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| ICF Assessment Sheet | | | | |
| Patient Perspective | Body Functions & Structures | *Statements from patient/client about their body functions and/or structures*   * Example: Some days I feel energetic, some days not * Example: I have some pain in the muscles of my neck * Example: I have no control over my bladder and bowel * Example: I can’t control any muscle activity in my legs | Activities & Participation | *Statement from patient/client about engaging in daily/periodic activities and participating in community, social and political life*   * Example: I can’t hold bottles nor handle objects with my hands * Example: I go out with friends every weekend * Example: I want to work again, but I currently don’t know what kind of work I will do in the future |
| Health Professional Perspective | *Information/rating from multidisciplinary team of health professionals about patient/client’s body functions and structures*   * Example: Substantially reduced energy and drive * Example: Moderately reduced mobility in shoulder joint * Example: Increasing spasticity with physical exercise * Example: Persisting grade 1 pressure sores | *Information/rating from multidisciplinary team of health professionals about the patient/client’s engagement in daily/periodic activities and participation in community, social and political life*   * Example: Complete limitations in fine hand use * Example: Severe limitations in hand and arm use * Example: Socializes regularly with friends * Example: Remunerative employment has to be clarified |
| Environmental Factors | | |  | Personal Factors |
| *Information/rating from multidisciplinary team of health professionals and patient/client about the environmental factors that serve as barriers and/or as facilitators*  Example: Flat not adapted for wheelchair, is on the 3rd floor and has no elevator  Example: Parents are supportive – sometimes too supportive  Example: Supportive friends  Example: Pre-injury employer may be willing to have (patient/client name) return to work in the future | | |  | *Information/rating from multidisciplinary team of health professionals and patient/client about the personal factors that serve as barriers and/or as facilitators*  Example: 30 year old female  Example: Was working part-time as bookkeeper and studying toward a Master’s degree before her accident  Example: Used to be sportive before the accident  Example: Often expects too much too quickly – tends to be impatient  Example: Has a positive outlook on life |