

If you have any questions or concerns about your condition, please contact your occupational therapist:

on (01623) 622515, extension 4271 for King's Mill or (01636) 685885 for Newark.

For appointment queries please contact Therapy Services reception on (01623) 622515, extension 3221 or for Newark (01636) 685885. **Further sources of information** NHS Choices: <u>www.nhs.uk/conditions</u> Our website: <u>www.sfh-tr.nhs.uk</u>

Patient Experience Team (PET) PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222 Newark Hospital: 01636 685692 Email: <u>sfh-tr.PET@nhs.net</u>

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfhtr.PET@nhs.net. This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references for this leaflet, please email <u>sfh-</u> <u>tr.patientinformation@nhs.net</u> or telephone 01623 622515, extension 6927.

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Page 6

INFORMATION FOR PATIENTS

Occupational Therapy – Hand Therapy

Thumb exercises



Healthier Communities, Outstanding Care

Basic terminology

- Active exercises using your own muscle power to do the exercises.
- Passive exercises using your other hand or an object to assist the movement of the involved limb.

Exercises

1. Pull the thumb up to rest on the palm, then push the thumb away from the palm:





2. Straighten the thumb (like a hitchhiker) then bend the thumb across the palm to try and touch the base of the little finger:





3. Touch the thumb to the tip of each finger in turn. Try to make an 'O' shape:



4. Try to slide the thumb down the side of each finger in turn:



5. Block the base of the thumb and try to bend the end of the thumb:



Exercise instructions

Carry out passive and active exercises/carry out passive exercises only/carry out active exercises only.

Carry out _____ of each exercise.

Repeat the exercises_____ times a day.