



FRESH START

toolkit



Fracture Recovery for Seniors at Home:
A hip fracture recovery guide for patients & families

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FReSH START Toolkit

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To view the FReSH Start videos at home, please visit:

<https://vimeo.com/channels/freshstart>



Recovering from Hip Fracture: The Role of Patient and Family

When you come into the hospital, have someone help you to:

- Send home valuables
- Bring in sturdy shoes with a closed toe and heel, any hearing aids and glasses, and toothbrush/toiletries
- Bring a list of your medicines including prescriptions, herbals and any others

After surgery, start preparing early to go home:

- Ask the health care team to review this booklet with you
- Ask when you might be going home. **Date:**
- Arrange for someone to help you at home for the first 10 days at least (*more on page 9*)
- Tell the team of any concerns about managing at home, such as:
 - No one living at home or nearby who can help you
 - Difficulty getting to appointments
 - Any difficulties managing at home before coming into hospital
- Ask the team for a list of public and private pay services in your area

Before you leave the hospital:

- Ask the nurse or a pharmacist for a list of all your medicines (*more on page 3*)
- Ask the team about signs of problems, what to do, and who to contact (*more on page 13*)
- Request information on how to prevent falls and injuries (*more on page 16*)
- Ask your team about fall alert systems, especially if you live alone (*more on page 25*)
- Ask your occupational or physiotherapist for a list of equipment you need at home (*more on page 11*)
- Talk to your physiotherapist about an activity and exercise plan for you to follow at home (*more on pages 18 – 24*)
- You will need a family doctor or nurse practitioner when you go home. If you do not have one, ask for a list of those taking new patients in your area or about the "A GP for Me" programme (website: www.agpforme.ca)
- Request a list of follow up appointments (*more on page 3*)

When you go home:

- Make an appointment to see your family doctor
- Attend recommended appointments: e.g. physiotherapist, bone health clinic

My Health

I had a hip fracture. My surgery date was

I am allowed to put amount of weight on my operated leg.

Balance and strength exercises and walking are an important part of my recovery (page 16).

I have to avoid the following activities :

Hip precautions (ask your physiotherapist to write below and for how long)

My Follow Up Appointments

Appointment with	Date	Time	Location
Orthopaedic Surgeon to check how my hip is healing			
Family Doctor or Specialist to check my medication and my general health			
Family Doctor or Bone Health Clinic to improve the strength of my bones			
Physiotherapist to help me stay active, get stronger, and prevent future falls			

My Medications

Before you leave the hospital, be sure to have a list of up-to-date medications. See your doctor within one week and bring this list. Also review the list with your community pharmacist. Some medications can cause falls. It is extremely important to tell your doctor and pharmacist if you feel dizzy, faint, or sleepy.

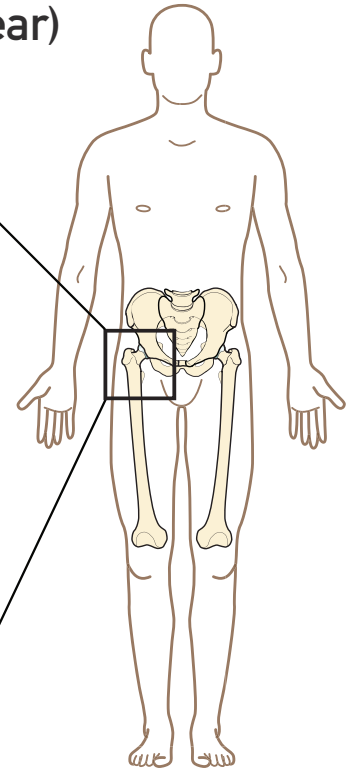
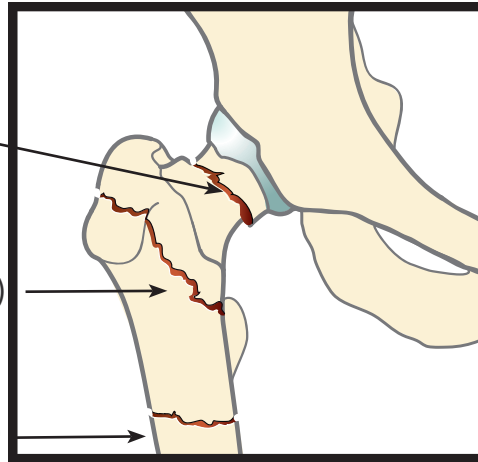
In Hospital

What is a Hip Fracture? (Medical words you may hear)

The hip is a ball and socket joint that moves in all directions.

The head is the ball of the thigh bone (femur) and fits into the socket (acetabulum) located in the pelvic bone. A hip fracture is a partial or complete break at the top of the thigh bone.

1. Femoral neck/subcapital fracture
2. Intertrochanteric fracture
(the most common type of fracture)
3. Subtrochanteric fracture
(the least common type of fracture)



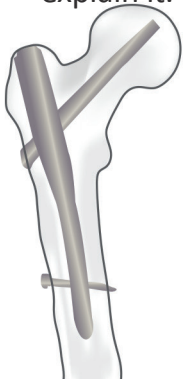
Hip fractures are mostly caused by a fall or other injury to your hip. Some people with a hip fracture also have osteoporosis.

What is osteoporosis? It's when the bones become thinner, more fragile and more likely to break with a fall. You can help prevent falls and make your bones stronger by:

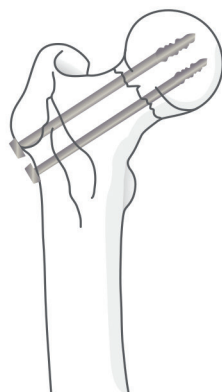
1. Performing standing activities and strength training.
2. Getting enough calcium and vitamin D, and other specific medicines if prescribed by your doctor.

What's Next?

Surgery will fix the broken parts of your hip so that the bone pieces line up correctly. In most cases the surgery will allow you to walk safely on your leg right away. The type of surgery will be chosen by your surgeon. It will be based on where the break is, the strength of your bone, and how the bone pieces line up. Ask the team to circle your type of surgery below and explain it.



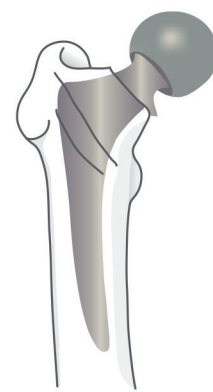
Intramedullary
Nail



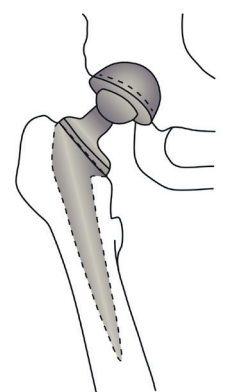
Cannulated
Screws



Sliding Hip
Screw



Hemiarthroplasty



Total Hip
Arthroplasty

Pain Control in Hospital

Pain (or discomfort, aching or hurt) is expected after hip fracture surgery and eases day by day. To reduce your pain:

- Take your pain medication. It is given to you on a regular schedule to prevent the pain from getting bad.
- Move around, change your position frequently, and do your exercises.
- Breathe slowly in to the count of three, then sigh out - repeat this 3 times - it will help you relax.

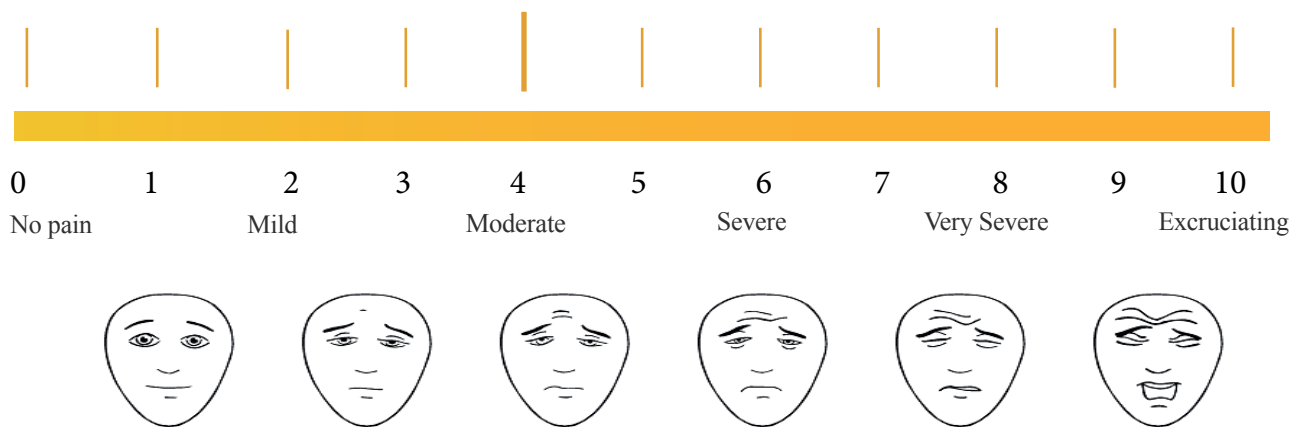
Be sure to tell your nurse if you have pain. Do not wait until the pain is bad.

What medications are used to manage your pain?

- Acetaminophen pills (Tylenol[®]) are usually given every six hours
- You may need stronger pain relievers, such as hydromorphone in the first few days

Moving around helps you heal and reduces pain! Take regular pain medication. Tell your nurse of any concerns you have about the medications.

Your health care team will ask you frequently about your pain, using a scale similar to the pictures below. The scales help them understand the amount of pain you are having. We need to give you enough pain medication so that you stay comfortable enough to walk, sit in a chair and get up to the bathroom



Your Hip Fracture Journey

Before Surgery



A doctor and/or nurse will talk with you about your health and concerns



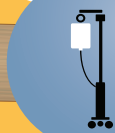
You will have various tests such as blood work and x-rays



Wash your hands
Remind staff and family



You will be helped to change your position



You will have an intravenous (IV) started in your arm



Sit up at bedside, stand or walk the day of surgery



Take pain control medicine



Deep breathe and cough up to 10 times each hour



After Surgery



Start bed exercises with physio/family



Practice climbing stairs with help (if needed)
Increase independence with mobility



Brush your teeth frequently



Eat a high protein, nutrient rich diet



Begin walking with a walker after surgery
Increase the distance daily

No bedpans
Get up to go to the toilet



Get and set up home equipment



Going Home

1 Week to 6 Weeks



Follow up with your doctor soon after going home
Ask how to improve your bone and muscle health

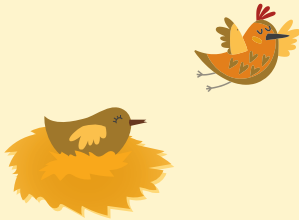


Follow the home exercise program prescribed by your physiotherapist

Resume sexual activity when it is comfortable for you



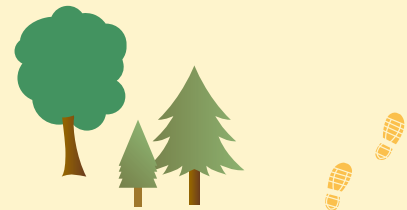
6 Weeks to 1 Year



After six weeks, consult your doctor about any new activity you would like to start



Walk, walk, walk, increasing distances



Recovery is a process – be patient with yourself



Preparing for Home

The goal is for you to go home as soon as possible. The health care team will work with you and your family to prepare you to go home. **For about the first 10 days, you will need to arrange for someone to help you at home.** You will need help with meals, bathing, moving around, cleaning, shopping and paying bills. Ask your team for a list of public and private pay services available in your area. Tell the team if you do not have someone to help you.

Your occupational therapist and physiotherapist will give you a list of equipment that will make it safer and easier for you to manage at home. You will need to arrange for someone to get the equipment on your list and have it in place before you go home. See the next page for the home equipment you may need.

Going Home

Arrange for someone to pick you up at the hospital by 10 am on the morning you are leaving.

Getting in and out of a car safely (see videos at: www.vimeo.com/channels/freshstart)

1. Park your car a short distance from the curb so that you can enter from a level surface
2. Stand facing away from the car, making sure you can feel the seat behind both knees



1. Make sure the passenger seat is as far back as possible, with seat reclined
2. Place one hand on to the upper car seat and place the other hand on the dashboard.

Never use the car door for support.



1. Slide your operated leg in front of you
2. Slowly lower your hips onto the car seat
3. When seated, lift your legs into the car
4. Ask for help lifting your operated leg into the car if you are not ready to do this by yourself

At Home

Home after Hip Fracture: Here are a few tips to help your recovery at home

- **Seek support:** ask for help with everyday tasks such as cooking meals, or driving to doctor's appointments
- **Move more:** limit your sitting time: plan to walk a little extra every day. Place reminders to do your home exercises in noticeable places (e.g., fridge, bathroom mirror) to help you move frequently
- **Put things in perspective:** Remember that recovery is a process that takes time — be patient with yourself — tracking improvements with a log book helps to remind you of your progress, such as tracking the distance or time walked. Check with your health care team for other ideas to boost your activity levels

Equipment

The equipment below may make daily activities safer and easier for you. Ask a physiotherapist or occupational therapist for a list of what you need, where to get it, and how to use it.

- Grab Bar
- Raised Toilet Seat



- Reacher/Sock Aid



- Bath Transfer Bench
- Grab Bar



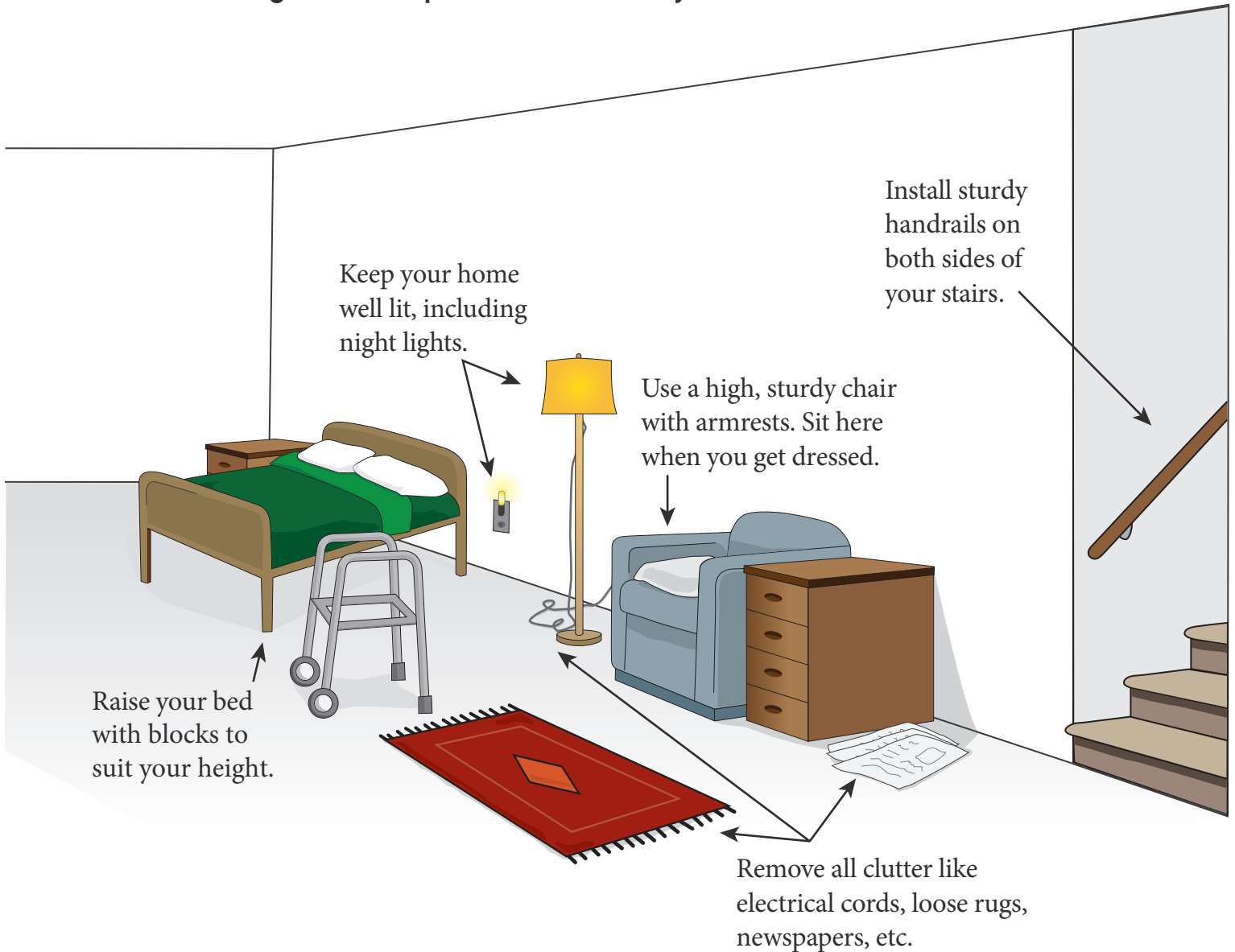
Other Equipment

- 2-Wheeled Walker
- Bed Blocks (to raise your bed)
- Bed Rails
- Cane
- Crutches
- Long Shoe Horn
- _____
- _____

Setting Up Your Home for Safety

After a hip fracture, it is common to be afraid of falling again, and this may stop you from being active. However, it is important to keep moving so that you can regain your balance and strength.

Use this Diagram to Improve Home Safety



Health Concerns to Watch/What to Do

CALL 9-1-1 OR GO TO EMERGENCY if you have chest pain, shortness of breath, or sudden severe pain in your hip with difficulty moving your leg.

BLOOD CLOTS

How can I prevent them?

Move frequently and do your exercises. You may require blood thinning medication by mouth or injection. If needed, your nurse will teach you about this.

What are the signs?

- Red, tender, or painful calf/lower leg
- Swollen or shiny calf/lower leg

What should I do if I think I have a blood clot?

Raise your leg. Contact your family doctor or surgeon immediately, or call 8-1-1 (*see page 25*).

INFECTION

How can I prevent infections?

Wash your hands frequently. Do not get your surgical site wet until staples are out and the area is healed. Drink plenty of fluids each day. Empty bladder frequently. Eat a healthy diet. Deep breathe and cough. Quit smoking.

What are the signs: **surgery site infection**?

- Redness, swelling, or pain
- Drainage
- Fever

What are the signs: **bladder infection**?

- Passing urine frequently
- Foul smelling urine
- Burning when passing urine

What are the signs: **chest infection**?

- Coughing with thick mucus

What should I do?

Contact your surgeon for an infection at your surgical site. Contact your family doctor or call 8-1-1 for any other infection.

DELIRIUM (New Confusion)

How can I prevent delirium?

Get enough sleep each night. Wear your glasses and/or hearing aids. Limit alcohol intake. Read and socialize with others.

What are the signs?

- New confusion
- Trouble thinking straight
- Feeling unusually sleepy or agitated

What should I do if I think I have delirium?

Contact your family doctor or call 8-1-1.

CONSTIPATION

How can I prevent constipation?

Drink plenty of fluids. Eat a high fibre diet including bran, prunes, whole grains, fruits and vegetables. Move around more.

What are the signs?

- Going for 3 days without a bowel movement
- Straining to have a bowel movement
- Hard, small bowel movements
- Stomach pain or discomfort
- Nausea, vomiting, or decreased appetite

What should I do?

Speak to your local pharmacist or family doctor about laxatives.

Pain Control at Home

What can I expect?

It is normal to have some soreness or discomfort in your hip in the weeks after surgery. It is most important that you can move around and rest at home. You will recover faster if pain is well-controlled.

Before you go home: Ask for a list of pain medications, **when** to take them and any **side effects** to watch for.

In the hospital you received very regular pain medication. It is important to continue this when you go home.

At home, **continue** to take acetaminophen 325mg, two pills, every 4 to 6 hours.

Take 2 pills when you get up, another 2 pills at lunch and supper time and 2 more pills before bed. **DO NOT** take more than 8 pills in a day (too much acetaminophen may have side effects).

Acetaminophen does **NOT** cause addiction

In a few days, once you are comfortable, cut back and take the pain relievers only as you need them. For example:

- Reduce taking pain relievers from 4 times a day to 3 times a day
- Then, if you do not experience increased pain, reduce again to 2 times a day and so on
- **OR** take 1 tablet instead of 2 tablets at a time
- If you start to feel more discomfort as you cut back, take the extra doses and try again in a day or two

If you need more than acetaminophen to control your pain, a stronger pain medicine can be added- but check first with your doctor or pharmacist to make sure you don't go over the recommended amount of acetaminophen. You can use the same method of cutting back on stronger medications as above.

What about side effects?

The most common side effects of pain medicines are: constipation, feeling sleepy, or delirium (new onset of confusion)

For constipation, confusion, or delirium, see page (13). For sleepiness, visit your doctor to review your medications.

More tips to control pain

- Do not push yourself beyond your limit. REST if you feel tired and uncomfortable
- If doing your exercises are painful, take pain medicine and wait 30 minutes before activity
- DISTRACT yourself from discomfort. Listen to music, visit with friends, or read a book
- Think positively! You will become more comfortable and feel better with time

If these tips do not reduce your pain, or if you have pain in other parts of your body, **visit your doctor.**

Nutrition Tips

Good Nutrition is Essential for Recovery

Malnutrition can be a big concern for many people both before and after a hip fracture. Malnutrition occurs when the body doesn't get enough calories or nutrients. It causes weakness, infection and in some cases death. People become malnourished when they don't eat well due to a poor appetite or with certain illnesses. A well balanced diet high in calories, proteins and nutrients is essential to heal and regain your strength. If you have a poor appetite, focus on high protein, high calorie soft foods such as yogurt, milk, egg, fish, ground meat, lentil soup, protein smoothies etc.

Call **8-1-1** to speak to a Dietitian to help with any eating concerns.

Losing weight when you go home is a danger sign! Weigh yourself once a week, and see your doctor if you lose more than 4 pounds (2 kg), or if your clothing becomes loose.

Depression

If you find your motivation is low, you don't feel like yourself, or you have feelings of sadness lasting more than 2 weeks, talk to your doctor. You may be depressed. For some, the hip fracture is a life altering event that changes how they live day to day. People heal and recover at their own pace and it can take at least a year to fully recover. The best way to get better is to exercise, walk and be social. Set goals for yourself and track your improvements over time.

Bladder Control

Making it to the toilet on time may be a problem for you. Follow these important tips:

- Do not wait until the urge to pee is strong and you feel you have to rush. Instead walk to the toilet every 2-3 hours
- Do exercises to build strength in the muscles that control the flow of urine. Sit comfortably and squeeze these muscles as if you were trying to stop the flow of urine. Do this 3 times each hour
- You may need to wear a urinary pad to help catch urine. The pad needs to be held tightly up between your legs to work
- You may wish to have a commode or urinal at your bedside
- Make sure that your bowels are working well, as this will also help your bladder
- Drinking non-caffeinated beverages e.g. water, increasing the amount of fibre in your diet, and walking will help both your bladder and bowels

Ask your Doctor or Community Health Department about Continence Advisors in your area.

See the resource page (25) for more information.

Resources: Bladder & Bowel Control (websites: www.cnca.ca and www.ccf.ca)

Sleep

Getting enough sleep helps you to heal. It may be hard to sleep when you first go home. Here are some tips:

- Get up at the same time each day. Limit naps
- Limit caffeine intake, none after lunch. No large meals within 3 hours of bedtime
- Keep your bedroom well ventilated, quiet and dark
- Wind down at bedtime with quiet activities
- Sleeping pills are not recommended. They can cause falls

If sleep problems persist, talk to your doctor.

Mobility

Preventing Future Falls and Injuries

Nine out of ten hip fractures are caused by a fall. You may be afraid of falling again but to prevent future falls, it is important for you to keep moving safely to regain your balance and strength. Here are some tips:

Do the strength and balance exercises prescribed for you (see page 18).

- If you feel dizzy, faint or sleepy, talk with your doctor
- Keep your walking equipment within reach
- Think about getting a commode or urinal to have at your bedside
- Wear your eyeglasses and hearing aids. Be extra careful with bifocals or progressive lenses
- Get up slowly to find your balance before walking. This is especially important after using the toilet or lying down for a long time
- Men should sit to pass urine
- Do not lean on furniture to move around
- Avoid rushing:
 1. Keep a phone nearby
 2. Go to the toilet frequently
- Review your medicines with your doctor within one week of going home
- Take vitamin D to help your muscles get stronger
- Wear sturdy, non-slip footwear
- Wear hip protectors if recommended for you

Physical Activity - It All Counts!

Physical activity is the key to a successful recovery!

There are different types of physical activity that should be included in your daily routine; each one is equally important- see if you can sneak more of these four activity “snacks” into your daily routine!

1. Everyday life activities, such as your morning routine can provide surprising opportunities to be more active such as standing on one leg while brushing your teeth (when you are able). Please check with a health care member first to make sure all activities are right for you!
2. Walking for transport: You won't be able to drive for six weeks after surgery, so this is a good time to get into the walking habit- even when you are allowed to drive again, swap the steering wheel for walking whenever possible.
3. Occupational and leisure-time physical activity: As soon as you are able, get back to doing things you love - gardening, swimming, and dancing are great examples of adding activity into your lifestyle. Discuss ideas with your health care team to get tips for success.
4. Prescribed exercises: Keeping up with the home strengthening and balance exercise prescription from your physiotherapist is very important, but don't stop there- when the exercises get easy, get an “upgrade” from your physiotherapist for a more challenging set!

By following these guidelines, and speaking with your physiotherapist, you will be able to successfully increase your activity throughout the day.

When and How to Resume Activities

You return to usual activities gradually. Follow these guidelines:

- For the first 6 weeks, rest, walk, and do exercises as instructed by your physiotherapist
- After 6 weeks, consult your doctor about any new activity you would like to start
- Resume sexual activity when it is comfortable for you. If you have questions, ask your team
- Walk and swim increasing distances, or cycle but with minimal resistance only
- DO NOT do any activities that involve stop-start twisting or impact stresses until your doctor says it is safe. This includes tennis, contact sports, running, jumping, dance, and skiing

Driving is NOT recommended until 6 weeks after your surgery as your muscles are still healing. Ask your doctor when it is safe to drive again.

Exercises

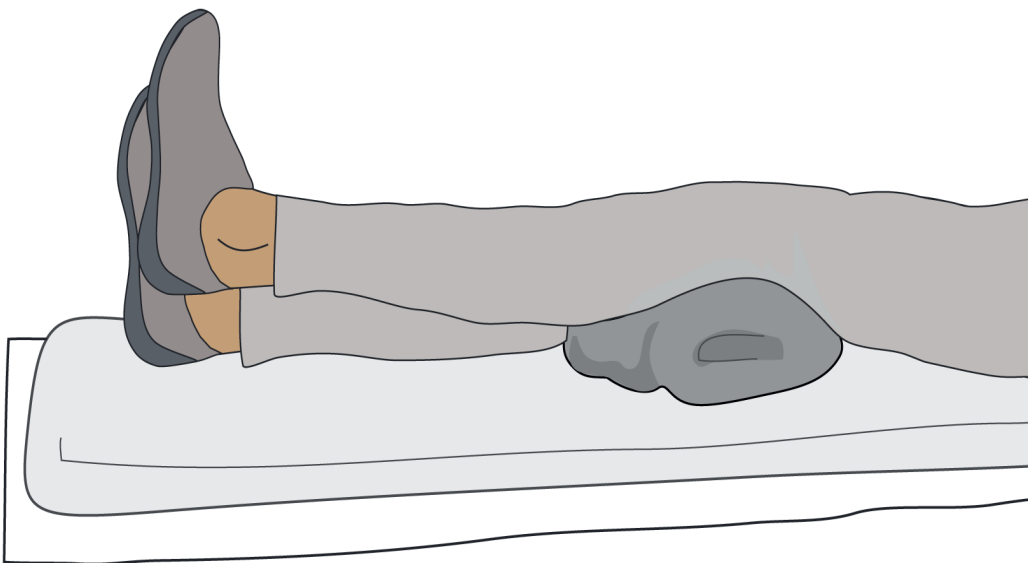
Early Exercises

Do strength and balance exercises you were shown how to do by a physiotherapist (or other health professional). Your health team will let you know if you need to follow hip precautions.

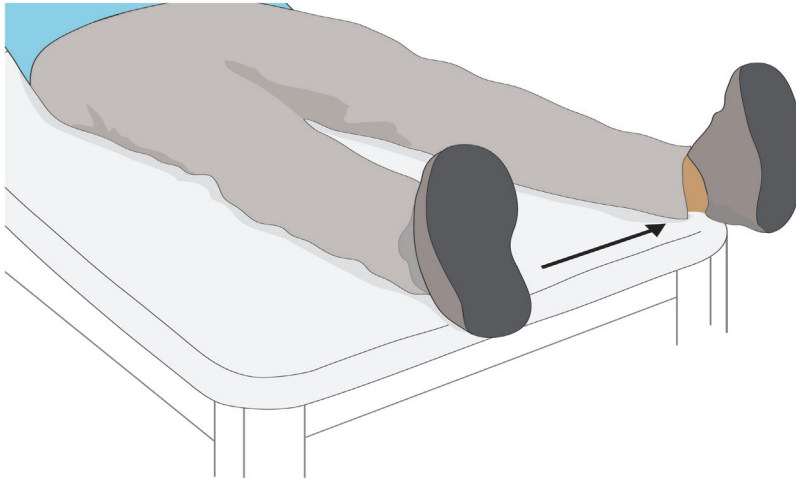
Just as you need to take care of your bones, it is also very important that you take care of your muscles and your balance. These exercises will help to improve your hip motion and muscle strength. Do the exercises daily. Do them slowly and in a controlled way. If you are having difficulty with any exercise, stop that exercise and talk with your therapist or doctor.

Strengthen Leg

1. Lie on your back and tighten your muscle on the top of your thigh
2. Add a rolled up towel under your knee
3. Straighten the knee by lifting your foot off the bed
4. Hold for ____ seconds
5. Repeat ____ times, on both legs



Slide Leg Sideways

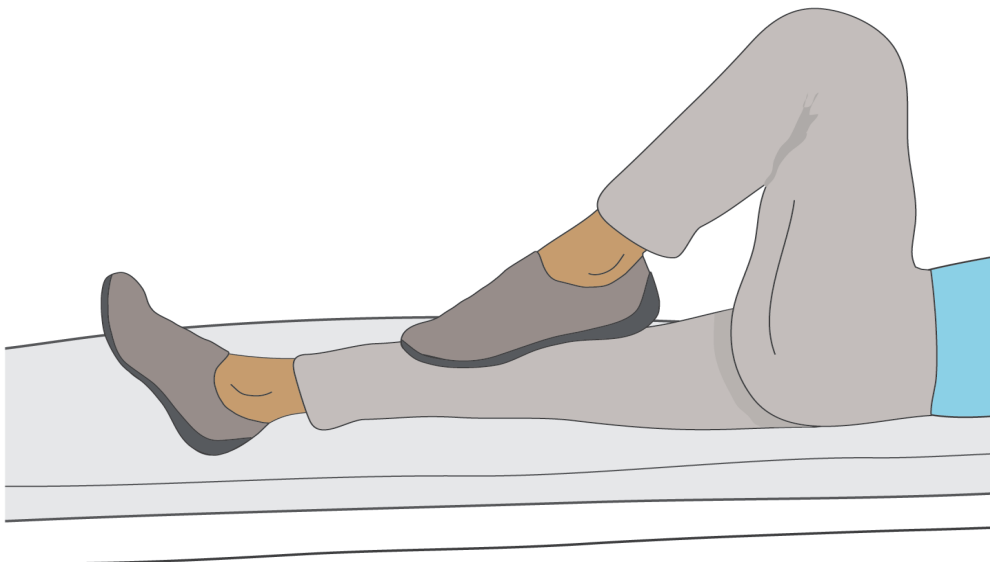


1. Lie on your back with your legs straight
2. Pull your stomach up and in, as if to tuck it under your ribs
3. Slide one leg out to the side, keeping the other in a straight line. Make sure your knee, foot and toes are pointed directly to the ceiling
4. Repeat ____ times on both legs

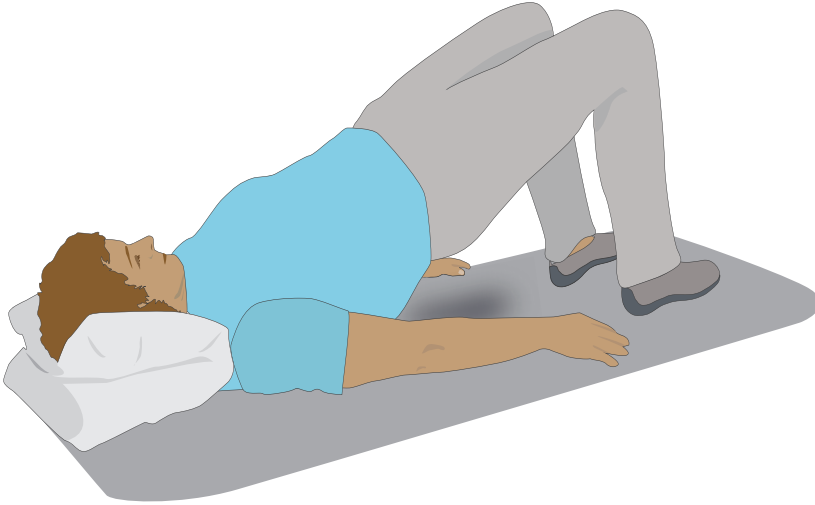
Bend Hip and Knee

1. Lie on your back
2. Pull your stomach up and in, as if to tuck it under your ribs
3. Bend your knee by sliding your heel toward your buttocks as far as you can
4. Repeat ____ times

Note: Check with your therapist if it is safe to bend your hip past a right angle.



Bridging



1. Lie on your back with your arm by your side
2. Bend your knees, placing your feet firmly on the surface
3. Tighten your tummy and buttock muscles, and lift your hips upwards
4. Hold this position for _____ seconds

Home Exercises: The Best Medicine

Adapted from Dr. V. Scott, *Primary Care Fall Prevention: Home Activity Program*

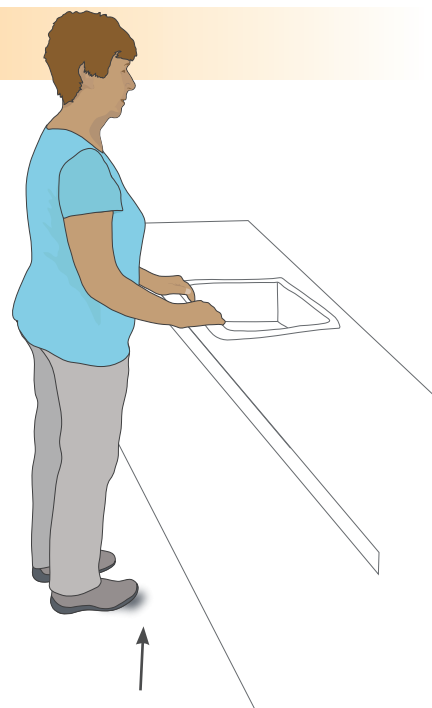
You should only do the exercises you feel safe and comfortable doing. Continue to do the bed exercises you learned in the hospital. Start slowly. Try a few in the morning, afternoon, and evening, rather than trying to do all at once. Begin with one or two activities at a time. If you are having difficulty with a particular exercise, stop that exercise and talk with your therapist or doctor.

Please note: Make sure to check with a physiotherapist or doctor before you start these exercises, as some may not be suitable for you (they may “check” the exercises you should do).

Slow Toe Taps

Note: May also be done in sitting position

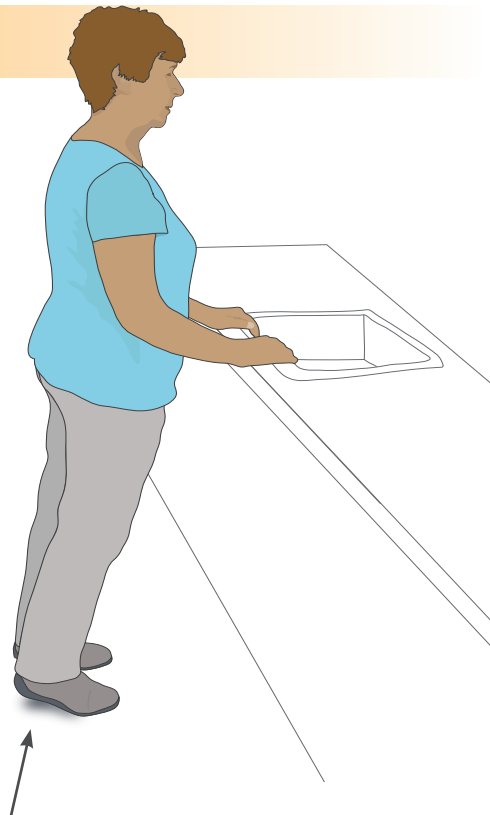
1. Stand facing the kitchen sink. Hold on with both hands
2. Keep heel on floor and lift toes up. Hold. Relax
3. Slowly repeat on the other foot
4. Alternate, repeating 3 – 5 times with each foot
5. Gradually increase until you can do this for 2 minutes



Up on Toes

Note: May also be done in sitting position.

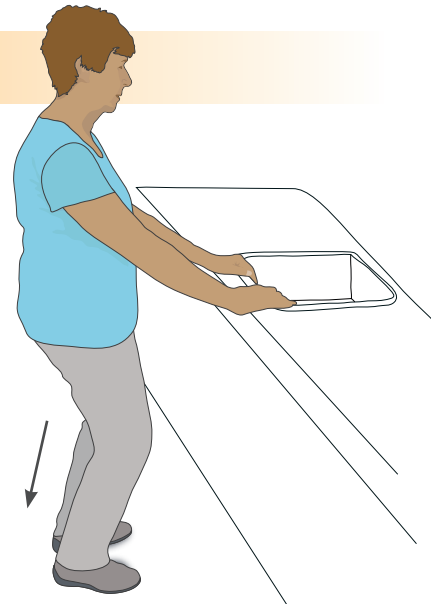
1. Stand facing the kitchen sink. Hold on with both hands
2. Go up on toes with both feet
3. Come down slowly
4. Repeat 3 – 5 times if you can
5. Gradually add one more time every few days until you can do this 15 times



Mini Squats

Note: Small squats only. DO NOT bend too far

1. Stand facing the sink with your feet hip-width apart. Hold on with both hands
2. Bend knees slightly. Keep your heels on the floor
3. Remember, DO NOT bend too far—a small squat only
4. Hold for a few seconds if you can. Straighten up. Repeat 3 – 5 times
5. Gradually do one more every few days or week until you can do 15

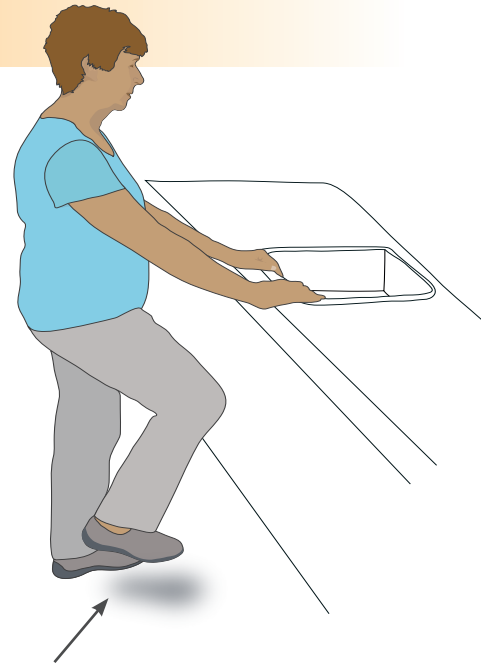


Walking on the Spot

Note: May also be done in sitting position

1. Stand facing the kitchen sink. Hold on with both hands
2. Walk slowly on the spot for 10 seconds
3. Gradually increase your time up to 2 minutes

Progression: Begin walking in your home for 3 – 4 minutes without stopping. Use any mobility aid that you normally use for walking. Every third or fourth day, gradually increase the time spent walking by one minute.



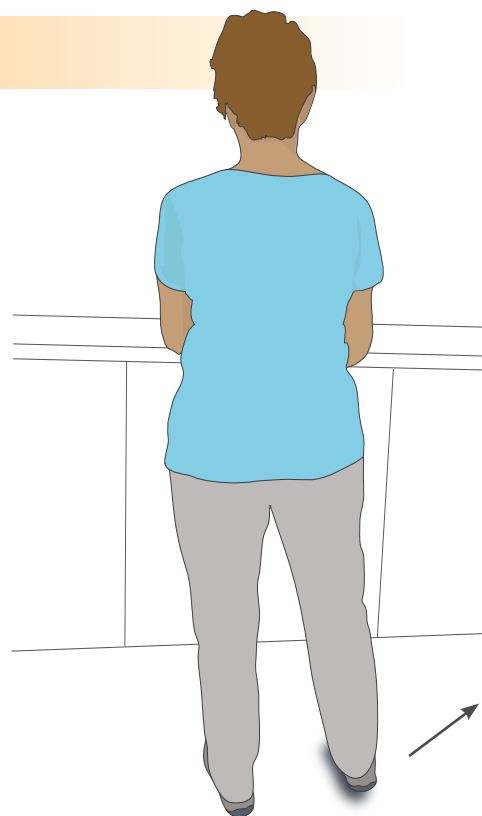
Knee Bends

1. Stand facing the back of a chair, holding on for balance
2. Slowly bend one knee as far as you comfortably can
3. Hold this position for ____ seconds
4. Repeat ____ times



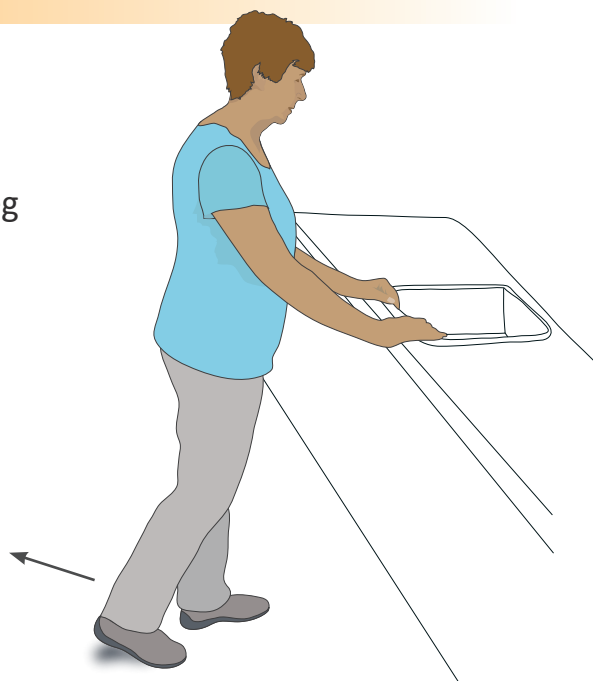
Alternate Leg Out and In

1. Stand facing the sink. Hold on with both hands
2. Keeping your toes pointed forward, not sideways, lift leg out to the side
3. Hold position for a few seconds, then slowly lower leg
4. Repeat with other leg. Continue to alternate each leg, repeating 3 – 5 times each
5. Gradually do one more every few days or week until you can do 15 on each leg



Alternate Leg Behind

1. Stand facing the sink. Hold on with both hands
2. Lift one leg behind you, keeping knee straight
3. Return to starting position. Repeat with other leg
4. Continue to alternate each leg, repeating 3 – 5 times with each
5. Gradually do one more every few days or week until you can do 15 on each leg



As you get stronger over time, gradually decrease the amount of support through your hands. Try using one hand plus a few fingers from the other hand, then progress to a few fingers from each hand, then a few fingers from one hand for support. Eventually consider trying with hands just hovering over the sink.

Knee Strengthening

1. Sit comfortably in a chair
2. Slowly extend one leg until your knee is completely straight
3. Flex your foot, pointing your toes toward your head
4. Hold this position for ____ seconds
5. Slowly lower leg back down
6. Repeat ____ times on both legs



Sit To Stand

1. Sit in a firm chair with arm rests. If needed, position your walker in front of you and lock the brakes
2. Bring your bottom a little closer to the front of the chair if needed
3. Bring your feet in close to the chair. Put hands on armrests if needed
4. Lean forward and stand up
5. Stand tall for a few seconds, holding onto walker if needed for support
6. Reach back and hold the armrests of the chair
7. Lean forward and slowly lower yourself to sit down
8. Stand up and sit down 3 – 5 times
9. Gradually do one more every few days or week until you can do 15 at a time



Progression: Gradually try to decrease the amount of support through your hands until you can stand up and sit down without using your arms.

Stairs: Lead with the **non-operated leg going up** and the **operated leg going down**.

Resources

HOME & COMMUNITY SUPPORT

Depending on what you need, support to help you manage at home is available and may be paid for by the government or paid for by you. If you need nursing care, meals, or a home-based exercise program, your health care team will work with you to find suitable help.

If you are having difficulty managing at home, speak to: _____

HEALTH INFORMATION

Health Link BC

Dial 8-1-1 or website healthlinkbc.ca. Health Link BC is a 24-hour free service in the province where you can dial 8-1-1 to speak to a nurse, dietician, pharmacist. They will provide you with personal advice on your health, diet, exercise, stopping smoking or concerns about alcohol use. There is a wealth of helpful information on their website, go to healthlinkbc.ca.

Seniors Health Care Support Line

Call 1-877-952-3181 if you need help getting health care services or if you have concerns about the care you are getting.

Canadian Orthopedic Foundation

Website: www.whenithurtstomove.org

Osteoporosis Canada

Website: www.osteoporosis.ca

COMMUNITY EXERCISE

There are many exercise classes designed for people with walking limitations and designed to increase range of motion and muscle strength. Some examples of balance and strength programs in your community include "Steady Feet", "Get Up and Go", Tai Chi, or Osteofit.

General information on how to access a physiotherapist can be located under 'Find a Physio' at the Physiotherapist Association of BC website (www.bcphysio.org).

OTHER SERVICES

Personal Medical Alert Systems

You can wear a personal alert and simply push a button to contact medical responders if you fall or have any medical emergency. Ask your health care team about available options.

Health Equipment Loan Program

The Canadian Red Cross loans mobility aids such as walkers, bath seats, commodes, canes, etc.

Seniors Abuse & Information Line

Dial 604-437-1940 or toll free 1-866-437-1940 to report or talk about abuse or mistreatment.

FReSH Start Hip Fracture Tool Kit Project Team

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Copies of the FReSH Start manual can be obtained
from freshstart@hiphealth.ca.
Videos can be found at www.vimeo.com/channels/freshstart

The information in this document is intended solely for the person
to whom it was given by the health care team.
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