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Functional Independence Measure (FIM)

The FIM is an assessment tool used to evaluate the independence level of a patient and what type of assistance is needed to resume activities of daily living. There are 18 motor and cognitive areas assessed using a 7-point scale to rate the assistance needed. A physician uses direct observation to assess function and then delivers the FIM at the beginning of admission (within 72 hours) and approximately a week before discharge. Along with the level of assistance needed, this assessment is also used to determine the patient's response to rehabilitation. This measurement tool is used in conjunction with most bottom-up approaches, including the Rehabilitation Frame of Reference, Biomechanical Frame of Reference, Rood Frame of Reference, and many more. Areas assessed are listed below:



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Population

Adults with Functional Mobility Impairments

Adult with Functional-chair Mobility Mobile-phone Impaired

The FIM is used for assessing dysfunction and is generally applied to populations experiencing functional mobility impairments, usually between the ages of 18-65+.

 These impairments include stroke, spinal injuries, brain injury, multiple sclerosis, and Parkinson's disease.

Goal

Measure ADLs

Ruler Tools for Daily Living

The FIM measures an individual's level of independence in performing activities of daily living (ADLs), such as grooming, bathing, dressing, eating, and using the restroom, as well as instrumental activities of daily living (IADLs), such as managing finances, shopping, and housekeeping.

Scoring

18-126

(18) ID - 126

The FIM scale ranges from 18 to 126, with higher scores indicating greater functional independence. A score of 18 indicates complete dependence on others for all activities of daily living, while a score of 126 indicates complete independence in all activities.

br>Therefore, if an individual scores lower than 18 on the FIM scale, it indicates that they are completely dependent on others for all activities of daily living. This means that they require assistance with tasks such as bathing, dressing, feeding, and toileting and are unable to perform any of these tasks independently. Such a score indicates a severe level of disability and the need for extensive assistance and care.

7-Point Ordinal Scale

(7) Complete Independence

Lucky (7) Slot-machine with Complete Check-mark Independence-day The patient is fully independent and requires no assistance to complete a functional task.

(6) Modified Independence

(6) Sax with Modified Independence-day The patient requires the use of a device but no physical help.

(5) Supervision

(5) Hand Supervisor

The patient requires only standby assistance or verbal prompting or help with set-up, cueing, and/or coaxing.

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(4) Minimal Assist

(4) Fork Mini Assistant Requiring incidental hands-on help only. The subject performs more than 75% of the task.

(3) Moderate Assist

(3) Tree Moderate-mustard Assistant The patient performs 50–75% of the task.

(2) Maximal Assist

(2) Tutu Maxi-pad Assisstant Patient participation is 25%-49%.

(1) Total Assistance

(1) Wand Too-tall Assistant

Patient participation is less than 25% of the effort, or the patient is unable to do the task. Score 1 if the subject does not perform the activity at all or if no information is available.