

**NINDS CDE Notice of Copyright
Functional Independence Measure (FIM)**

Availability:	<p>The FIM™ is proprietary. For further information about obtaining the scale, syllabus, and training materials please contact:</p> <p style="text-align: center;">Uniform Data System for Medical Rehabilitation 270 Northpointe Parkway, Suite 300 Amherst, New York 14228 (716) 817-7800 FAX (716) 568-0037 email: info@udsmr.org Web site: Please click here for more information about the Functional Independence Measure</p>
Classification:	<p>Supplemental: Multiple Sclerosis (MS), Stroke, and Traumatic Brain Injury (TBI) Exploratory: Cerebral Palsy (CP) Freidreich’s Ataxia (FA)</p>
Short Description of Instrument:	<p>Purpose: The FIM™ measures degree of independence in activities of self-care, sphincter control, transfers, locomotion, communication, and cognition.</p> <p>Overview: The FIM™ emerged from a thorough developmental process overseen by a National Task Force of rehabilitation research. The National Task force reviewed 36 published and unpublished functional assessment scales before agreeing on an instrument. The FIM™ is an 18-item ordinal scale, used with all diagnoses within a rehabilitation population. It is viewed as most useful for assessment of progress during inpatient rehabilitation.</p> <p>FIM was originally an acronym for "Functional Independence Measure". It is still often cited as this in the literature. The current owners of the FIM™ instrument have decided that the acronym FIM™ no longer stands for anything and should be referred to only as FIM™.</p> <p>Time: Evaluation time is 20–30 minutes.</p>
Comments / Special Instructions	<p>The FIM™ may be completed by rehabilitation clinicians as an observational scale, or by trained paraprofessionals or family members. It can be administered by trained interviewers as a self report or proxy report instrument, in person or by phone.</p> <p>FIM™ certification is available and required to officially utilize the tool. A detailed manual guides scoring, based on operationally-defined functional abilities. Most appropriate for Severe and Moderate Disability levels of GOSE; ceiling effects limit utility in Good Recovery.</p> <p>The FIM™ is imbedded in the Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI). Thus if the IRF-PAI is administered it is not necessary to separately administer the FIM.</p> <p>The alpha FIM is a subset that has been used in the acute patient setting to assess which patients are appropriate for discharge to a rehabilitation setting. The alpha FIM may be worth exploring in Phase III trials that include assessments of appropriateness of different post-discharge destinations.</p>

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Scoring:	Scores range from 1 (total or >75% assistance) to 7 (complete independence). The total of the 18 items is the patient's total score, which ranges from 18–126. Scores may be used raw or converted to interval scores.
Rationale / Justification	Inter-rater reliability was found to be high for the total score and moderate to substantial for items assessing physical disability, except for the item concerned with assessing independence in walking or in wheelchair. The inter-rater agreement of FIM™ items in the communication and social cognition subsections was only fair. The internal consistency of the FIM™ assessment scale was found to be high.
References:	<p>Granger CV. The emerging science of functional assessment: our tool for outcomes analysis. Arch Phys Med Rehabil 1998;79(3):pp 235–240.</p> <p>Hamilton BB, Laughlin JA, Granger CV, Kayton RM. Interrater agreement of the seven-level Functional Independence Measure (FIM). Arch Phys Med Rehabil 1991;72:790 (abstract).</p> <p>Wright, J. (2000). The FIM(TM). The Center for Outcome Measurement in Brain Injury. http://www.tbims.org/combi/FIM (accessed October 21, 2016).</p>