

Chambersburg Office: 717-263-1220 Shippensburg Office: 717-300-7910

# Hand Exercises (Six-Pack Exercises)

The specific exercises listed below that the patient should perform depends on which phase of the recovery process the patient is in. Your surgeon will inform you which exercises to start and when.

Take each stretch as far as you can take it and then stretch beyond this (by 1-2 centimeters). (It is like touching your toes before the big Track Meet.) If you only take it to the point of discomfort then immediately stop, the ligaments have a chance to shorten and tighten and you will not make progress. Hold each stretch for approximately 10 seconds. The stretches (PROM) should be performed at least 5 minutes 5X/day or 1 minute every hour while awake. The strengthening routine is usually performed 3-4 times per week. You should not do any damage to the repair by performing these exercises as instructed.

By doing each of the Six-Pack exercises, you will be utilizing all of the joints in your hand and making them move. How hard YOU work on your own exercises after surgery is just as crucial to an excellent result as what the surgeon did during the surgery. Also, don't forget to move your Shoulder, Elbow and Wrist as well! If you develop significant unrelenting pain, then stop what you are doing and consult with the surgeon.

#### Phase I\*:

\*Diagram on Next Page

In the beginning these exercises will be passive (PROM), meaning you will use the Nonoperative hand to perform these exercises on the Operative hand & fingers.

#1: The Arrow: Maintain your Operative hand flat on a table-top to achieve full finger and thumb extension. You could place a pen under your fingertip while doing this to emphasize achieving full extension.

#2: The Claw: Proximal Interphalangeal Joint (PIP) flexion: Use the Nonoperative Hand to flex the Operative finger tip to that it eventually touches the base of the same finger. If you can achieve this then that is the most motion possible at this joint and you are back to a full functional recovery. Can do this for each finger in the beginning and then progress to the Composite exercise (all fingers together and in unison).

#3: Tabletop: Metacarpophalangeal Joint (MCP) flexion: Rest the Operative-side elbow on a tabletop while holding the forearm vertical/straight up towards the ceiling. Use the Nonoperative hand to passively flex the MCP joint as shown in the illustration. The sooner you achieve 90 degrees of flexion at this joint, then everything else will follow naturally.

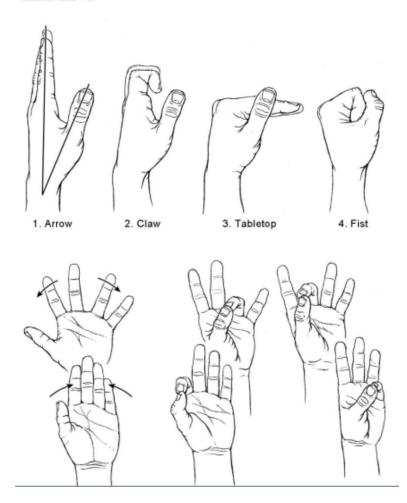
#4: The Fist: Make a full fist and then fully extend fingers and thumb.

#5: IN (Finger Adduction) and OUT (Finger Abduction): Spread your fingers apart and then bring them together.

#6: Thumb to Tips: Bring your thumb tip to the Index finger, then Middle finger, then Ring finger, the Small finger. Then passively flex (Thumb Opposition) your thumb to reach the base of the Small finger at the far end of the palm.

## Six-Pack Exercises

See the diagram for six simple hand exercises. All 3 of the joints in the fingers and thumb interact with each other. It makes a difference what position one joint is in when you exercise another one. By doing each of the "six pack" exercises, you will make each of the joints in your hand move.



### Phase II:

Perform all the same Six-Pack Exercises as in Phase I but now perform these actively by their own power and independently.

## Phase III:

Grip strengthening: With a stress ball, Play-Doh/putty, sponge or Grip strengthener.