

Name

Date of birth

Date of assessment

Date of workplace accident

Hospital / unit

Method of administration:

Direct observation

Interview with

Self Care	Score	Is score due to the brain injury?		Explain reasons for giving this score
1. Eating		Yes	No	
2. Grooming		Yes	No	
3. Bathing		Yes	No	
4. Dressing - Upper Body		Yes	No	
5. Dressing - Lower Body		Yes	No	

Sphincter Control	Score	Is score due to the brain injury?		Explain reasons for giving this score
6. Toileting		Yes	No	
7. Bladder management		Yes	No	
8. Bowel management		Yes	No	
Self care subtotal				

Transfers	Score	Is score due to the brain injury?		Explain reasons for giving this score
9. Transfers: Bed / Chair / Wheelchair		Yes	No	Mode: W - Walk C - Wheelchair B - Both
10. Transfers: Toilet		Yes	No	
11. Transfers: Bath / Shower		Yes	No	

Locomotion	Score	Is score due to the brain injury?	Explain reasons for giving this score
			Mode: W - Walk C - Wheelchair B - Both
12. Walk / Wheelchair		Yes No	
13. Stairs		Yes No	
Mobility subtotal			

Communication	Score	Is score due to the brain injury?	Explain reasons for giving this score
			Mode: V - Vocal N - Non-vocal B - Both
14. Comprehension		Yes No	
15. Expression		Yes No	

Social Cognition	Score	Is score due to the brain injury?	Explain reasons for giving this score
16. Social interaction		Yes No	
17. Problem solving		Yes No	
18. Memory		Yes No	
Cognition subtotal			
FIM™ Total Score			

Administered by

FIM™ credentialed

Yes No

Signature

Date of assessment

fim™ levels

No helper

- 7** Complete Independence (Timely, Safely)
- 6** Modified Independence (Device)

Helper - Modified Dependence

- 5** Supervision (Subject = 100%)
- 4** Minimal assistance (Subject = 75% or more)
- 3** Moderate assistance (Subject = 50% or more)

Helper - Complete Dependence

- 2** Maximal assistance (Subject = 25% or more)
- 1** Total assistance (Subject less than 25%)

how to connect with us

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