Why Early Ambulation is Important:
◊ Prolonged immobilization increases the risk of pulmonary complications, insulin resistance and muscle weakness.
◊ Early mobilization coupled with other ERP interventions has demonstrated improved outcomes for patients by reducing the incidence of postoperative complications and hospital length of stays.
◊ Early ambulation optimizes the patient’s ability to quickly return to pre-surgery/baseline functioning

Nursing Considerations:
◊ Preoperative Nursing Considerations (surgeon’s office, preadmission testing, and preop staff): Provide education to the patient (and family) regarding the benefits of early ambulation. Inform the patient and family that they should anticipate (and even initiate) ambulation beginning the day of surgery and every day thereafter through hospital discharge. Provide motivation and reassurance that staff will be available to assist with ambulation and will be working with the patient to make sure that pain and nausea/vomiting are well-controlled.
◊ Postoperative Nursing Considerations:
  - Prior to getting the patient out of bed for the first time, assess for postoperative nausea & vomiting (PONV) and pain at least 30” prior.
  - Keep in mind that motion can trigger PONV, so you will need to medicate accordingly—make sure the order is written well in advance. There is a higher risk for PONV based on existing risk factors and surgery factors. Additionally, if the patient received a rescue antiemetic in PACU there is a strong likelihood that they could develop PONV on the floor.
  - Be aware of any activity restrictions/limitations set by the physician.
  - Patients may not be able to ambulate with the first attempts. Provide reassurance and encouragement--sitting up (dangling) is progress, and part of early ambulation.

<table>
<thead>
<tr>
<th>General guidelines for early mobilization</th>
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<tbody>
<tr>
<td>POD 0:</td>
<td>2h (total time out of bed)</td>
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<tr>
<td>POD 1 through discharge from hospital:</td>
<td>6h (total time out of bed)</td>
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◊ Mobilizing the patient is a progressive activity. Though the nurse is often busy with other ‘more acute’ patient care responsibilities, in the long run, taking the time to help patients get mobile soon after surgery will prove to be an intervention that improves care efficiency by promoting the return of self-care and independence.

Helpful Hints:
- Involve physical therapy and occupational therapy in developing early ambulation strategies within the inpatient unit
- Measuring and marking distances within the unit (hallways) is a way to quantify ambulation for documentation purposes. Additionally, it assists with goal-setting and evaluation of progress for the patient.
- Include family members in promoting and facilitating early ambulation.