

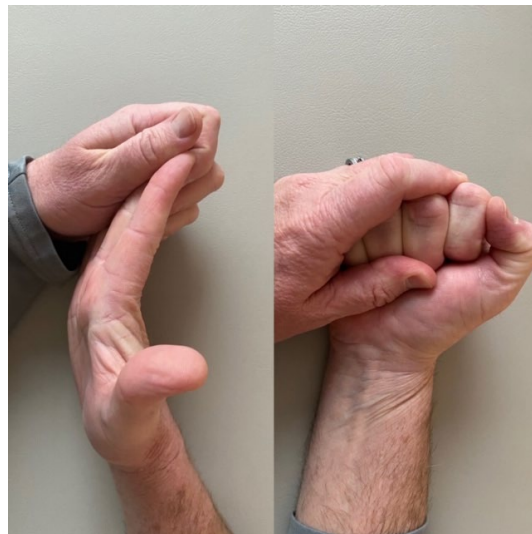
# Distal Radius/ Wrist Fracture

## So you fractured your wrist, now what?

This handout is intended for patients healing from wrist fractures, treated conservatively (in a cast) or through surgical intervention. It's important to get your fingers moving from **Day 1**. If the movement is difficult, perform Part A followed by Part B. If the movement is easy then perform Part B only.

### **Move your fingers**

Move your fingers through their FULL range of motion from completely straight (or beyond straight) to completely in a fist, spread your fingers far apart and press them together.



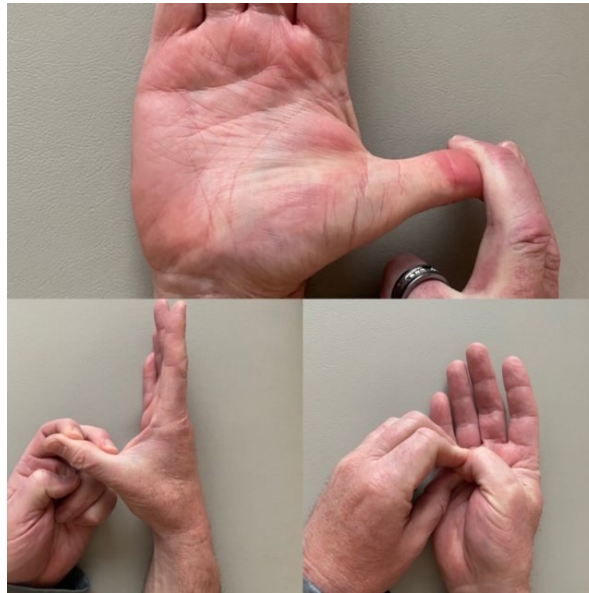
Part A: Passive range of motion



Part B: Active range of motion

**Move your thumb:**

Move your thumb all the way up “thumbs up,” all the way out “like grabbing a cup,” and down to the base of your small finger. Do your best within the confines of your cast/splint.



Part A: Passive range of motion



Part B: Active range of motion

**Move the rest of your body:**

Straighten your elbow to stretch your biceps a few times a day, perform shoulder rolls, neck stretches, torso rotations, “ceiling punches” reaching up with your arm up as if punching the ceiling a few times a day, and generally try to keep the rest of your body free of tension.

**General Recovery Tips:**

Moving your fingers may be painful at the start. But I assure you the more you do to restore movement now, the better. Try to work with a pain level of 3/10 maximum and progress the range of motion throughout your day.

Eat well and drink a lot of water.

It’s OK to exercise! Go on a long walk, march in place, perform body weight squats, lunges, glute bridges, crunches, etc. It’s OK and good for you to move your body, stimulate your lymphatic system, and get some natural endorphins.

Being injured is not easy, so do something every day that makes you happy. Be kind to yourself.

Sincerely, your Hand Therapist,

Jenny Kim

Occupational Therapist

Certified Hand Therapist