



TEST	DESCRIPTION	PASS RESPONSE	PASS/FAIL
<p>Assessment Level 1</p> <p>Assessment of:</p> <ul style="list-style-type: none"> Sitting balance Upper extremity and core strength Orthostatic response to sitting Ability to follow directions 	<p>Assessment Level 1 – Sit and Shake – verifies hemodynamic stability and sitting balance.</p> <p>Sit and Shake: From semi-reclined or sitting position, ask patient to sit upright for up to 1 minute (as indicated based on concern for orthostatic hypotension or postural intolerance); then reach across midline and shake hands with caregiver – repeat with other hand. (Patient’s feet may or may not be flat on the floor)</p> <p>Safe Mode: Use sling and lift to assist to side of bed or complete in bed with HOB raised and patient leaning forward or with bed in chair mode.</p>	<p>Sit and Shake:</p> <ul style="list-style-type: none"> Able to follow commands and sit unsupported (by sling or surface) for up to 1 minute. Able to maintain seated balance while reaching across midline of trunk with one or both hands and shaking caregiver’s hand. <p><i>NOTE: If patient has "strict bed rest" orders, or is hemodynamically unstable, patient is a Mobility Level 1. Do not proceed with the assessment.</i></p> 	<p>FAIL = Mobility Level 1</p> <p>Goal: Avoid complications of immobility</p> <ol style="list-style-type: none"> EOB dangling with sling and lift; calf pump exercises Bed in Fowlers or chair position Lift and repo sheet – boosting and turning Lift and Multistraps – turning and limb holding Lift and sling – bed to chair/ commode transfers Friction Reducing Device (FRD) for AROM/PROM <p>PASS – Proceed to Assessment Level 2</p>
<p>Assessment Level 2</p> <p>Assessment of:</p> <ul style="list-style-type: none"> Lower extremity strength in preparation for weight bearing Foot drop 	<p>Assessment Level 2 – Stretch – verifies some lower extremity strength.</p> <p>Patient demonstrates Level 1 function and lower extremity strength.</p> <p>Stretch: While sitting upright unsupported, extend leg by straightening knee, then point toes/ pump ankle between dorsiflexion/plantar flexion 3 times. Knee remains below hip level.</p> <p>Safe Mode: Use seated sling with lift (mobile or overhead) or bed in chair position.</p>	<p>Stretch:</p> <p>Able to extend leg and straighten knee to engage quadriceps; then able to pump ankle for 3 repetitions to engage lower leg muscles and assist with venous return/fluid shift.</p> 	<p>FAIL = Mobility Level 2</p> <p>Goal: Avoid Complications of Immobility</p> <ol style="list-style-type: none"> FRD: partial squats and leg AROM exercises Lift and repo sheet – boosting and turning Lift and Multistraps™ – turning and limb holding Lift and sling – bed to chair/ commode transfers Ankle pumps <p>PASS – Proceed to Assessment Level 3</p>
<p>Assessment Level 3</p> <p>Assessment of:</p> <ul style="list-style-type: none"> Ability to perform sit to stand transfer Static standing balance Orthostatic response to standing 	<p>Assessment Level 3 – Stand – verifies patient has adequate strength, physiological stability and balance to stand.</p> <p>Stand: With feet flat on the floor about shoulder width apart, ask patient to shift weight forward and come to standing position. Stand for a minimum of 5 seconds and up to 1 minute if there is concern for orthostatic hypertension or syncope.</p> <p>Safe Mode: Use sit-to-stand lift or ambulation vest/pants with lift.</p>	<p>Stand:</p> <p>Able to rise, maintain standing position for up to 1 minute.</p> <p><i>NOTE: The majority of patients who exhibit orthostatic hypotension do so within the first minute of standing.</i></p> <p>May use walker, cane, crutches or prosthetic leg(s) as appropriate.</p> 	<p>FAIL = Mobility Level 3</p> <p>Goal: Strengthen, assist fluid shifts, avoid falls</p> <ol style="list-style-type: none"> Sit-to-stand lift – stand for 1-2 minutes, weight shift side to side and forward/back, 2-3 deep breaths Squats using FRD with bed in tilt position Lifts and Multistraps™: limb holding Sit-to-stand lift (powered or non-powered) chair/ commode transfers Progress to standing with sit-to-stand lift to standing with aid. <p>PASS – Proceed to Assessment Level 4</p>
<p>Assessment Level 4</p> <p>Assessment of:</p> <ul style="list-style-type: none"> Pre-ambulation weight shifting Dynamic standing balance Motor planning and ability to follow directions 	<p>Assessment Level 4 – Step – verifies adequate leg strength, balance and control to lift foot off floor and advance forward/back prior to walking.</p> <p>Step:</p> <ol style="list-style-type: none"> March or step in place (not high marching) Step forward with one foot, weight bear/ shift weight onto foot and return to starting position; repeat with other foot. <p>Safe Mode: Use ambulation vest/pants and lift.</p> <p>Always default to Safe Mode if concerned regarding orthostatic hypotension/syncope or falls.</p>	<p>Step:</p> <p>Able to perform both marching-in-place and step forward/back with each leg.</p> <p>May use walker, cane, crutches, or prosthetic leg(s) as appropriate.</p> 	<p>FAIL = Mobility Level 4</p> <p>Goal: Improve standing tolerance, balance; avoid falls; consider mobility goals</p> <ol style="list-style-type: none"> Ambulation vest/pants and lift for standing, pre-gait and ambulation activities Set ambulation distance and frequency goals after passing ‘Step’ If using aid to pass ‘Step,’ assure that aid is always accessible and used <p>PASS – Pass BMAT Assessment; Proceed through Discharge Planning; Continue to complete once per shift and with change in condition</p>

Adapted from Boynton, et al., T. (2020). The Bedside Mobility Assessment Tool 2.0. American Nurse Journal, 15.

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