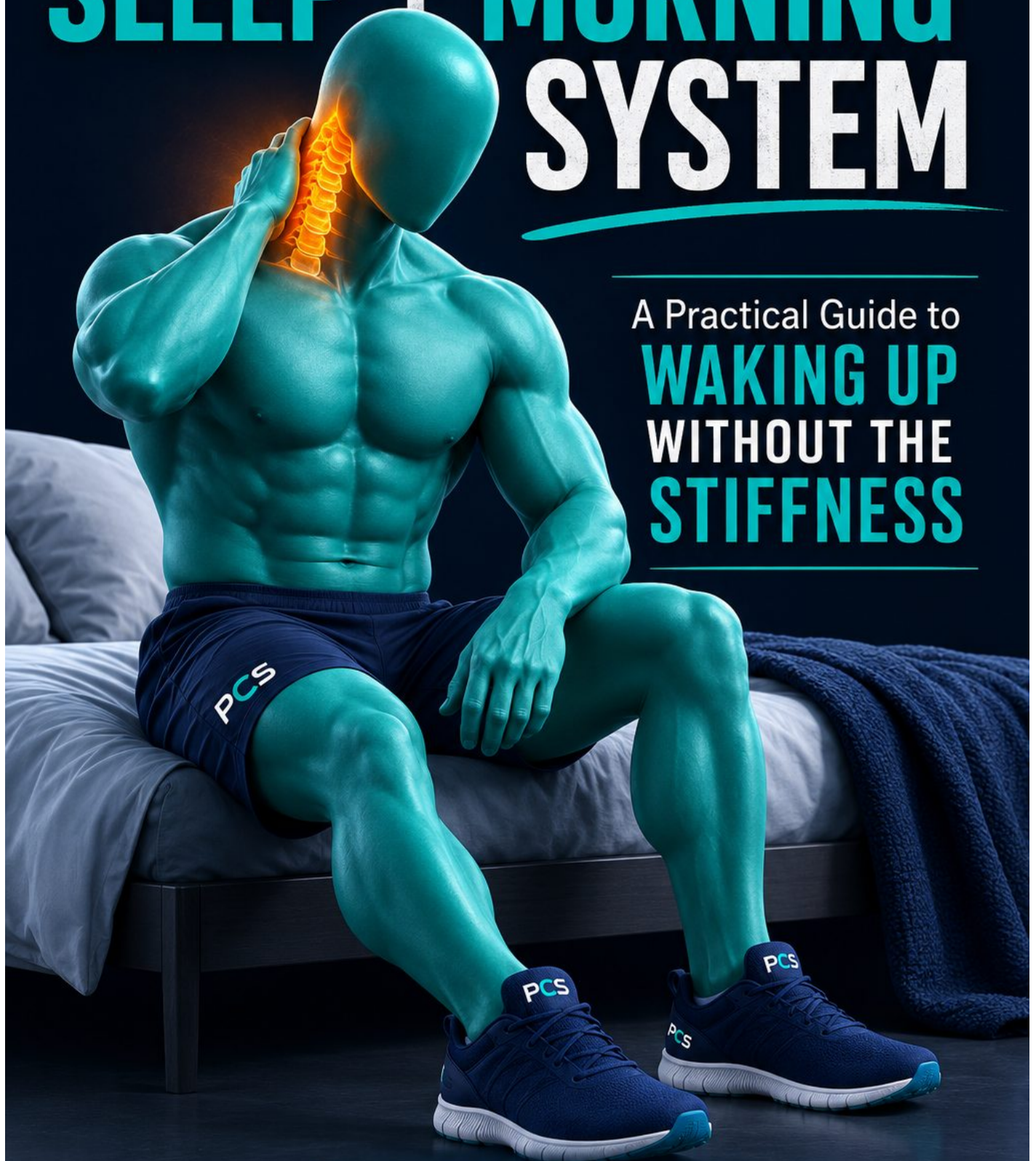


NECK PAIN SLEEP + MORNING SYSTEM



A Practical Guide to
**WAKING UP
WITHOUT THE
STIFFNESS**

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Neck Pain Sleep + Morning System

A Practical Guide to Waking Up Without the Stiffness

Written by Pain Care Supply. This guide is informed by clinical practice guidelines, peer-reviewed research, and evidence-based educational resources available at the time of publication.

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Who This Guide Is For

You woke up again with your neck locked before your feet even hit the floor. Turning your head to check a blind spot, reaching for your alarm, even just sitting up — all of it fights you for the first twenty minutes of the day. By the time you're finally moving normally, half your morning is gone.

This guide is for anyone whose neck pain follows a pattern tied to sleep and mornings — stiffness on waking, pain triggered by how you get out of bed, or a neck that never fully settles overnight. It is not a general neck pain guide. It is built specifically around the hours between getting into bed and finishing your first cup of coffee.

Introduction — The Pattern

Overnight, spinal discs rehydrate and slightly increase in height. Combined with hours in one fixed position, this often means your neck is at its stiffest — and least prepared for sudden movement — right when you wake up. Add a sleep position or pillow height that keeps your neck out of a neutral line all night, and a normal morning startle (reaching for a phone, sitting up fast) becomes the trigger for pain that lasts hours.

A stiff, painful morning neck is usually not a sign of new damage. It is a pattern — sleep position, pillow support, and the specific way you exit the bed, repeated every single night. Patterns can change.

Clinical Logic Standard

This guide follows one order every time: reduce load first, reactivate the stabilizing muscles gently, then restore full movement. Never the reverse.

Section 1 — Do This First

AT HOME — IN BED

If your neck locks up before your feet even hit the floor, this is your first move.

1. Stay lying down. Do not sit up yet.
2. Gentle chin tucks, small range, 8–10 reps.
3. Slow, small-range head rotation, both directions.

Position: on your back, knees bent. Range: small and controlled — this is not a stretch, it's a warm-up. Timing: about 60–90 seconds total. Reps: 8–10 per movement.

Feel Check

You should feel a mild stretch, not sharp pain. Stay in a tolerable range. If symptoms increase, reduce range or stop.

Section 2 — The Chin Tuck Reset

Chin Tuck Reset



Target Area:

Cervical Spine / Upper Neck



May Help With:

Forward head posture,
morning neck tension



Steps:

- 1 Lie back, knees bent, feet flat
- 2 Gently draw chin straight back
- 3 Hold 3-5 seconds, small range
- 4 Repeat 8-10 reps



Common Mistake to Avoid:

Tucking chin down instead of straight back

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Floor-based version shown — satisfies the Three-Environment standard for neck and upper-body work.

Target Area: Cervical spine / upper neck **May help with:** forward head posture, morning neck tension.

Steps:

1. Lie back, knees bent, feet flat.
2. Gently draw your chin straight back — not down.

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3. Hold 3–5 seconds, small range.

4. Repeat 8–10 reps.

Common Mistake to Avoid

Tucking the chin down toward the chest instead of drawing it straight back. This is a gliding motion, not a nod.

Section 3 — The Neck Rotation Reset

Neck Rotation Reset



Target Area:
Cervical Spine



May Help With:
Stiffness, limited rotation range in the morning

Steps:

- 1 Sit tall, shoulders relaxed
- 2 Slowly turn head to one side
- 3 Hold 2-3 seconds at end range
- 4 Return to center, repeat other side, 5 reps each



Common Mistake to Avoid:
Forcing rotation past a comfortable range

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Seated version shown — use once you're upright and ready to move beyond the floor-based warm-up.

AT HOME — AT WORK

Target Area: Cervical spine **May help with:** stiffness and limited rotation range in the morning.

Steps:

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1. Sit tall, shoulders relaxed.
2. Slowly turn your head to one side.
3. Hold 2–3 seconds at end range.
4. Return to center, repeat other side — 5 reps each.

Common Mistake to Avoid

Forcing rotation past a comfortable range to 'crack' the neck. Stop at the first point of resistance.

Section 4 — The Bed Exit Reset (Log Roll)

AT HOME — IN BED

Sitting straight up from your back forces your neck and torso to twist against gravity at the exact moment your spine is stiffest. Rolling to your side first removes that torque almost entirely.

Steps:

1. Roll onto your side first — don't sit straight up.
2. Keep your head, neck, shoulders, and torso moving together as one unit.
3. Push up through your arms as your legs swing over the edge of the bed.
4. Pause seated for a moment before standing.

Common Mistake to Avoid

Sitting straight up from your back — this is the single most common trigger for a morning flare in this guide.

Section 5 — The Diaphragmatic Breathing Reset

Diaphragmatic Breathing Reset



Target Area:

Neck & Shoulder Tension
(nervous system down-regulation)



May Help With:

Muscle guarding,
nighttime tension before sleep



Steps:

- 1 Lie back, knees bent, one hand on belly
- 2 Inhale slowly through the nose, belly rises
- 3 Exhale slowly, shoulders stay relaxed
- 4 Repeat for 5-10 breaths



Common Mistake to Avoid:

Breathing into the chest/shoulders instead of the belly

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Floor-based version shown — satisfies the Three-Environment standard for neck and upper-body work.

AT HOME — BEFORE BED

Target Area: Neck and shoulder tension, nervous system down-regulation

May help with: muscle guarding, nighttime tension before sleep.

Steps:

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1. Lie back, knees bent, one hand resting on your belly.
2. Inhale slowly through your nose — belly rises.
3. Exhale slowly — shoulders stay relaxed, not lifted.
4. Repeat for 5–10 breaths.

Common Mistake to Avoid

Breathing into the chest and shoulders instead of the belly — this keeps the neck's accessory muscles working when they should be resting.

Section 6 — The Nighttime Neck Reset Routine

AT HOME — BEFORE BED

Many people focus entirely on how they sleep but overlook what they do in the few minutes before getting into bed. A short routine here may help reduce stiffness before it has a chance to set in overnight.

Routine (in order):

1. Slow shoulder rolls, both directions, 8–10 reps.
2. Gentle head rotation side to side, small range, 5 reps each side.
3. Finish with the Diaphragmatic Breathing Reset (Section 5), 5–10 breaths.

Feel Check

You should feel gentle movement, not sharp pain. Stay within a tolerable range. If symptoms increase, stop and consult a healthcare provider.

Section 7 — Sleep Setup: Pillow and Position

AT HOME — IN BED

Pillow height that doesn't match your sleep position is one of the most common — and most fixable — reasons a neck never fully settles overnight.

Back sleepers: a lower, flatter pillow that supports the neck's natural curve without pushing the head forward.

Side sleepers: a firmer, taller pillow that fills the space between the ear and the outer shoulder, keeping the spine level.

Stomach sleeping: generally the hardest position on the neck, since it forces prolonged rotation. If this is your primary position, a very thin pillow (or none) reduces the rotation angle.

Section 8 — The Topical Protocol

These tools will not fix the problem. But they may help reduce pain and discomfort so you can move better and build tolerance again.

Step 1 — Morning application.

Step 2 — Reapply every 2 to 3 hours.

Step 3 — Combination protocol: menthol first, wait 2 to 3 minutes, then CBD cream. Menthol is the penetration driver; CBD penetrates deeper and delivers an anti-inflammatory effect.

Step 4 — Salonpas patch for hands-free, sustained relief.

If your neck keeps tightening up overnight, these are tools people commonly keep on the nightstand:

PRIMARY TOPICAL	3,500mg CBD Pain Relief Cream	tidd.ly/4sOSk5q
AMAZON	Neck Stretching Support	amzn.to/4xsTJAH
AMAZON	Suboccipital Release Device	amzn.to/43UL10V
AMAZON	Graphene Weighted Heating Pad — Neck & Shoulders	amzn.to/49YfluR

Or browse all tools at paincaresupply.com/shop

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Section 9 — When To See a Provider

STOP — Seek immediate medical attention if you experience:

- Loss of bladder or bowel control
- Numbness or tingling in the groin or inner thigh
- Sudden severe weakness in both legs
- Chest pain, dizziness, or difficulty breathing during movement
- Symptoms that are rapidly worsening

STOP — Consult a licensed provider before continuing if you experience:

- New or increasing numbness or tingling down the arm or into the hand
- Sharp shooting pain that worsens with every attempt at movement
- Significant increase in symptoms after two or more sessions
- Fever, unexplained weight loss, or night pain that wakes you from sleep

Feel Check

If you experience sharp pain, numbness, tingling, or any symptoms listed above — stop immediately and consult a healthcare provider.

Section 10 — Keep Building From Here

Start with this: the morning and nighttime routines in this guide, done consistently for one week.

Then build gradually: once mornings feel more controlled, begin adding gentle daytime movement — short walks, shoulder mobility, posture breaks every 45–60 minutes.

Begin with short duration, then increase over time. Progress happens through consistency, not intensity.

For more free resources as you go — including The Flare-Up Reset, our guide for managing sudden pain spikes — visit paincaresupply.com/free.

Research References

The information presented in this guide is informed by clinical practice guidelines, peer-reviewed research, and evidence-based educational resources available at the time of publication.

- North American Spine Society (NASS) — Clinical Practice Guidelines on cervical spine disorders.
- Journal of Orthopaedic & Sports Physical Therapy (JOSPT) — Clinical practice guidelines for neck pain.
- American Physical Therapy Association (APTA) — Patient education resources on cervical spine health.
- Cochrane Reviews — Systematic reviews on conservative management of mechanical neck pain.
- National Institutes of Health (NIH) — Consumer resources on sleep posture and musculoskeletal health.

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