PURPOSE:
To move the patient’s joints through available joint motion without causing pain. This procedure promotes good circulation, flexibility and mobility of joints and prevents shortening of muscles, tendons and ligaments.

CONSIDERATIONS:
1. The patient should never perform Passive Range of Motion (PROM) without specific instructions from the nurse or therapist.
2. Never move a joint beyond the point of pain. Pain is a warning sign and it should be considered an indicator to impending problems. Report any new or unusual patient pain to your supervisor.
3. Exercises are performed using the flat part of the hand and fingers to support the patient’s extremities. DO NOT grip with your fingertips due to pressure sensitivity and risk of injury by fingernails.
4. Follow a logical sequence during the exercises so that each joint is exercised. For instance, start at the head, and work down to the feet.
5. Slow, steady and rhythmic movement of a tight joint will help the muscle relax and may increase the available joint range.
6. Include the caregiver in the PROM exercise program so they can observe and learn the process.
7. All PROM exercises should be performed with the uninvolved, as well as with the involved extremity.
8. All exercises are performed with the patient lying flat on the back with the arms at the sides.
9. Contraindication: PROM should not be performed on joints that exhibit unusual swelling or redness. Report signs of swelling or redness to your supervisor.
10. Closely observe the patient for adverse reactions such as pain, shortness of breath, swelling or redness. Report any adverse reactions to your supervisor.
11. PROM does not involve stretching of the muscles or joint capsules.

EQUIPMENT:
None

PROCEDURE:
1. Adhere to Standard Precautions.
2. Explain the procedure to patient.
3. Review the specific PROM program for the patient. The exercises to be performed will be assigned by number.
4. Raise the bed to a horizontal position which is comfortable for your height to reduce back strain.
5. Lower the side rail on the side you are working and remove any obstacles such as a trapeze or other equipment.
6. Use a draw sheet to move the patient close to you.
7. Perform each exercise 8 to 10 times and 2 to 3 sets as tolerated by the patient.

Exercise 1 – Shoulder: Flexion
1. Starting position: Hold the wrist with one hand. With the other hand, support the elbow joint to stabilize the joint. Turn the palm inward, facing the body.
2. Lift the patient's arm up from the side of the body.
3. Carry the arm slowly and gently toward the patient's head as far as it will go without hurting the patient.
4. The arm may be bent at the elbow if the headboard of the bed will not permit the arm to be carried all the way back.
5. Carry the arm back to the starting position and repeat the exercise.

Exercise 2 – Shoulder: Abduction
1. Starting position: Hold the patient's hand with your other hand, support the elbow joint to stabilize the joint.
2. Keep the patient's arm straight, and move it away from the body, out to the side.
3. Continue to move the arm slowly outward then toward the head as far as it will go without hurting the patient, allowing the arm to rotate outward as you move the arm outward. Return the arm to the starting position and repeat the exercise.

Exercise 3 – Shoulder: Horizontal Abduction
1. Starting position: Place one hand under the patient's elbow.
2. Hold the patient's hand with your other hand.
3. Lift the arm and carry it across the patient's chest toward the opposite shoulder.
4. Return the arm to the starting position and repeat the exercise.

Exercise 4 – Shoulder: Rotation
1. Starting position: Move the arm away from body until the elbow is at shoulder height; bend the elbow.
2. Place one hand under the elbow and hold the wrist with the other hand.
3. Move the forearm and hand slowly, and gently back toward the head as far as possible without causing pain, until the hand points up toward the head. Keep supporting the elbow gently against the mattress. Then turn the arm back down so that the hand points to the foot.
4. Return the arm to the starting position and repeat.

Exercise 5 – Elbow: Flexion and Extension
1. Starting position: Hold the upper arm with one hand and the forearm with the other.
2. Place one hand under the elbow and hold the wrist with the other hand.
3. Move the forearm and hand slowly, and gently back toward the head as far as possible without causing pain, until the hand points up toward the head. Keep supporting the elbow gently against the mattress. Then turn the arm back down so that the hand points to the foot.
4. Return the arm to the starting position and repeat.

Exercise 6 – Forearm: Pronation and Supination
1. Starting position: Place one hand on the patient’s elbow and your other hand on the patient’s hand.
2. Rotate the forearm and hand so that the palm of the hand is toward the patient’s face.
3. Rotate the forearm and hand so that the palm of the hand is away from the patient's face, and repeat. Be sure to rotate the forearm and not the hand.

**Exercise 7 - Wrist and Finger Flexion: Extension**
1. Starting position: Hold the patient's forearm above the wrist with one hand and the patient's hand with your other hand.
2. Keep the fingers of the patient's hand straight. Bend the hand backward.
3. Straighten the hand back to the starting position.
4. Now bend the hand forward, closing the fingers to make a fist. Open the hand and repeat the exercise.

**Exercise 8 - Finger Abduction - Adduction Thumb – Opposition: Reposition**
1. Hold the patient's finger straight with one hand. With your other hand, bend the patient's thumb into the palm of his hand toward the base of the little finger.
2. Pull the thumb back so that it points away from the hand, and repeat the exercise. This preserves the web space between thumb and hand.
3. Holding the patient's hand in the starting position, separate each finger to preserve its web space.
4. Move the thumb in a circle.

**Exercise 9 – Hip: Knee Flexion and Extension**
1. Starting position: Cradle the leg by placing one hand under the patient's knee and your other hand under the heel of the foot.
2. Lift the leg, bend it at the knee toward the chest with the kneecap pointed toward the ceiling.
3. Move the knee slowly toward the patient's head as far as it will go without causing pain to the patient.
4. Lower the leg to the starting position and repeat the exercise.

**Exercise 10 - Hip Flexion**
1. Starting position: Support the knee and heel as in exercise nine.
2. Slowly raise the leg, keeping the knee straight.
3. Only lift the leg as high as you can while maintaining a straight knee.
4. If there is any sign of discomfort DO NOT go any higher.
5. Lower the leg to the starting position and repeat the exercise.

**Exercise 11 - Hip Abduction: Hip Adduction**
1. Starting position: support the knee and heel as in exercise nine. Keep the knee and foot straight, pointing up toward the ceiling.
2. Lift the leg 1 to 2 inches off the bed.
3. Move the leg out to the side without causing pain to the patient.
4. Move the leg back until it touches the other leg.

**Exercise 12 - Hip Internal and External Rotation**
1. Starting position: Place one hand just above the knee and one hand below the knee.
2. Roll the leg so the knee points toward the other leg.
3. Roll the leg so the knee points away from the other leg.

**Exercise 13 - Dorsi and Plantar Flexion**
1. Starting position: Support the forefoot with the hand.
2. Move the patient's forefoot toward the head and pointing the forefoot downward.

**Exercise 14 - Foot Inversion and Eversion**
1. Starting position: Place one hand on the leg above the ankle to stabilize the leg. Place the other hand under the ball of the foot.
2. Turn the whole foot outward.
3. Turn the whole foot inward. Return to starting position and repeat the entire exercise.

**Exercise 15 - Toe Extension and Flexion**
1. Starting position: With one hand, gently grip the foot at the arch and with the other hand, place your fingers on the patient's toes.
2. Pull up on the toes.
3. Push down on the toes. Return to the starting position and repeat the entire exercise.

**AFTER CARE:**
1. Return the bed to the lower position.
2. If side rails have been lowered, return them to their raised and locked position.
3. Return the equipment to its original position.
4. Document in patient's record:
   a. Extremity(ies) ranged.
   b. Number of times PROM was performed.
   c. Patient's response to procedure.
5. Inform supervisor of any change in the patient's condition including:
   a. Increased difficulty in performing the exercises.
   b. Patient's noncompliance with exercise program.
   c. Adverse reactions: pain, swelling, shortness of breath.

**REFERENCES:**