

1

- Stabilization

2

- Patient position

3

- Therapist position

4

- Hand placement (Proximal & Distal hands)

5

- Movement/Command

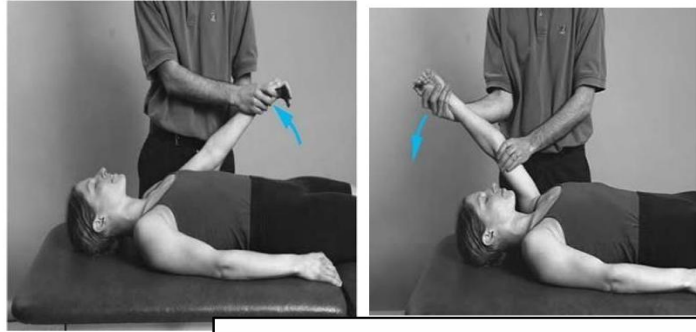
Passive ROM NO COMMANDS

1- Shoulder flexion, extension, hyper-extension - SUPINE

A- Shoulder flexion and extension

Patient: SUPINE – ARM EXTENDED BESIDE BODY

Therapist: standing beside patient at level of patient's shoulder, facing his trunk -
HAND CROSSING



HAND GRASP **Proximal hand:** grasping patient's **wrist and hand**

Distal hand: grasping patient's **elbow joint**

B- Shoulder hyper-extension (TWO POSITIONS: supine and side-lying) ...

HAND GRASP EXCEPTION



Patient: SUPINE – ARM BESIDE BODY –
elbow flexed 90°

Therapist: standing beside patient at
shoulder level facing patient's trunk

Proximal hand: stabilizing **shoulder joint**

Distal hand: grasping patient's **wrist & hand**



Patient: SIDE-LYING, 90° elbow flex, &
forearm supported on therapist forearm

Therapist: standing behind patient at
shoulder level facing patient's trunk

Proximal hand: stabilizing **shoulder joint**

Distal hand: grasping patient's **wrist & hand**

2- Shoulder abduction and adduction SUPINE

Patient: supine – arm beside body with elbow flexed or extended

Therapist: standing beside patient facing patient's trunk

HAND GRASP **Proximal hand:** grasping patient's **elbow joint**

Distal hand: grasping patient's **wrist and hand**

3- Shoulder internal and external rotation SUPINE

Patient: supine – shoulder abducted 90° - ELBOW SHOULD BE FLEXED 90°

Therapist: standing beside patient at shoulder level facing patient's trunk



Shoulder PROM Internal & External Rotation

HAND GRASP **Proximal hand:** grasping patient's **elbow joint**

Distal hand: grasping patient's **wrist and hand**

4- Shoulder horizontal abduction & adduction .. SUPINE



Shoulder: PROM Horizontal Abduction (Extension) and Adduction (Flexion)

Patient: supine – shoulder abducted 90° - elbow extended

Therapist: standing beside patient facing his head

HAND GRASP **Proximal hand:** grasping patient's elbow joint

Distal hand: grasping patient's wrist and hand

5- Scapula: Elevation/Depression, Protraction/Retraction, and Upward/Downward Rotation (TWO POSITIONS: prone and side-lying)



Scapula: Elevation/Depression, Protraction/Retraction, and Upward/Downward Rotation

Patient: Prone-lying or side-lying with his arm supported on therapist forearm

Therapist: Stands beside patient facing his head (when the patient is prone)

Stands beside patient facing his trunk (when patient is side-lying)

HAND GRASP **Proximal hand:** cupping patient's acromion process

Distal hand: cupping patient's inferior angle of scapula

6- Elbow flexion and extension SUPINE

Patient: supine with arm extended beside body

Therapist: Stands beside patient facing his trunk

HAND GRASP **Proximal hand:** grasping distal end of humerus laterally

Distal hand: grasping patient's wrist and hand

7- Forearm supination and pronation SUPINE

Patient: supine with arm beside body - ELBOW SHOULD BE FLEXED 90°

Therapist: Stands beside patient facing his trunk

HAND GRASP **Proximal hand:** grasping elbow joint

Distal hand: grasping patient's wrist and hand

8- Wrist flexion and extension SUPINE or SITTING

Patient: supine with arm extended beside body

Therapist: Stands beside patient facing his trunk and pelvis

HAND GRASP **Proximal hand:** grasping distal end of forearm proximal to wrist joint

Distal hand: grasping patient's hand distal to wrist joint

9- Joints of the Thumb and Fingers: Flexion and Extension and Abduction and Adduction SUPINE or SITTING

Patient: supine with arm extended beside body

Therapist: Stands beside patient facing his trunk and pelvis

HAND GRASP **Proximal hand:** stabilizing the segment proximal to joint

Distal hand: grasping the segment distal to joint

Lower Extremity

1- Combined Hip and Knee: Flexion and Extension



Patient: supine

Therapist: Stands beside patient facing his lower limb

HAND GRASP **Proximal hand:** under the patient's knee, support and lift the patient's leg with the palm and fingers.

Distal hand: under the heel

N.B: As the knee flexes full range, **SWING** the fingers to the side of the thigh.

2- Hip: Extension (Hyperextension) TWO POSITIONS

<u>Patient</u> Prone <u>Therapist</u>: Stands beside patient at level of pelvis Proximal hand: stabilize the pelvis Distal hand: under the patient's knee, used to lift the thigh.	 <u>Patient</u> Side-lying <u>Therapist</u>: Stands behind patient at level of pelvis Proximal hand: stabilize the pelvis Distal hand: under the patient's knee, used to lift the thigh.
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N.B. For full range of hip extension, do not flex the knee full range, as the two- joint rectus femoris would then restrict the range.

3- Hip: Abduction and Adduction



Hip PROM: Abduction and Adduction

Patient Supine

Therapist: Stands beside patient at level of lower limbs

Proximal hand: under the knee Support the patient's leg.

Distal hand: under the ankle

N.B: For full range of adduction, the opposite leg needs to be in a partially abducted position.

Keep the patient's hip and knee in extension and neutral to rotation as abduction and adduction are performed.

4- Hip: Internal (Medial) and External (Lateral) Rotation

Hand Placement and Procedure for Rotation with the Hip and Knee Extended

Patient Supine with hip and knee extended

Therapist: Stands beside patient facing lower limbs

Proximal hand: Grasp just proximal to the patient's knee.

Distal hand: Grasp just proximal to the patient's ankle.



Hand Placement and Procedure for Rotation with the Hip and Knee Flexed

Patient Supine with hip and knee flexed 90°

Therapist: Stands beside patient at level of pelvis

Proximal hand: support patient's knee.

Distal hand: support patient's heel.

5- Ankle Dorsiflexion



Patient Supine

Therapist: Stands beside patient facing his feet

Proximal hand: Stabilize around the malleoli.

Distal hand: Cup the patient's heel, placing the forearm along the bottom of the foot.

N.B. Pull the calcaneus distal ward with the thumb and fingers while pushing upward with the forearm.

N O T E: If the knee is flexed, full range of the ankle joint can be obtained.

If the knee is extended, the gastrocnemius limits full range of dorsiflexion.

6- Ankle Plantarflexion

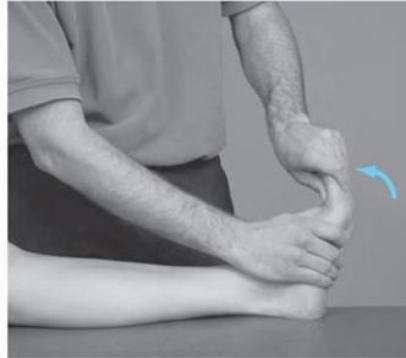
Patient Supine

Therapist: Stands at the end of bed, in front of patient facing his feet and head.

Proximal hand: Placed on the dorsum of the foot (move the foot into plantarflexion).

Distal hand: Support the heel.

7- Joints of the Toes: Flexion and Extension and Abduction and Adduction (Metatarsophalangeal and Inter- phalangeal Joints)



Metatarsophalangeal and
Inter- phalangeal Joints

Patient Supine

Therapist: Stands beside patient facing his feet.

Hand Placement and Procedure ➤ Stabilize the bone proximal to the joint that is to be moved with one hand, and move the distal bone with the other hand.