

Nursing Progressive Mobility Chart

- For each position/ activities change allow 5-10 minutes before determining tolerance as prescribed by the ordered parameters for the patient
- If the patient is intolerance of current suggested activities, re-assess and place in appropriate mobility level
- Complete Mobility Screen every day to determine appropriate mobility level and activities



Patient Care Services

START HERE

- Perform Mobility Screen within 24 hours of admission.
- Reassess Mobility Screen daily
- Reassess Mobility Screen if there has been a change in status

Mobility Level Definitions

- Level 1:** Not fully alert, limited to no participation in self-care and mobility activities. Dependent OOB
- Level 2:** Alert, able but limited assistance in self-care, ROM and mobility activities. Dependent OOB
- Level 3:** Alert, able to assist with self-care, ROM and mobility activities. Able to stand / sit pivot OOB
- Level 4:** Alert, able to assist with self-care, ROM and mobility activities. Able to walk with assistance
- Level 5:** Alert, able to complete self-care, ROM and mobility activities safely and independently

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
<p>Goals:</p> <ul style="list-style-type: none"> ↑ Alertness ↑ ADLs participation ↑ ROM participation <p>Activities:</p> <ul style="list-style-type: none"> OOB with dependent technique Weight shift q1 hour, position change q2 hours PROM & stretching 3x day Assist pt with any level suggested activities 	<p>Goals:</p> <ul style="list-style-type: none"> ↑ ADLs participation ↑ ROM participation ↑ Bed mobility activities & sitting tolerance Assist pt with any rehab prescribed program <p>Activities:</p> <ul style="list-style-type: none"> OOB with dependent techniques Weight shift q1 hour, position change q2 hours PROM to AAROM & stretching 3 x day Assist pt with any rehab prescribed program / level suggested activities 	<p>Goals:</p> <ul style="list-style-type: none"> ↑ ADLs progression toward independent ↑ Active ROM ↑ Transfer & standing tolerance Assist pt in any rehab prescribed program <p>Activities:</p> <ul style="list-style-type: none"> OOB with stand / sit pivot transfers Encourage and assist with weight shift q1 hour, position change q2 hours AAROM & AROM 3 x day Assist pt with any rehab prescribed program / level suggested activities 	<p>Goals:</p> <ul style="list-style-type: none"> ↑ ADLS progression towards independence Encourage to complete active ROM ↑ standing & walking tolerance Assist pt with any rehab prescribed program <p>Activities:</p> <ul style="list-style-type: none"> OOB with stand pivot transfer and ambulation Encourage to complete AROM 3 x day Encourage /assist pt with any rehab prescribed program / level suggested activities 	<p>Goals:</p> <ul style="list-style-type: none"> Encourage to complete ADLs Encourage walking <p>Activities:</p> <ul style="list-style-type: none"> Encourage walking Encourage ROM and any other prescribed exercises Encourage to complete AROM x 3 day Encourage any level suggested activities

Rehabilitation Services should be consulted if the patient is

- If the patient (Mobility Level 1) is experiencing the new onset of losing ROM or new onset of hypertonicity that interferes with performing PROM and proper positioning
- If the patient (Mobility Level 2-4) to determine discharge recommendations and progress functional recovery
- If a patient (Mobility Level 5) is not at his /her baseline functional level or if there are discharge concerns related to their functional status

