

Your first walk

Your first walk is a few steps with someone beside you — and it is the real beginning of recovery, not a test.

In hospital

Educational draft. Clinical review pending. Quotations retained from the original text are not verified member testimonials.

Your first walk is a few steps — from the bed to the chair, or a short loop of the room — with a nurse or physiotherapist beside you, and it marks the real beginning of your recovery.

It sounds small, and it is the opposite of small. Walking gets the blood moving, opens the lungs, wakes the bowels and lifts the mood. It is the closest thing to a free medicine in the whole recovery, and your team will push you towards it gently but firmly.

What it actually looks like

- The wires and drips come with you, hanging from a pole on wheels. You will feel like you are walking a small machine.
- You will be weak, dizzy and out of breath within a few steps. That is your body telling the truth, not a failure.
- You may need to sit down after three or four steps. Good. That is the whole point — sitting is part of the walk.
- Your heart will beat harder than you expect. Also normal, and also part of the design.
- Someone is always with you. You are never walking alone, however wobbly you feel.

Most people are surprised by two things: how hard the first ten steps are, and how much better they feel an hour later. The first walk is not a test. There is no pass or fail, no distance to reach — the goal is simply that it happens.

The day after, and the day after that

Each day the walk gets a little longer — to the door, then into the corridor, then a loop. The team sets the distance, not you pushing yourself. By the time you leave hospital, most people walk the corridor several times a day — which sounded impossible on day one.

“I made it to the door and back and cried — not from pain, from relief. My nurse said ‘good, now again this afternoon.’ I hated her for exactly two minutes. She was right.”

What to ask your team

- When will I get up for the first time, and who will be with me?
- How far should I aim for, and how will we increase it day by day?
- What should I do if I feel dizzy or my chest hurts when I walk?

Take it to your team

Ask the team to set your walking plan in steps you can picture — bed to chair today, the door tomorrow. If pain or dizziness gets in the way, tell them: the plan adjusts, it does not stop.

Call for help if

Walking brings severe dizziness, chest pain, or breathlessness that does not settle when you sit and rest. Stop, sit, press the call button — that is exactly what it is for.

The first walk is a beginning, not a test. The distance, the pace and the timing are set by your team — and the decisions about your care belong to you and your team.

Questions to take to my team

- ☐ When will I get up for the first time, and who will be with me?

☐ How far should I aim for, and how will we increase it day by day?

☐ What should I do if I feel dizzy or my chest hurts when I walk?

For discussion and personal reference. Your care team's individual instructions take priority. For an emergency, contact your local emergency service; do not wait for a community reply.