

Mobilisation log

Bedside chart. The patient or family ticks each session. Unmeasured mobilisation does not happen.

Patient	Bed	Operation	Date of surgery	Target
				≥3 hours out of bed per day from POD 1

Day	Morning (sit / walk)	Midday (sit / walk)	Afternoon (sit / walk)	Evening (sit / walk)	Total hours out of bed	Target met?	If not — why?
POD 0 (evening)	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 1	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 2	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 3	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 4	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 5	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 6	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	
POD 7	☐ ___ min	☐ ___ min	☐ ___ min	☐ ___ min	___ h	☐ Yes ☐ No	

Safe first mobilisation — in this order

1	2	3	4	5	6	7
Check analgesia is adequate and recently given	Check BP and heart rate, lying	Sit on the edge of the bed and pause	Re-check BP sitting; ask about dizziness	Stand with support, pause, check tolerance	Walk a short agreed distance with help	Sit in the chair and record the time out of bed

If the patient will not get up, do not write “refused”. That is a description, not an assessment — and it is the least useful sentence in a set of surgical notes. Find the cause: pain, hypotension, dizziness, nausea, a tube, the drip, fear, or simply that nobody has asked them. Almost every refusal has a treatable cause, and the commonest is uncontrolled pain.