Hip Replacement

A Personal Daily Recovery Log

Medicines, activity, pain, sleep and night-time toilet visits – a page for every day, Day 0 to Day 84

A simple daily record of your recovery, for you and your care team.

Marty Jones

Hip Replacement
A Personal Daily Recovery Log

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Important: this book is a personal record-keeping aid. It is not medical advice and does not replace the advice of your surgeon, physiotherapist, GP, nurse or pharmacist. Always follow the instructions of your own care team and the directions on your medicine labels.

If you are worried about your recovery, contact your hospital team or GP. In the UK you can also call NHS 111. In an emergency, call 999.

Designed from the daily log the author kept after their own hip replacement.

Independently published.

How to use this log

Name _____

Details of your operation go on the Day 0 page

WHY KEEP A LOG?

Recovery happens in small steps that are easy to forget. A few lines a day show you how far you've come, help you spot patterns (pain, sleep, medicines) and give your physio, nurse or GP a clear picture at appointments.

HOW LONG WILL I NEED IT?

Many people are back to most everyday activities within 6 to 8 weeks. I hope that's true for you. But full recovery can take several months, so this log gives you 12 weeks of daily pages: use as many as you need.

FILLING IN A DAILY PAGE

- **Day 0 is the day of your operation.** Use the Day 0 page for your admission and surgery. Day 1, the day after, is when your recovery starts, even if you spend more nights in hospital.
- **Starting later?** Turn to the right day, then circle the weekday and add the date.
- **In the morning:** fill in Overnight while you remember it.
- **Through the day:** note medicines and each activity session as you go.
- **In the evening:** pain, bowels, washing, walking aid and a note or two.
- Leave anything blank that doesn't apply. Two minutes is plenty.

PAIN SCORES (0–10)

0 No pain	**1–3** Mild, can ignore it	**4–6** Moderate, gets in the way	**7–10** Severe, hard to do anything

On the daily pages, mark a cross on the line – between numbers is fine.

WHAT'S IN THIS BOOK

- My medicines and useful numbers
- Wound care and milestones
- Day 0: your operation, hospital stay and care team
- 12 weeks of daily pages, with a weekly review after each week
- Appointment pages for questions and answers

A personal record, not medical advice. Follow the instructions from your own surgical team.

My medicines

Give each medicine a short code, then use the codes on your daily pages. It keeps the record quick to fill in and easy to read back to a nurse, GP or physio.

Code	Medicine	Strength	Usual dose	What it's for
P	*Paracetamol*	*500 mg*	*2 tablets*	*Pain*

The first row is an example. Always follow the dose on your prescription label.

USEFUL NUMBERS

Ward / hospital	
Physiotherapist	
GP surgery	
Surgeon's secretary	
Pharmacy	

This log is a personal record to help you and your care team. It is not medical advice. If you are worried about pain, swelling, a wound or a fever, contact your hospital team or call NHS 111.

Wound care

Your wound is usually checked once, when the dressing comes off. Many people need nothing more. If yours needs further care, record each visit in the table below.

FIRST INSPECTION

Date _____ Day of recovery _____

Where ☐ Home ☐ GP surgery ☐ Hospital clinic

Seen by _____

Stitches or clips ☐ Removed ☐ None ☐ Not yet

Outcome

☐ Clean and healing well – no further action

☐ Further care needed – see below

_____

FURTHER CARE

Date	Day	What was done	Who / where	Outcome / next step

Contact your nurse or GP, or call NHS 111, if the wound becomes red, hot, swollen or smelly, starts leaking, or you feel feverish.

Milestones

Write in the day and date when you first manage each one. Everyone's order is different, and some depend on what your surgeon allows. Add your own at the bottom.

First time I…	Day	Date
Got home from hospital		
Had a shower		
Put some weight on the new hip		
Went upstairs without a stick		
Slept well through most of the night		
Stopped the stronger painkillers		
Walked with one stick		
Walked a short way with no stick		
Walked outside to the end of the road		
Went out in the car (as a passenger)		
Went round the shops		
Put my own socks and shoes on		
Drove again (when cleared)		
Went back to a hobby or outing		

Day 0 Operation day

(M) (T) (W) (T) (F) (S) (S) Date _____

IN HOSPITAL

Hip replaced ☐ Left ☐ Right This is my ☐ First hip ☐ Second hip

Hospital _____

Ward _____ Bed number _____

Time admitted _____ Time to theatre _____ Time back on ward _____

Anaesthetic ☐ Spinal block ☐ General ☐ Other _____

MY CARE TEAM

Names are easy to forget – jot them down

Consultant / surgeon	
Anaesthetist	
Nurses	
Healthcare assistants	
Pharmacist	
Catering	
Physio	
Radiologist	
Domestic / cleaning	

Add here any further personnel met in hospital on days until discharge

Discharged Date _____ Day of recovery _____

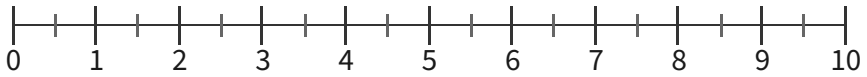
Day 1 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

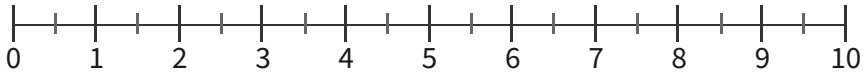
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 2 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

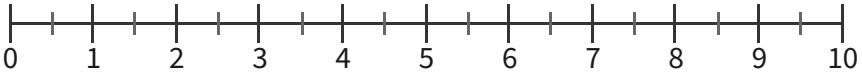
Day 3 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

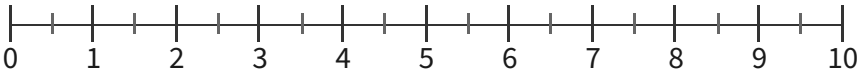
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

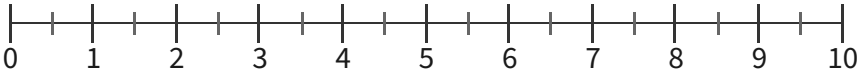
Day 4 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

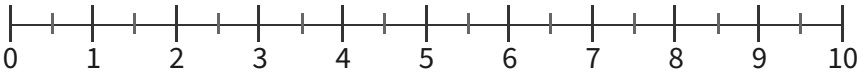
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

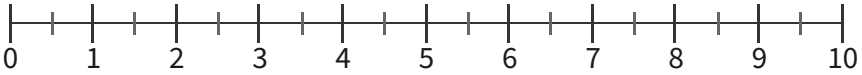
Day 5 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

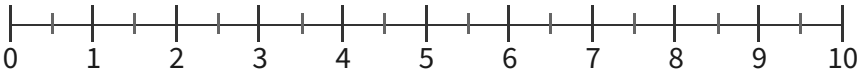
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

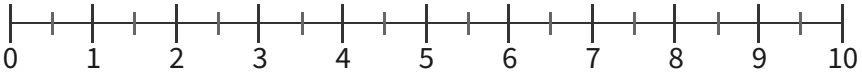
Day 6 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

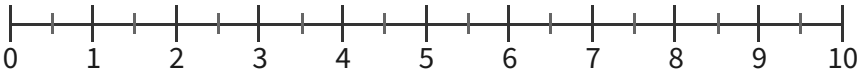
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

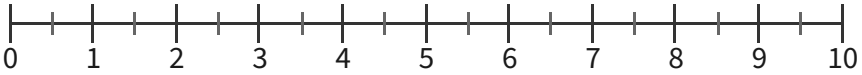
Day 7 Week 1

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

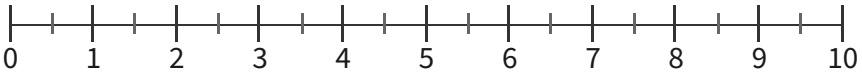
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 1 review

Days 1 to 7

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
1						
2						
3						
4						
5						
6						
7						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

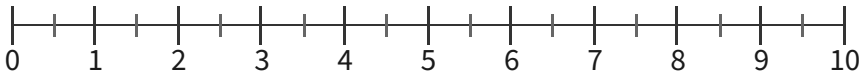
Day 8 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

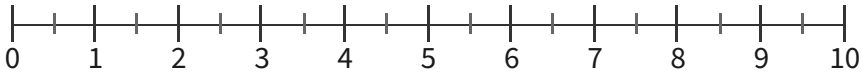
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 9 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 10 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 11 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

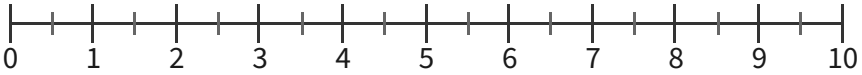
Day 12 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

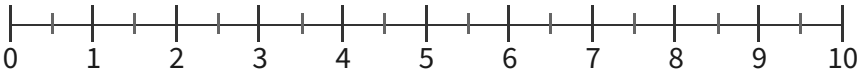
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

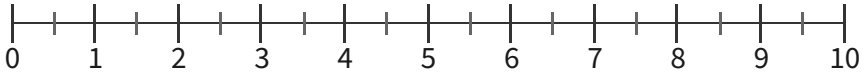
Day 13 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

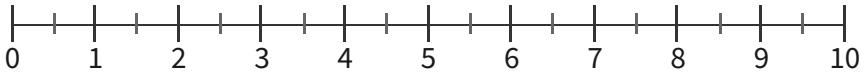
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 14 Week 2

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 2 review

Days 8 to 14

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
8						
9						
10						
11						
12						
13						
14						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

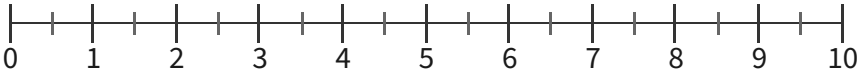
Day 15 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

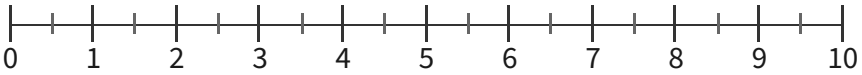
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

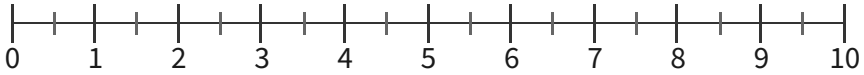
Day 16 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

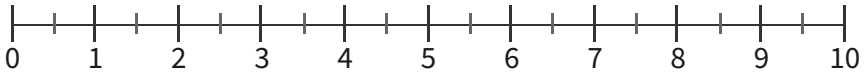
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 17 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

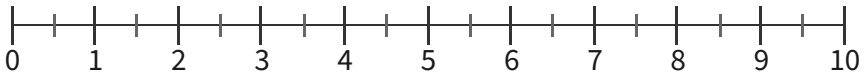
Day 18 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

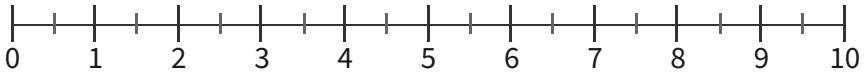
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

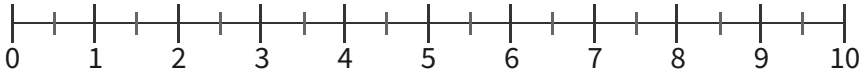
Day 19 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

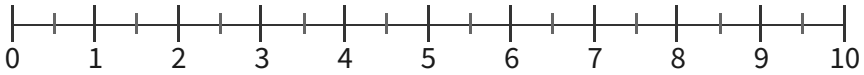
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

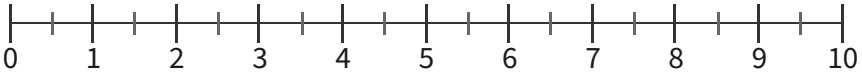
Day 20 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

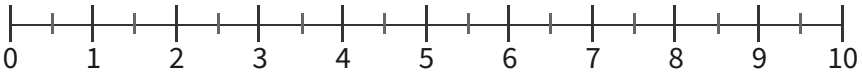
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 21 Week 3

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 3 review

Days 15 to 21

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
15						
16						
17						
18						
19						
20						
21						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Day 22 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 23 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 24 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 25 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 26 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 27 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 28 Week 4

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 4 review

Days 22 to 28

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
22						
23						
24						
25						
26						
27						
28						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

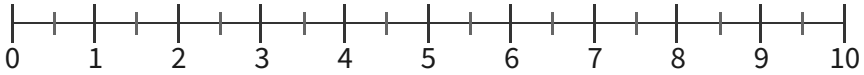
Day 29 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

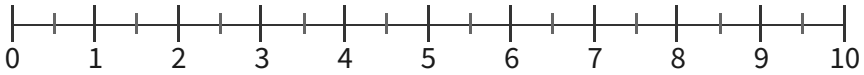
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

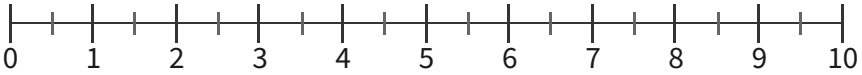
Day 30 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

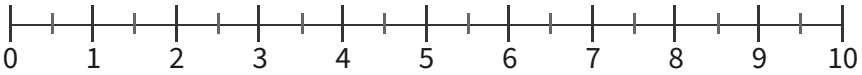
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 31 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 32 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 33 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 34 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 35 Week 5

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 5 review

Days 29 to 35

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
29						
30						
31						
32						
33						
34						
35						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Day 36 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 37 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 38 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 39 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

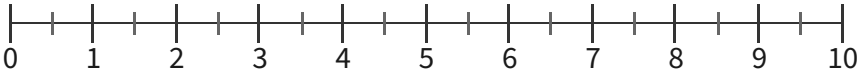
Day 40 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

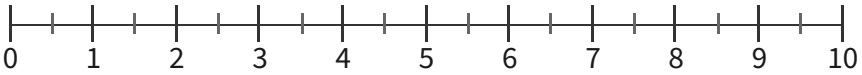
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

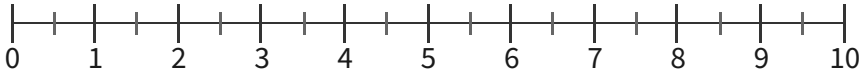
Day 41 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

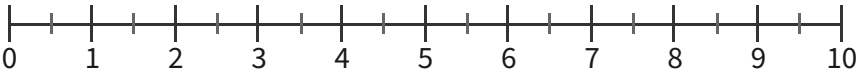
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

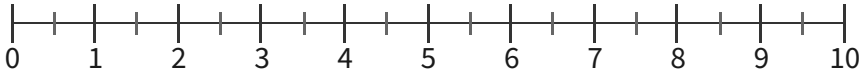
Day 42 Week 6

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

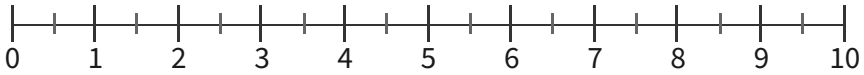
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 6 review

Days 36 to 42

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
36						
37						
38						
39						
40						
41						
42						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Day 43 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 44 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

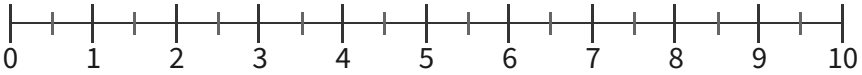
Day 45 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

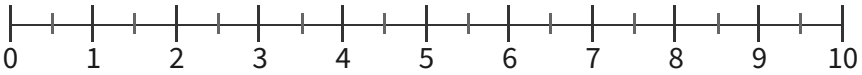
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

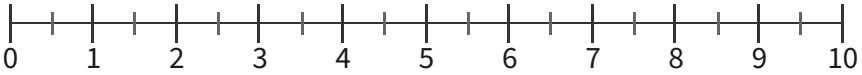
Day 46 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

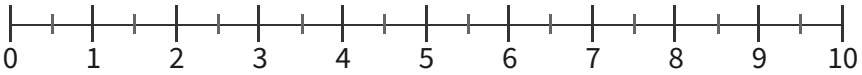
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 47 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

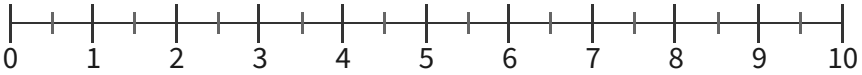
Day 48 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

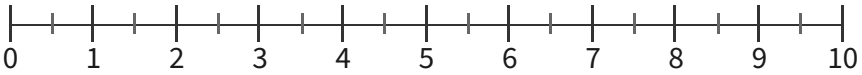
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

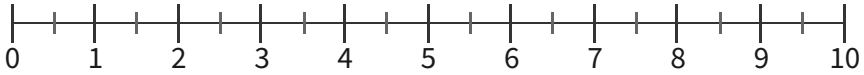
Day 49 Week 7

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

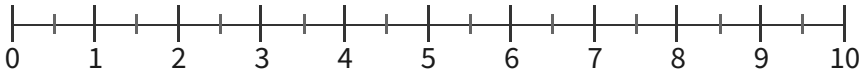
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 7 review

Days 43 to 49

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
43						
44						
45						
46						
47						
48						
49						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

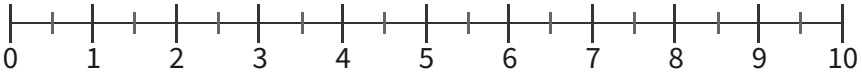
Day 50 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

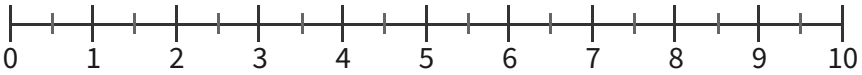
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

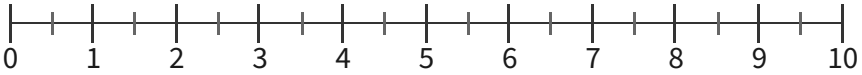
Day 51 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

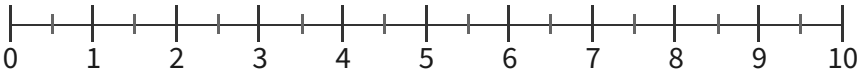
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 52 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

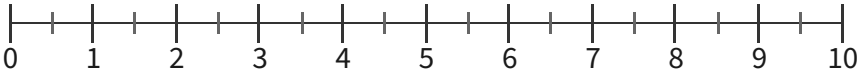
Day 53 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

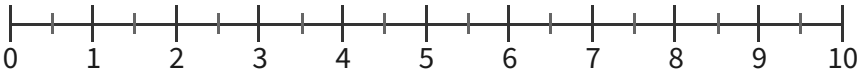
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

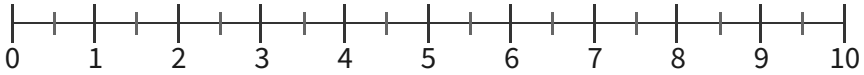
Day 54 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

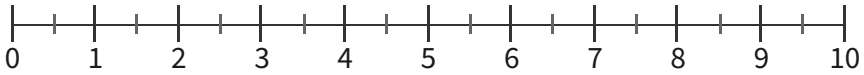
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

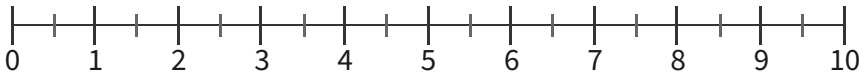
Day 55 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

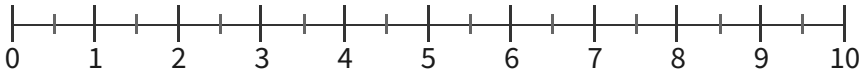
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 56 Week 8

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 8 review

Days 50 to 56

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
50						
51						
52						
53						
54						
55						
56						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

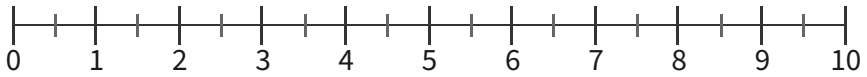
Day 57 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

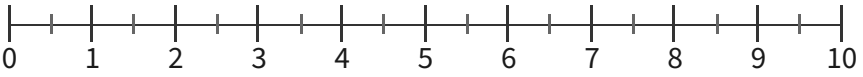
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 58 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 59 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

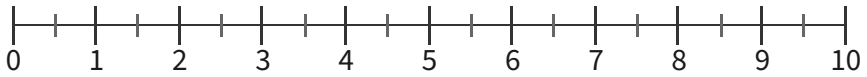
Day 60 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

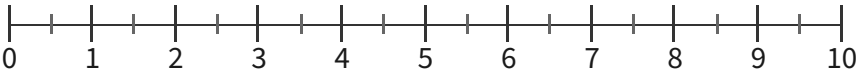
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 61 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 62 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 63 Week 9

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 9 review

Days 57 to 63

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
57						
58						
59						
60						
61						
62						
63						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

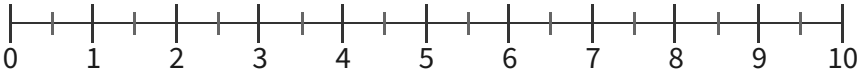
Day 64 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

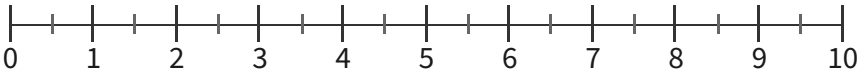
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 65 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 66 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 67 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 68 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

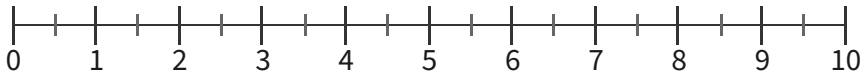
Day 69 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

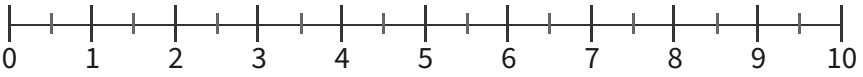
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 70 Week 10

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 10 review

Days 64 to 70

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
64						
65						
66						
67						
68						
69						
70						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Day 71 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

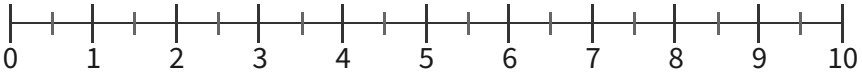
Day 72 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

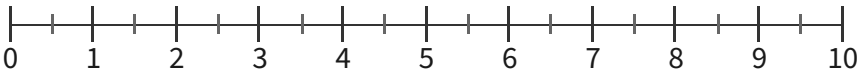
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 73 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

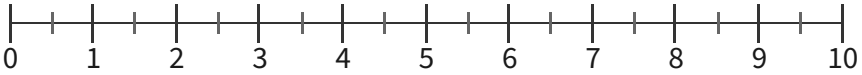
Day 74 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

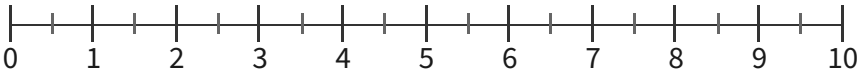
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 75 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

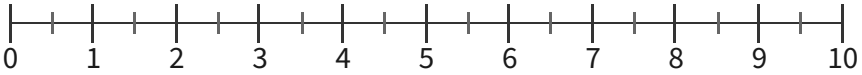
Day 76 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

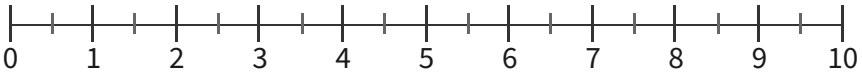
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

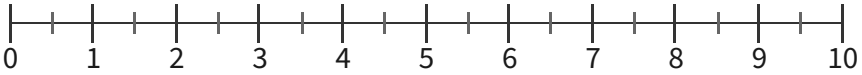
Day 77 Week 11

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

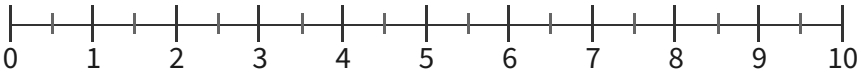
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 11 review

Days 71 to 77

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
71						
72						
73						
74						
75						
76						
77						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Day 78 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 79 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

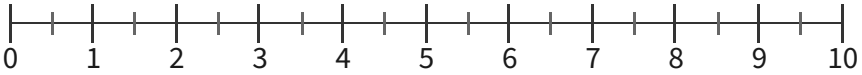
Day 80 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

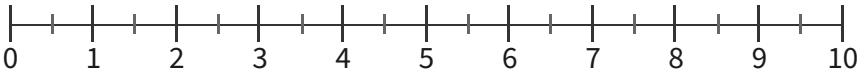
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

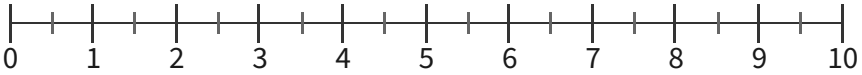
Day 81 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

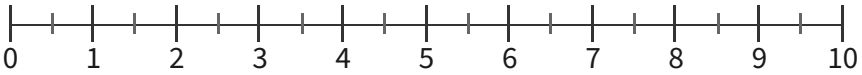
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

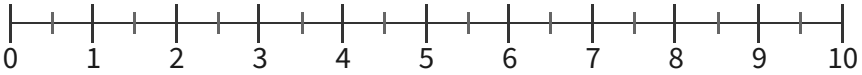
Day 82 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight



MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

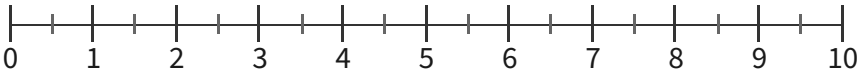
ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain
(mark best and worst)



Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 83 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Day 84 Week 12

(M) (T) (W) (T) (F) (S) (S) Date _____

OVERNIGHT

Toilet visits ◯ ◯ ◯ ◯ ◯ ◯ Sleep ☐ Good ☐ Broken ☐ Poor

Pain overnight 0 1 2 3 4 5 6 7 8 9 10

MEDICINES

Use your codes from the medicines page, e.g. 2×P, 1×C

When	Taken	Time
Morning		
Lunch		
Teatime		
Night		
Extra		

ACTIVITY SESSIONS

Tick what you did in each session

Time	Standing physio	Walking (dist/mins)	Stairs	Chair	Other

DURING THE DAY

Pain (mark best and worst) 0 1 2 3 4 5 6 7 8 9 10

Bowel movements (0) (1) (2) (3+) Ice pack ◯ ◯ ◯

Washed ☐ Shower ☐ Strip wash ☐ Not today

Walking aid ☐ Frame ☐ 2 sticks ☐ 1 stick ☐ None

NOTES & SMALL WINS

e.g. upstairs without a stick, first shower, anything to tell the physio

Week 12 review

Days 78 to 84

THE WEEK AT A GLANCE

Copy across from your daily pages

Day	Toilet visits	Pain best	Pain worst	Activity sessions	Bowel moves	Walking aid
78						
79						
80						
81						
82						
83						
84						

COMPARED WITH LAST WEEK

	Better	Same	Worse
Pain	☐	☐	☐
Sleep	☐	☐	☐
Walking	☐	☐	☐
Getting about the house	☐	☐	☐
Confidence	☐	☐	☐

THIS WEEK I MANAGED TO...

WORRIES OR QUESTIONS

GOAL FOR NEXT WEEK

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Appointment

Date _____ Day of recovery _____

With ☐ Physio ☐ Surgeon / clinic ☐ GP ☐ Nurse

Where _____

QUESTIONS TO ASK

1.

2.

3.

4.

5.

WHAT I WAS TOLD

CHANGES TO EXERCISES OR MEDICINES

Next appointment _____

Notes