

PERFORMANCE CHECKLIST

Performing Range of Motion Exercises

Name _____

To be completed by instructor during observation of 100%, unassisted mastery of procedure. Date and sign below. Skill mastery must be demonstrated prior to direct patient contact.

Equipment: Bath blanket or equivalent.

Note: Perform exercises on one side of body and repeat exercises on opposite side. Repeat each movement three times unless otherwise directed. Always support joint being exercised and never go beyond point of pain.

- _____ 1. Knock before entering room.
- _____ 2. Address resident by name.
- _____ 3. State your name and title.
- _____ 4. Identify resident.
- _____ 5. Explain procedure and obtain permission.
- _____ 6. Wash hands.
- _____ 7. Assemble equipment.
- _____ 8. Provide privacy.
- _____ 9. Provide for resident safety and raise bed to best level for body mechanics.
- _____ 10. Cover with bath blanket or equivalent and fanfold top linens to bottom of bed.
- _____ 11. Place in supine position.
- _____ 12. **Exercise neck:**
 - _____ Head flexion, extension and hyperextension
 - _____ Head right and left rotation
 - _____ Head right and left lateral flexion
- _____ 13. **Exercise shoulder:**
 - _____ Shoulder flexion, extension and hyperextension
 - _____ Shoulder abduction and adduction
 - _____ Shoulder internal and external rotation
 - _____ Shoulder horizontal abduction and adduction
- _____ 14. **Exercise elbow, forearm and wrist:**
 - _____ Elbow flexion and extension
 - _____ Forearm pronation and supination
 - _____ Wrist flexion, extension and hyperextension
 - _____ Wrist ulnar and radial deviation

- _____ 15. **Exercise hand and each finger:**
 - ___ Finger flexion and extension
 - ___ Finger adduction and abduction
 - ___ Finger/Thumb opposition
- _____ 16. **Exercise hip and knee:**
 - ___ Hip flexion and extension
 - ___ Hip abduction and adduction
 - ___ Hip internal and external rotation
 - ___ Knee flexion and extension
- _____ 17. **Exercise ankle, foot and toes**
 - ___ Ankle dorsal flexion and plantar flexion
 - ___ Foot eversion and inversion
 - ___ Toe abduction and adduction
 - ___ Toe flexion and extension
- _____ 18. Repeat exercise on opposite side of body after providing for resident safety.
- _____ 19. Lower bed.
- _____ 20. Replace top linens.
- _____ 21. Return bath blanket or equivalent to appropriate place.
- _____ 22. Provide for comfort with call signal in reach.
- _____ 23. Wash hands.
- _____ 24. Record actions and report any abnormal observations to supervisor.

Pass _____ Instructor's Signature _____ Date _____

The above signature attests that the evaluator did not prompt, give hints, or otherwise assist the individual in the performance of the skills, or allow the individual to study the skill after selection or before demonstration when the individual was being tested for competency. 2005