Intensive Care Progressive Mobility Guidelines

Goal of Early Mobilization:
Promote mechanical ventilator weaning process
Reduce ICU and Hospital LOS
Prevent physical deconditioning
Prevent Ventilator-Associated Pneumonia (VAP)
Prevent Pressure Ulcers
Maintain/achieve predmission activity level
Enhance Patient physical and psychological well being

Monitor for Physical Therapy / Occupational Therapy Consult:
OT consult on admission, then weekly follow-up evaluation
PT consult when patient is able to cooperate with activity of begins SBT (Spontaneous Breathing Trials)
Document all Mobility on Flow Sheet

Level I Modified Mobility Process
Criteria: Admission to Intensive Care Unit or Progressive Care Unit
• Reposition and Turn Q 2 Hrs
• AROM/PROM
• Splints and / or boots (alternate) for contracture prevention
• HOB @ 30 degrees

Maintain Level I for Pt.’s with:
• > 6 Fr. Arterial Groin Catheter/Line
• Withdrawal of Care within 12 -24 hours
Reassess Q 24 Hours for readiness to progress mobility

Advance mobility using progressive Algorithm Level as Pt. tolerates. Reassess q 12 hours
Exclusion criteria for advancing mobility level:
• Lobar collapse or atelectasis, excessive secretions and/or:
  • FiO₂ > 50% with Peep > 10
• SaO₂ < 90% at rest or < 88% with activity
• Progressively deteriorating neurological status
• Severe orthopaedic problems
• Hemodynamic instability ↓ SaO₂ ↓ BP ↓ HR

Hemodynamic Tolerance
5-10 minutes equilibration time is required with each position change to determine hemodynamic instability

Level II (Include Level I Interventions)
• HOB @ 45° to 65° if hemodynamically stable
• Place legs in dependent position
• Advance to Cardiac Chair
• OOB to Chair with assistive device (2X Daily for 1 hr)
• Time frame for OOB in Chair positioning is ≤ 1 hr

If Pt has large abdomen try a lesser HOB angle when in sitting position

Level III (Include Level I & II Interventions)
• Sit on Side of Bed
• Advance to Standing Position
• Initiate Pivot / Stand to bedside chair @ least 2 X Daily

Level IV (Include Level I, II & III Interventions)
• Independent: OOB, Sit in Chair, Stand, Ambulate