

COVID-19 REHAB DISCHARGE TOOL

MRN: _____

Date of birth: _____

Today's date: _____

Part One: *Instructions: ask the patients for any information needed to complete this assessment.*

Is the patient afebrile and without increase in oxygen demand for >12 hours?

- Yes No (STOP, do not add to rehabilitation queue)

What is the patient's current oxygen use (liters per minute)?

- Zero (0) 1-2(1) 3-5(1) 6-7(0) 8+ (STOP)

What is the patient's current level of cognition?

- Grossly normal (0) Needs cueing to respond to questions (2)
 Answers are not appropriate (1) Obtunded (STOP)

How many steps to enter the patient's home?

- Zero (0) 1-3(1) 4+ (2)

Did the patient previously use an assistive device for ambulation?

- No (0) Yes - cane, walker, or wheelchair (2)

Does the patient have someone to stay with at discharge?

- Yes, with physical help (0) Yes, minimal/no physical help (1) No (2)

PART ONE SCORE: _____

Part Two: What the patient can do right now (modified Barthel Index):

Instructions: Assistive devices are OK. "Needs help" implies 50% or more patient effort. Supervision is the same as needing help. Score can be patient-reported or observed by healthcare personnel.

- | | | | |
|------------------------------------|---|-------------------------------------|--------------------------------|
| <input type="checkbox"/> able (10) | <input type="checkbox"/> needs help (5) | <input type="checkbox"/> cannot (0) | Eat |
| <input type="checkbox"/> able (5) | <input type="checkbox"/> cannot (0) | | Comb hair, shave, wash |
| <input type="checkbox"/> able (10) | <input type="checkbox"/> needs help (5) | <input type="checkbox"/> cannot (0) | Put on and take off clothes |
| <input type="checkbox"/> able (10) | <input type="checkbox"/> needs help (5) | <input type="checkbox"/> cannot (0) | Toileting (the entire process) |
| <input type="checkbox"/> able (15) | <input type="checkbox"/> needs help (5) | <input type="checkbox"/> cannot (0) | Get into a chair and back |
| <input type="checkbox"/> able (15) | <input type="checkbox"/> needs help (5) | <input type="checkbox"/> cannot (0) | Walk >100 feet |

Barthel score: 0-30 (4); 35-50 (2); 55-60 (1); 65 (0)

Total Score Interpretation:

- 5+: Daily extra PT/OT
2-4: Normal/some therapy
0-1: Ask again tomorrow

PART TWO SCORE: _____

TOTAL SCORE: _____

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