

**FRACTURED HIP  
COMMUNITY CARE STAGE  
CLIENT PATHWAY**

| CATEGORY           | ADMISSION   | GOALS AT DISCHARGE  |
|--------------------|---|---|
| <b>EDUCATION</b>   | We will begin education on any topics you are unclear about for caring for your fractured hip. Feel free to ask any questions you have.   | It is hoped that you clearly understand all you need to know to care for yourself and your fractured hip. If you have any questions at all, feel free to ask the health care provider.        |
| <b>PAIN</b>        | We will assess your pain levels and help you to manage it. Please tell your health care provider if you have any pain.  | We hope your pain is improved or controlled and you are able to go about your daily activities.   |
| <b>STRENGTH</b>    | We will assess your strength and start some strengthening exercises.  | We hope your strength has improved to allow you to do your daily activities.  |
| <b>SWELLING</b>    | We will assess your swelling and help you to manage it.   | We hope your swelling is improved and does not affect your daily activities.  |
| <b>ACTIVITY</b>    | You may have driving restrictions. We will explain these to you. We will help you to be able to move around your house safely. If you require any aids or equipment to help you with your daily activities, these will be arranged. | You should be able to move around the house safely, and have any necessary aids or equipment that you require.  |
| <b>EXERCISES</b>   | We will be teaching you how to do your exercises at home. Be sure to follow the instructions you are given.   | You should be able to do your exercises independently or with help from family or a friend.   |
| <b>HOME SAFETY</b> | See Home Safety Checklist in Patient Education Booklet entitled "Working Together to Prevent Falls".  | It is hoped that you clearly understand all you need to know to safely care for yourself and your fractured hip. If you have any questions at all, feel free to ask the health care provider. |

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