

Bedstick

A guide for patients and their carers

Your occupational therapist is



9231 3850 and pager

Please contact your Occupational Therapist if you have any questions.

This information will help you to:

- set up the bed stick correctly
- reduce the risk of injury when using a bed stick
- safely manage the use of the bed stick at home.

Why do I have a bed stick?

You have been given a bed stick to help you maintain independence. Your bed stick will make it easier to get out of bed. It will also help you to move around in bed.

A family member or friend will need to set up the bedstick for you. Your Occupational Therapist can show your carer how to do this.

Your bed stick

The bed stick used by St Vincent's Hospital is a single bed stick with a safety return. Please check your bed stick matches the pictures below.





It is important that another person checks your bed stick every day using the checklist on the next page.

Daily checklist

It is important to check the position of the bed stick every day. If you answer yes to any of these questions, please follow the instructions on what to do.

Things to check	If the answer is yes, what should I do?
Has the bed stick moved?	Re-position the bed stick so that it is firmly under the mattress.
Has the mattress moved?	Re-position the mattress onto the base. Ensure there is no gap between the mattress and bed stick.
Is there a gap between the bed stick and the mattress?	Re-position the bed stick to reduce the gap between the mattress and bed stick.
Has the medical or physical condition of the person using the bed stick changed?	Remove the bed stick. It is no longer safe to use. Contact your community health care professional for further advice.
For example, are they experiencing: drowsiness 	
- confusion	
 reduced strength in their arms, legs or body 	
 reduced ability to call for assistance or move away from a dangerous position? 	
Do you need to change the type of mattress (e.g. to an air mattress)?	Remove the bed stick. It is no longer safe to use. Contact your community health care professional for further advice.
Is a different bed height being used (e.g. a hospital bed that can be raised and lowered)?	Remove bed stick if the bed is below hip-height of the person. Contact your community health care professional for further advice.
Is the bed in a different position (e.g. does the bed have a reclining backrest that has been moved)?	Do not put the bed stick under the head or reclining area of the bed. Re-position the bed stick so it is beneath the flat section of the bed.