

AlphaFIM®

The AlphaFIM® instrument is an Internet-based product that enables clinicians to estimate both a patient's functional independence and the amount of assistance the patient needs to perform daily activities. It provides a consistent method of assessing patient disability and functional status in an acute care hospital. The AlphaFIM® can help obtain expected FIM™ ratings, evaluate expected discharge status, and project expected minutes of care. AlphaFIM® ratings can be used to assign a probable discharge disposition from the acute care setting and can be converted to expected minutes of care, which help staff and family members understand a patient's resource needs for performing activities of daily living.

The AlphaFIM® instrument is administered within the first 72 hours of admission. Additional assessments may be performed throughout the acute hospital stay and prior to discharge. The AlphaFIM® uses only those FIM™ items that can be collected reliably in the acute care setting. The AlphaFIM® can be used on two types of patients:

Patient Type A: A patient who has not been observed to walk at least 150 feet will be rated using the six FIM™ items Eating, Grooming, Bowel Management, Transfers: Toilet, Expression, and Memory.

Patient Type B: A patient who has been observed to walk at least 150 feet will be rated using FIM™ items Locomotion: Walk; Transfers: Bed, Chair; Bowel Management; Transfers: Toilet; Expression; and Memory.

The first type of patient (type A) is markedly disabled, as exemplified by a patient in an acute care hospital, including the intensive care unit. The second type of patient (type B) is a person who has been observed to walk 150 feet, requiring no more walking help than moderate assistance.

The AlphaFIM® instrument helps turn data into valuable information that healthcare professionals can share as a patient is transferred from an acute care hospital to a rehabilitation program.

Barthel Index (BI)

The BI measures the extent to which somebody can function independently and has mobility in their activities of daily living (ADL) i.e. feeding, bathing, grooming, dressing, bowel control, bladder control, toileting, chair transfer, ambulation and stair climbing. The index also indicates the need for assistance in care. The BI is a widely used measure of functional disability. The index was developed for use in rehabilitation patients with stroke and other neuromuscular or musculoskeletal disorders, but may also be used for oncology patients.

Modified Rankin Scale (MRS)

The MRS is a single item, global outcomes rating scale for patients post stroke. It is used to categorize level of functional independence with reference to pre-stroke activities rather than on observed performance of a specific task.

Please see relevant information at either <http://www.rehabmeasures.org> or www.strokengine.ca re the MRS and BI tools.

All three tools listed here, are forms in the Electronic Health Record.