# Thumb Immobilization Splint

**Prosthetics and Orthotics Splint Grading Worksheet**

**Name:**

**Date:**

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**Note:** Splint should be worn for thirty minutes prior to grading.

## Evaluation Areas

### Design

1. The wrist position is at the correct angle [Y/N/N/A]
2. The thumb position is at the correct angle [Y/N/N/A]
3. The thenar eminence not restricted or flattened. [Y/N/N/A]
4. The thumb post provides adequate support and is not constrictive. [Y/N/N/A]
5. The splint is half the width of the forearm [Y/N/N/A]
6. The splint is two thirds the length of the forearm. [Y/N/N/A]

### Function:

1. The splint allows full thumb IP flexion [Y/N/N/A]
2. The splint allows full MP flexion of the fingers. [Y/N/N/A]
3. The splint provides wrist support that allows functional activities. [Y/N/N/A]

### Straps:

1. The straps are secure and rounded. [Y/N/N/A]
2. The straps avoid bony prominences. [Y/N/N/A]
Comfort:
1. The splint edges are smooth with rounded corners. Y_____N_____N/A____
2. The proximal end is flared Y_____N_____N/A____
3. The splint does not cause impingements or pressure sores. Y_____N_____N/A____
4. The splint does not irritate bony prominences. Y_____N_____N/A____

Cosmetic Appearance:
1. The splint is free of fingerprints. Y_____N_____N/A____
2. The splint material is not buckled Y_____N_____N/A____

Comments:

Each criteria is worth five points. If the splint appears to cause harm or damage it will receive an overall failing grade and must be re-fabricated. If the splint has to be remade, the highest achievable grade will be an 80%.

Points Possible_____Total Points Scored_______Percentage Grade_______