AM-PAC Inpatient Basic Mobility Short Form

Boston University AM-PAC™ "6 Clicks"
Basic Mobility Inpatient Short Form

Please check the box that reflects your (the patient's) best answer to each question.

How much difficulty does the patient currently have…	Unable	A Lot	A Little	None
1. Turning over in bed (including adjusting bedclothes, sheets and blankets)?	☐1	☐2	☐3	☐4
2. Sitting down on and standing up from a chair with arms (e.g., wheelchair, bedside commode, etc.)	☐1	☐2	☐3	☐4
3. Moving from lying on back to sitting on the side of the bed?	☐1	☐2	☐3	☐4

How much help from another person does the patient currently need…	Total	A Lot	A Little	None
4. Moving to and from a bed to a chair (including a wheelchair)?	☐1	☐2	☐3	☐4
5. Need to walk in hospital room?	☐1	☐2	☐3	☐4
6. Climbing 3-5 steps with a railing?	☐1	☐2	☐3	☐4

Raw Score: _____   CMS 0-100% Score: _____

Standardized Score: _____   CMS Modifier: _____

Note: Use the AM-PAC Basic Mobility Inpatient Short Form Conversion Table to convert raw scores.