Table ISelf-Care and Mobility Data ElementsIncluded in Section GG of the Post-Acute Care Item Sets (2018/2019)

Current as of: 4/3/2018

Data Element Identifier	Data Element Label	Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI) Version 2.0 Oct 2018	Minimum Data Set (MDS) 3.0 Version 1.16.0 Oct 2018	Long-Term Care Hospital CARE Data Set Version 4.00 July 2018	Outcome and Assessment Information Set (OASIS-D) Jan 2019				
SELF-CARE GG0130									
GG0130A	Eating	~	\checkmark	~	~				
GG0130B	Oral hygiene	~	\checkmark	~	~				
GG0130C	Toileting hygiene	~	\checkmark	~	~				
GG0130D	Wash upper body	—	—	~	—				
GG0130E	Shower/bathe self	\checkmark	\checkmark	_	✓				
GG0130F	Upper body dressing	~	\checkmark	—	~				
GG0130G	Lower body dressing	~	\checkmark	—	~				
GG0130H	Putting on/taking off footwear	~	\checkmark	—	~				
MOBILITY	′ GG0170								
GG0170A	Roll left and right	~	\checkmark	~	~				
GG0170B	Sit to lying	\checkmark	\checkmark	\checkmark	✓				
GG0170C	Lying to sitting on side of bed	~	\checkmark	~	~				
GG0170D	Sit to stand	~	\checkmark	~	~				
GG0170E	Chair/bed-to-chair transfer	~	\checkmark	~	~				
GG0170F	Toilet transfer	✓	\checkmark	~	✓				
GG0170G	Car transfer	✓	\checkmark	—	~				
GG01701	Walk 10 feet	~	\checkmark	~	~				
GG0170J	Walk 50 feet with two turns	~	✓	~	~				
GG0170K	Walk 150 feet	 ✓ 	\checkmark	~	~				

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GG0170L	Walking 10 feet on uneven surface	~	~	—	\checkmark
GG0170M	l step (curb)	~	✓	—	\checkmark
GG0170N	4 steps	~	\checkmark	—	\checkmark
GG0170O	12 steps	~	✓	—	\checkmark
GG0170P	Picking up object	~	\checkmark	—	\checkmark
GG0170Q	Does the patient/resident use a wheelchair and/or scooter?	~	✓	~	✓
GG0170R	Wheel 50 feet with two turns	✓	~	~	\checkmark
GG0170RR	Indicate the type of wheelchair or scooter used.	✓	✓	~	✓
GG0170S	Wheel 150 feet	✓	✓	~	✓
GG0170SS	Indicate the type of wheelchair or scooter used.	✓	√	~	~

 \checkmark = Data element is included in the item set.

- = Data element is not included in the item set