

OrthoBethesda Therapy Services

Getting Around Safely With Your Cane

Set Up and Fitting:

- Standing straight with your arm at your side, the cane handle should align with the inside of your wrist.
 - Most canes are adjustable, but if your cane is wooden it will need to be sawed off.



General Instructions and Tips:

- Hold your cane as instructed by the physician or therapist.
 - The cane is typically held on the non-surgical/non-injured side to provide support to the surgical/injured leg while walking.
- Use your cane for all walking and standing activities until your physician instructs you otherwise.
- Walk slowly and carefully.
- Have someone walk with you initially until you feel steady on your feet.
 - This is especially important when walking on unlevel/uneven surfaces or stairs.
- Remove loose rugs or other small objects from the floor in order to minimize the risk of tripping.
- Wear appropriately-fitted, low-heeled shoes. Do not wear slippers or high heels.
- Do not wear long, floor-length robes or gowns while using your cane.
- Avoid slippery and/or wet floors.
- Check the ground for objects that may cause your cane to slip out from under you.
- Check the cane daily for cracks and/or loose screws. Replace worn tips and unsafe parts.

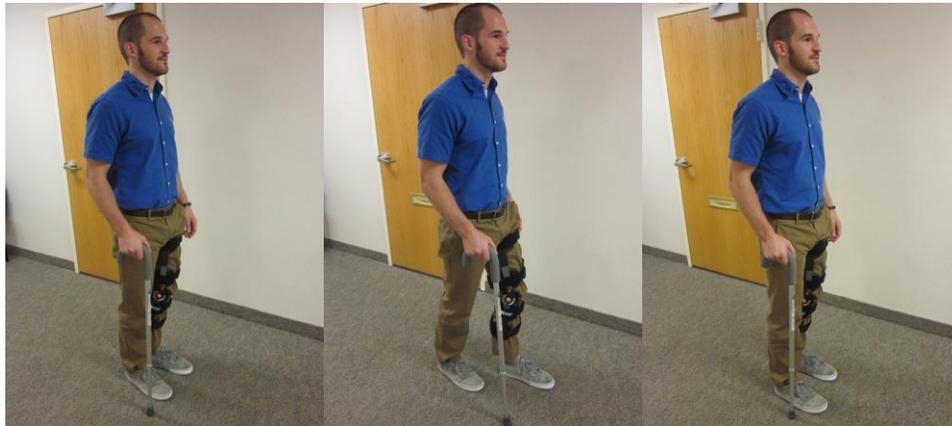
Walking:

Option 1: (slower, more support)

1. Start with the cane positioned 1-2 inches to the outside of your foot, on your non-surgical/non-injured side.
2. Advance the cane 6-12 inches in front of you.
3. Step your surgical/injured leg forward to meet the cane.
4. Step your non-surgical/non-injured leg forward, just in front of the cane.



You may combine the first two steps if you feel comfortable: Advance your non-surgical/non-injured leg and cane forward at the same time.



Option 2: (faster, less support)

1. Start with the cane positioned 1-2 inches to the outside of your foot, on your non-surgical/non-injured side.
2. Advance the cane and surgical/injured leg forward 6-12 inches at the same time.
3. Step your non-surgical/non-injured leg forward, in front of the cane and surgical/injured leg.



Standing Up:

1. Scoot forward in the chair to make it easier to stand.
2. Hold the cane in your hand, on the side of the non-surgical/non-injured leg.
3. Place both feet flat on the ground and place both hands on the armrests (or seat) of the chair.
4. Lean forward at your hips, tighten your core muscles and then push down through both hands and both legs in order to stand.



Sitting Down:

1. Position yourself so that the backs of your legs are touching the chair.
2. Hold the cane in your hand, on the side of your non-surgical/non-injured leg.
3. Reach back with both hands until you feel the armrest (or seat) of the chair.
4. Slowly lower yourself into the chair.



Going Up Steps/Curbs:

1. If there is a sturdy handrail, hold onto it. Use your cane on the opposite side of the handrail.
2. Stand close to the surface you intend to go up.
3. Step your non-surgical/non-injured leg up first.
4. Advance the cane up to meet your non-surgical/non-injured leg.
5. Lift your surgical/injured leg up onto the step.
6. If going up multiple steps, repeat this pattern until you have reached the top.



Going Down Steps/Curbs:

1. If there is a sturdy handrail, hold onto it. Use your cane on the opposite side of the handrail.
2. Stand close to the edge of the surface you intend to go down.
3. Lower the cane down to the step below.
4. Bring down your surgical/injured leg first, followed by your non-surgical/non-injured leg.
5. If going down multiple steps, repeat this pattern until you have reached the bottom.

