

Health & Care Information Model:

nl.zorg.AbilityToEat-v3.1.1

Status: Final

Release: 2026-1

Release status: Prepublished

Managed by:



Content

1. nl.zorg.AbilityToEat-v3.1.1	3
1.1 Revision History	3
1.2 Concept	3
1.3 Mindmap	3
1.4 Purpose	3
1.5 Patient Population	4
1.6 Evidence Base	4
1.7 Information Model	4
1.8 Example Instances	6
1.9 Instructions	6
1.10 Interpretation	6
1.11 Care Process	6
1.12 Example of the Instrument	6
1.13 Constraints	6
1.14 Issues	6
1.15 References	6
1.16 Functional Model	6
1.17 Traceability to other Standards	7
1.18 Disclaimer	7
1.19 Terms of Use	7
1.20 Copyrights	7

1. nl.zorg.AbilityToEat-v3.1.1

DCM::CoderList	Werkgroep RadB Verpleegkundige Gegevens
DCM::ContactInformation.Address	*
DCM::ContactInformation.Name	*
DCM::ContactInformation.Telecom	*
DCM::ContentAuthorList	Werkgroep RadB Verpleegkundige Gegevens
DCM::CreationDate	13-3-2014
DCM::DeprecatedDate	
DCM::DescriptionLanguage	nl
DCM::EndorsingAuthority.Address	
DCM::EndorsingAuthority.Name	PM
DCM::EndorsingAuthority.Telecom	
DCM::Id	2.16.840.1.113883.2.4.3.11.60.40.3.4.7
DCM::KeywordList	Eten, ADL, beperking
DCM::LifecycleStatus	Final
DCM::ModelerList	Werkgroep RadB Verpleegkundige Gegevens
DCM::Name	nl.zorg.VermogenTotEten
DCM::PublicationDate	17-04-2026
DCM::PublicationStatus	Prepublished
DCM::ReviewerList	Projectgroep RadB Verpleegkundige Gegevens & Kerngroep Registratie aan de Bron
DCM::RevisionDate	15-06-2020
DCM::Supersedes	nl.zorg.VermogenTotEten-v3.1
DCM::Version	3.1.1
HCIM::PublicationLanguage	EN

1.1 Revision History

Publicatieversie 1.0 (01-07-2015)

Publicatieversie 3.0 (01-05-2016)

Bevat: ZIB-453.

Publicatieversie 3.1 (04-09-2017)

Bevat: ZIB-530, ZIB-531.

Publicatieversie 3.1.1 (01-09-2020)

Bevat: ZIB-1115.

1.2 Concept

Being able to independently prepare and consume food is part of self-care. Limitations in this ability indicate a reduced ability to cope for oneself.

This activity and activities such as those including drinking, getting dressed and bathing are also known as activities of daily living (ADL). These are the activities people go through in daily life. The extent to which a person is able to do all these activities by themselves is a measure for their total ability to do things independently.

1.3 Mindmap

1.4 Purpose

Information on limitations in a patient's ability to make and eat their own food is important in determining

the nature and intensity of the care the patient needs. In a transfer situation, it offers the receiving organization the ability to anticipate the intensity of the care to be given to the patient, enabling continuity in healthcare for the patient.

If policy has been implemented to improve a patient’s ability to do things independently, the entered extent of independence helps to determine the efficiency of the treatment.

1.5 Patient Population

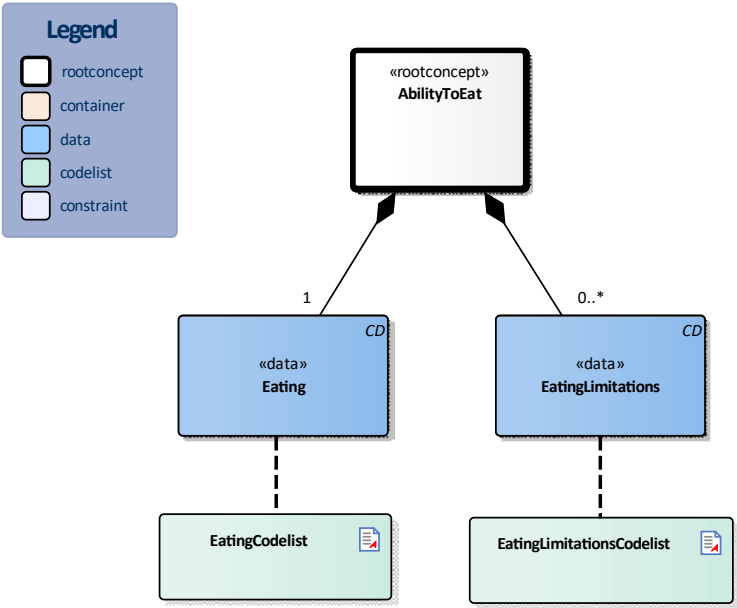
1.6 Evidence Base

The definitions of the concepts were (partially) taken from the ICNP definitions.

In addition to this information model, there are other tools to record independence, such as the KATZ-ADL and the BarthelIndex. The KATZ-ADL is mainly used for vulnerable seniors and the BarthelIndex is mainly used for patients who have had a stroke.

This information model evaluates the ability to eat on a three-point scale. In the KATZ-ADL and in the BarthelIndex, this falls under the aspect of Self-feeding. In these two tools, the ability is scored on a scale with fewer points.

1.7 Information Model



«rootconcept»	AbilityToEat	
Definitie	Root concept of the AbilityToEat information model. This root concept contains all data elements of the AbilityToEat information model.	
Datatype		
DCM::ConceptId	NL-CM:4.7.1	
Opties		

«data»	Eating	
Definitie	Feeding oneself: bringing food to the mouth and feeding oneself until satisfied.	

Datatype	CD	
DCM::ConceptId	NL-CM:4.7.3	
DCM::DefinitionCode	SNOMED CT:288883002	
	Ability to eat	
DCM::ExampleValue	Onafhankelijk	
DCM::ValueSet	EatingCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.7.1
Opties		

«data»	EatingLimitations	
Definitie	Eating constraints specify the patient's constraints in eating.	
Datatype	CD	
DCM::ConceptId	NL-CM:4.7.4	
DCM::DefinitionCode	SNOMED CT: 288843005	
	Eating abilities	
DCM::ExampleValue	Eetgerei hanteren	
DCM::ValueSet	EatingLimitationsCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.7.2
Opties		

«document»	EatingCodelist	
Definitie		
Datatype		
DCM::ValueSetBinding	Required	
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.60.40.2.4.7.1	
DCM::ValueSetIncludeOTH	False	
DCM::ValueSetStatus	Active	
HCIM::ValueSetLanguage	--	
Opties		

EtenCodelijst		OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.7.1		
Concept Name	Concept Code	CodeSys. Name	CodeSystem OID	Description
Independent feeding	165224005	SNOMED CT	2.16.840.1.113883.6.96	Onafhankelijk
Feeding assisted	129033007	SNOMED CT	2.16.840.1.113883.6.96	Hulp nodig
Unable to feed self	289001005	SNOMED CT	2.16.840.1.113883.6.96	Volledig afhankelijk

«document»	EatingLimitationsCodelist	
Definitie		
Datatype		
DCM::ValueSetBinding	Required	
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.60.40.2.4.7.2	
DCM::ValueSetIncludeOTH	False	
DCM::ValueSetStatus	Active	
HCIM::ValueSetLanguage	--	
Opties		

EetBeperkingenCodelijst		OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.7.2		
ConceptName	Concept Code	CodeSys. Name	CodeSystem OID	Description

Difficulty taking food to mouth	289010002	SNOMED CT	2.16.840.1.113883.6.9 6	Naar de mond brengen
Difficulty using cutlery to feed self	289046006	SNOMED CT	2.16.840.1.113883.6.9 6	Eetgerei hanteren
Difficulty cutting up food	289078003	SNOMED CT	2.16.840.1.113883.6.9 6	Snijden/openen

	Legend
Definitie	
Datatype	
Opties	

1.8 Example Instances

VermogenTotEten	
Eten	Hulp nodig
EetBeperkingen	Snijden/openen
	Eetgerei hanteren

1.9 Instructions

1.10 Interpretation

1.11 Care Process

1.12 Example of the Instrument

1.13 Constraints

1.14 Issues

1.15 References

1. International Classification of Functioning Disability and Health (ICF) [Online] Beschikbaar op: <http://www.rivm.nl/who-fic/icf.htm> [Geraadpleegd: 13 februari 2015]

1.16 Functional Model

1.17 Traceability to other Standards

1.18 Disclaimer

The Health and Care Information Models (a.k.a Clinical Building Block) has been made in collaboration with several different parties in healthcare. These parties asked Nictiz to manage good maintenance and development of the information models. Hereafter, these parties and Nictiz are referred to as the collaborating parties. The collaborating parties paid utmost attention to the reliability and topicality of the data in these Health and Care Information Models. Omissions and inaccuracies may however occur. The collaborating parties are not liable for any damages resulting from omissions or inaccuracies in the information provided, nor are they liable for damages resulting from problems caused by or inherent to distributing information on the internet, such as malfunctions, interruptions, errors or delays in information or services provide by the parties to you or by you to the parties via a website or via e-mail, or any other digital means. The collaborating parties will also not accept liability for any damages resulting from the use of data, advice or ideas provided by or on behalf of the parties by means of the Health and Care Information Models. The parties will not accept any liability for the content of information in this Health and Care Information Model to which or from which a hyperlink is referred. In the event of contradictions in mentioned Health and Care Information Model documents and files, the most recent and highest version of the listed order in the revisions will indicate the priority of the documents in question. If information included in the digital version of a Health and Care Information Model is also distributed in writing, the written version will be leading in case of textual differences. This will apply if both have the same version number and date. A definitive version has priority over a draft version. A revised version has priority over previous versions.

1.19 Terms of Use

The user may use the Health and Care Information Models without limitations. The copyright provisions in the paragraph concerned apply to copying, distributing and passing on the Health and Care Information Models.

1.20 Copyrights

A Health and Care Information Model qualifies as a work within the meaning of Section 10 of the Copyright Act (Auteurswet). Copyrights protect the Health and Care Information Models and these rights are owned by the cooperating parties.

The user may copy, distribute and pass on the information in this Health and Care Information Model under the conditions that apply for Creative Commons license Attribution-NonCommercial-ShareAlike 3.0 Netherlands (CC BY-NC-SA-3.0).

The content is available under Creative Commons Attribution-NonCommercial-ShareAlike 3.0 (see also <http://creativecommons.org/licenses/by-nc-sa/3.0/nl/>)

This does not apply to information from third parties that sometimes is used and / or referred to in a Health and Care Information Model, for example to an international medical terminology system. Any (copyright) rights that protect this information are not owned by the cooperating parties but by those third parties.

Nictiz is the independent national competence centre for electronic exchange of health and care information. The activities of Nictiz include the targeted development and management of information standards at the request of and in partnership with the stakeholders in healthcare. Nictiz advises these parties on all aspects of information exchange and identifies (future) national and international developments.

Nictiz

P.O. Box 19121
2500 CC Den Haag
Oude Middenweg 55
2491 AC Den Haag

070-3173450
info@nictiz.nl
www.nictiz.nl



