

“Make a Moment for Mobility” Intervention

Tasha N. Hudson, Doctoral Candidate, MSN, APRN, AGCNS-BC, CA-SANE, CHPN

Risks of Bed Rest

- ✓ **Skin Conditions**
(breakdown, pressure
ulcers)

✓ **Musculoskeletal**
Conditions
(contractures, muscle
weakness, muscle
atrophy, disuse
osteoporosis)

✓ **Urinary Conditions**
(infection, renal
calculi, urinary, stasis,
incontinence,
retention)

✓ **Lung Conditions**
(pneumonia,
atelectasis, altered
respiratory vital
capacity)

✓ **Vascular Conditions**
(venous stasis,
venous insufficiency,
orthostatic
hypotension, altered
cardiac reserve,
edema, embolus,
thrombophlebitis)

✓ **Nutritional Deficits**
(loss of calcium from
the bones,
constipation)

Goals of Early Mobility

- **Early mobility**
 - **Get patient out of bed or ambulating within first 24 hours of admission**
- **Nursing Diagnosis: Impaired Physical Mobility**
 - is “the limitation in independent, purposeful physical movement of the body or of one or more extremities.”

Goals of Early Mobility

Minimize complications of bed rest
Improve overall patient functions
Improve overall strength and endurance
Decrease length of stay
Promote positive psychological benefits
Increase likelihood of d/c home

Team

Nurse Driven
Physician orders
PT consult prn
RT assist prn

Getting patients back to living

Progressive Mobility

Order for mobility (unless contraindicated)
Use JH-HLM Scale
Mobilize patient 3 times a day as able
Long term goal is pre-hospitalization level
Short term goal to increase at least one level daily

ROM
Dangle
Sit to Stand
Standing Marches
Up in Chair
Ambulate

Interdisciplinary



Nurse Driven
Physician Orders
PT Consult prn
RT Assist prn

Move to Improve

Minimize complications of bedrest
Improve overall patient functions
Decrease length of stay
Promote positive psychological
benefits
Increase likelihood of D/C home





Every Patient, Every Day

Order for mobility (unless contraindicated)
Mobilize patient 3x a day as able
Use JH-HLM Scale
Long term goal is prehospitalization level
Short term goal is to □ at least 1 level daily

Dangle

Sit to
Stand

Standing
Marches

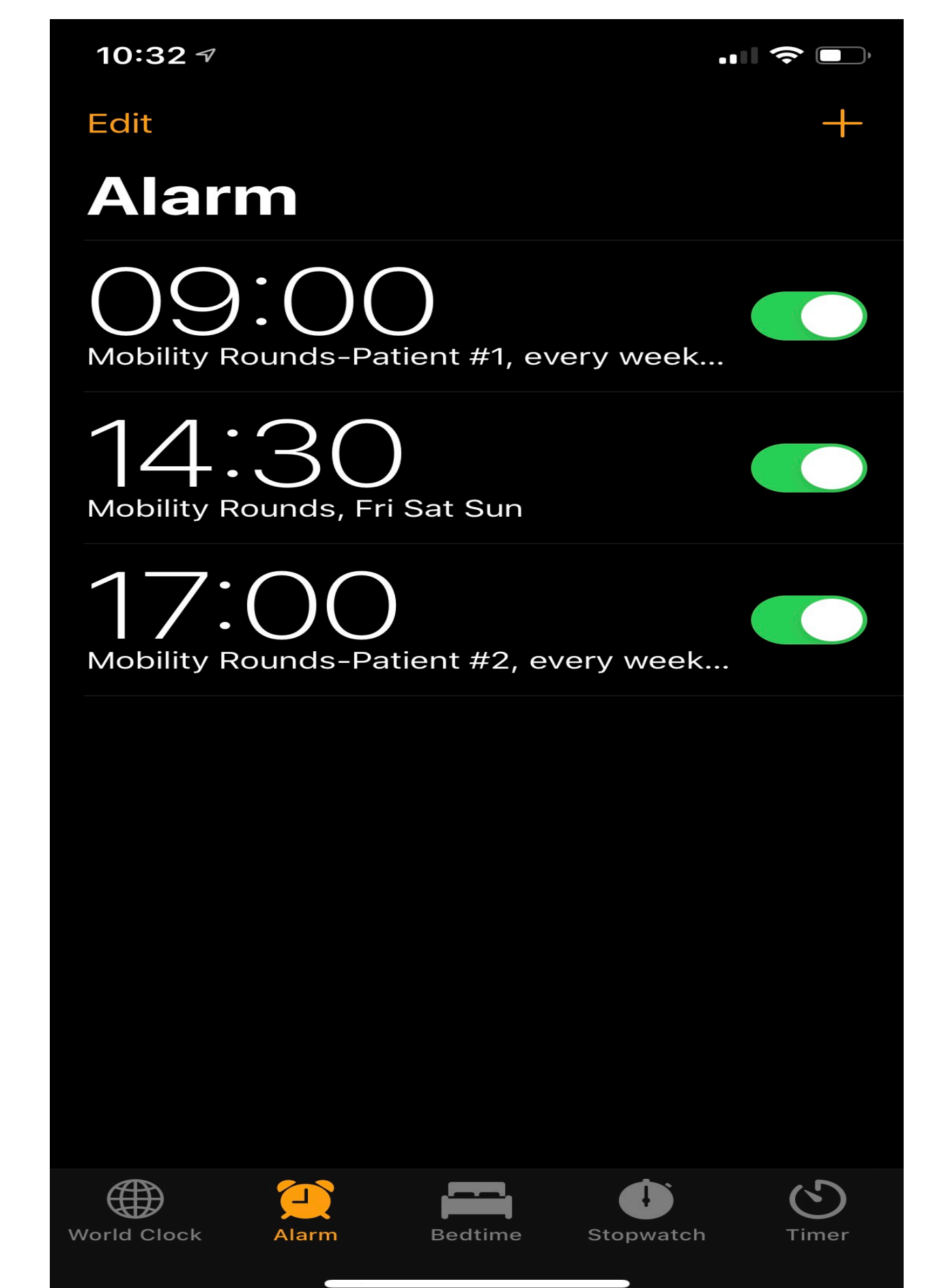
Chair

Ambulate

Why Nurse-led Mobility Matters

- Increasing mobility during an acute care stay is essential for promoting health and wellbeing **AFTER** discharge.
- Patients who mobilize at least **3 TIMES daily** during hospital stay, can potentially decrease their LOS by 0.4 to 1.11 days

Innovate with Technology



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References

Available on request

- **There is an average LOSS of 15%** muscle strength with prolonged bed rest.
- Each day spent on bed rest lowers a patient’s muscle strength **by 3-11%** over the next months and years following discharge.
- Older adults with poor physical function when discharged, are **3 TIMES** more likely to be readmitted within 30 days after discharge.