

Unity Health System

Physical Medicine and Rehab

Function Modifiers

Complete the following specific functional items prior to scoring the FIM Instrument:

	Admission	
29. Bladder Level of Assistance	___	
30. Bladder Frequency of Accidents	___	
7 - No Accidents 6 - No accidents; uses device such as a catheter 5 - One accident in the past 7 days 4 - Two accidents in the past 7 days 3 - Three accidents in the past 7 days 2 - Four accidents in the past 7 days 1 - Five or more accidents in the past 7 days		
31. Bowel Level of Assistance	___	
32. Bowel Frequency of Accidents	___	
7 - No Accidents 6 - No accidents; uses device such as an ostomy 5 - One accident in the past 7 days 4 - Two accidents in the past 7 days 3 - Three accidents in the past 7 days 2 - Four accidents in the past 7 days 1 - Five or more accidents in the past 7 days		

Enter in item 39H (Bowel) the lower (more dependent) score of items 31 and 32 above.

33. Tub Transfer	___
34. Shower Transfer	___

Score items 33 and 34 using FIM levels 1-7; use 0 if activity does not occur. See training manual for scoring of items 39K (Tub/Shower Transfer).

35. Distance walked	___
36. Distance traveled in a wheelchair	___

Code items 35 and 36 using: 3 - 150 feet; 2 - 50 to 149 feet; 1 - less than 50 feet; 0 - activity does not occur.

37. Walk	___
38. Wheelchair	___

Score items 37 and 38 using FIM levels 1 - 7; 0 if activity does not occur. See training manual for scoring of item 39L (Walk/Wheelchair).

Therapy

FIM Instrument:

Day

Self Care

1 2 3 Goal

A. Eating	___	___	___	___
B. Grooming	___	___	___	___
C. Bathing	___	___	___	___
D. Dressing - Upper	___	___	___	___
E. Dressing - Lower	___	___	___	___
F. Toileting	___	___	___	___

Sphincter Control

G. Bladder	___	___	___	___
H. Bowel	___	___	___	___

Transfers

I. Bed, Chair, Wheelchair	___	___	___	___
J. Toilet	___	___	___	___
K. Tub, Shower	___	___	___	___

Locomotion

L. Walk/Wheelchair	___	___	___	___
M. Stairs	___	___	___	___

Communication

N. Comprehension	___	___	___	___
O. Expression	___	___	___	___

Social Cognition

P. Social Interaction	___	___	___	___
Q. Problem Solving	___	___	___	___
R. Memory	___	___	___	___

Signature _____
 Signature _____
 Signature _____
 Signature _____
 Signature _____