

TABLE 3. Safety Criteria for Starting and Stopping Physical Rehabilitation or Mobility Session^{a,b}

System	Starting Criteria for a Rehabilitation/ Mobility Session OK to Start If All of the Following Parameters Are Present	Stopping Criteria for a Rehabilitation/ Mobility Session Stop When Any of the Following Parameters Are Present
Cardiovascular	Heart rate between 60 and 130 beats/min Systolic blood pressure is between 90 and 180 mm Hg, or Mean arterial pressure (MAP) is between 60 and 100 mm Hg	Heart rate decreases below 60 or increases above 130 beats/min Systolic blood pressure decreases below 90 or increases above 180 mm Hg, or MAP decreases below 60 or increases above 100 mm Hg
Respiratory	Respiratory rate between 5 and 40 breaths/min SpO ₂ ≥ 88% FiO ₂ < 0.6 and positive end-expiratory pressure < 10 cm H ₂ O Airway (endotracheal tube or tracheostomy) is adequately secured	Respiratory rate decreases below 5 or increases above 40 breaths/min SpO ₂ decreases below 88% Concerns regarding adequate securement of airway (endotracheal tube or tracheostomy)
Neurologic	Able to open eyes to voice	Changes in consciousness, such as not following directions, lightheadedness, combativeness, or agitation
Signs and symptoms	The following clinical signs and symptoms should be <i>absent</i> : <ul style="list-style-type: none"> • New or symptomatic arrhythmia • Chest pain with concern for myocardial ischemia • Unstable spinal injury or lesion • Unstable fracture • Active or uncontrolled gastrointestinal bleed 	<i>Stop</i> if any of the following clinical signs, symptoms, or events develop and appear clinically relevant: <ul style="list-style-type: none"> • New or symptomatic arrhythmia • Chest pain with concern for myocardial ischemia • Ventilator asynchrony • Fall • Bleeding • Medical device removal or malfunction • Distress reported by patient or observed by clinician
Other	Mobility sessions may be performed with the following: <ul style="list-style-type: none"> • Femoral vascular access devices, with exception of femoral sheaths in which hip mobilization is generally avoided • During continuous renal replacement therapy (CRRT) • Infusion of vasoactive medications 	

FiO₂, fraction of inspired oxygen; SpO₂, oxygen saturation.

^aAdapted with permission from Devlin et al.²⁵

^bThese criteria are based on published clinical studies and expert opinion, but should not be a substitute for clinical judgment. All thresholds should be interpreted or modified, as needed, in the context of individual patients' clinical symptoms, "normal" values, and recent trends while in the hospital, and any clinician-prescribed goals or targets.