OSCE checklist for range of motion exercises

An OSCE checklist for range of motion exercises covers explaining the movements, supporting each joint, moving it gently through its normal range, stopping if there is pain and recording what was done.

OSCE checklist for range of motion exercises: steps to practise

1. Clean your hands, introduce yourself, confirm the patient's name and date of birth against the wristband, explain that you will move the joints gently and gain consent.
2. Check the care plan and the physiotherapy plan for any limits, such as a recent fracture, joint surgery, a suspected blood clot or a painful, swollen joint.
3. Ask about pain before you start, and check whether pain relief is needed first.
4. Close the curtains, raise the bed to a safe height, apply the brakes, and expose only the limb you are moving.
5. Encourage the patient to move each joint themselves where possible (active exercise), and help only as much as needed.
6. For passive movement, support the limb above and below the joint and keep the patient's body in line.
7. Move each joint slowly and smoothly through the range it moves comfortably, such as flexion, extension, abduction, adduction and rotation. Never push past resistance or pain.
8. Do not move the neck passively unless a physiotherapist has asked you to.
9. Repeat each movement the number of times the care plan or physiotherapist sets, and compare both sides.
10. Watch the patient's face and stop if there is pain, or if you notice new swelling, redness, warmth or a change in breathing.
11. Make the patient comfortable, lower the bed, put the call bell in reach and clean your hands.
12. Record which joints were exercised, how the patient tolerated them and any limit, and report new pain, swelling or redness in a calf to the nurse in charge at once.

What candidates commonly forget

- Forcing a joint past resistance or pain
- Not supporting the limb above and below the joint
- Not checking the care plan for limits first
- Not watching the patient's face
- Not reporting a swollen, red or painful calf
- Not recording the range achieved

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Back to the nursing foundation OSCE page: nursing foundation OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for range of motion exercises?

Explain and gain consent, check the care plan for limits, ask about pain, support the limb, move each joint slowly within its comfortable range, stop if there is pain, compare both sides, record and report.

What is the difference between active and passive range of motion?

Active means the patient moves the joint. Passive means you move it for them.

When must I not do passive exercises?

Do not move a limb with a suspected fracture, a suspected blood clot or an unstable or newly operated joint unless the medical team or physiotherapist has given clear instructions.

Sources

- NMC: standards of proficiency for registered nurses
- NICE NG89: venous thromboembolism in over 16s

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.