

VGH ICU Mobility Screening Tool

Medical Safety Concerns: Does the patient have any of the following?

Hemodynamically unstable with frequent titration of vasopressors/ inotropes, cardiac ischemia/new arrhythmia
Patient requiring multiple interventions/diagnostics
Refractory Hypoxemia/hypercapnia despite maximal respiratory support
Neurological concern (Seizures, ICP, vasospasm)
Unstable orthopedic fractures
Acute SCI
ECLS
Open abdomen/sternum
Active bleeding
Tubes/drains/lines with potential to migrate causing adverse events (EVD, transvenous pacer, PA line etc.)

Yes

STOP!

Discuss mobilization goals on rounds with Interdisciplinary team.

No

PT/OT/RT safety Concerns: Does the patient have any of the following?

Orthopedic issues (pelvic, spine #s, long bone #s)
Orthopedic precautions/ Altered weight bearing orders
FMS insitu
Burns
New Amputee
Neuromuscular deficit(s) +/- spasticity
CRRT – initial mobilization
Mech. ventilation & ambulating away from bedside.
ECLS
Poor head/trunk control
Pressure ulcers
Requires special seating etc
Unstable airway

Yes

Mobilize! PT/OT/RN/RT Plan

Connect with PT &/or OT early to identify concerns & establish plan.
Mobilize patient together, document plan, stage achieved, adverse events, update Kardex and bedside communication board.

No

Mobilize! RN Driven: Assess and determine plan

RASS score +1/0/-1
Pain well controlled
Can help boost themselves in bed
Can roll onto one side and maintain side lying position
Is able to sit up at EOB unsupported
Review last mobilization (activity, stage, duration, assist)
Progress to next stage as per mobility pathway.