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E-PACER.

Safe Patient Handling & Movement Evaluation

E-Pacer Evaluation Guidelines

Patients should be evaluated by staff to determine if use of the E-Pacer and E-Pacer accessories are appropriate.

Patients should be re-evaluated with any change of condition or SPHM concerns.

Patient Evaluation and E-Pacer use should be conducted in compliance with facility policy and procedures and only after training.

E-Pacer Evaluation Instructions

1. Indicate Level of Functional Status by circling 0/1, 2, 3 or 4 in Section A.

2. Document instructions for hooking the thigh straps, walking saddle and seat strap as appropriate in Section G below.

PATIENT NAME:		
ROOM #	 	
DATE OF EVALUATION		

Α	В	С	D	E	F	
Level	Functional Status	Rise/Stand	Ambulate	Transfer	Toilet	
0/1	 Independent or stand-by assist with transfers and ambulation Bears weight fully 		E-Pacer not needed			
2	 Assist of 1 to sit, rise, stand, ambulate Understands, cooperates Sits independently or with support Bears weight fully Upper body and extremity strength Weighs 350 pounds or less; stands 6'4" or less to use E-Pacer 	E-Pacer (if pulling or lifting resident to stand)	E-Pacer not needed			
3	 Assist of 2 to sit, rise, stand, ambulate Understands, cooperates Sits independently or with support Bears weigh partially Upper body and extremity strength Weighs 350 pounds or less; stands 6'4" or less to use E-Pacer 	E-Pacer & Walking Saddle	E-Pacer & Walking Saddle	E-Pacer & Thigh Straps	E-Pacer & Thigh Strap	
4	 Total Assist; not able to rise, stand or ambulate Sits with support Cooperates Non-weight bearing Limited upper body and extremity strength Weighs 350 pounds or less; stands 6'4" or less to use E-Pacer 	N/A	N/A	E-Pacer & Thigh Straps & Seat Strap	N/A	