

Patent Name

# My Personal Plan



This plan is to help maintain your circulation and to stop you getting sluggish, stiff and sore during your stay in hospital. This is in addition to specific exercise you may have been given by staff.

During the hours of \_\_\_\_\_ and \_\_\_\_\_

I am going to stand up every \_\_\_\_\_ mins (30-60mins)

and move for at least \_\_\_\_\_ mins (1-10mins)

Remember your shoes/slippers



I also need my walking aid

If leaving the ward I need to let the nursing staff know

You may wish to keep a diary of how you have been getting on with your plan.

(There is no requirement for you to do this)

	Day 1	Day 2	Day 3	Day 4	Day 5
8AM					
9AM					
10AM					
11AM					
Noon					
1PM					
2PM					
3PM					
4PM					
5PM					
6PM					
7PM					
8PM					



If your condition has changed since this plan was made speak to a member of staff before continuing with the programme

