# Health&Care Information Model: nl.zorg.VermogenTotDrinken

Final

Managed by:

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# Content

l.	. nl.	zorg.VermogenTotDrinken-v3.0	3
	1.1	Revision History	3
	1.2	Concept	3
	1.3	Mindmap	3
	1.4	Purpose	4
	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	7
	1.15	References	7
	1.16	Functional Model	7
	1.17	Traceability to other Standards	7
	1.18	Disclaimer	7
	1.19	Terms of Use	7
	1.20	Copyrights	7

# 1. nl.zorg.VermogenTotDrinken-v3.0

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	2.16.840.1.113883.2.4.3.11.60.40.3.4.8
DCM::KeywordList	Drinken, ADL, beperking
DCM::LifecycleStatus	Final
DCM::ModelerList	Werkgroep RadB Verpleegkundige Gegevens
DCM::Name	nl.zorg.VermogenTotDrinken
DCM::PublicationDate	1-5-2016
DCM::PublicationStatus	Published
DCM::ReviewerList	Projectgroep RadB Verpleegkundige Gegevens &
	Kerngroep Registratie aan de Bron
DCM::RevisionDate	8-9-2015
DCM::Superseeds	nl.nfu.VermogenTotDrinken-v1.0
DCM::Version	3.0

# 1.1 Revision History

Publicatieversie 1.0 (01-07-2015)

Publicatieversie 3.0 (01-05-2016)

Bevat: ZIB-453

# 1.2 Concept

! Attention: this information model is undergoing major revision. A new version will be available after summer.

Being able to independently prepare and drink beverages 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 eating, 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 drink their own beverages is important in determining the nature and intensity of the care the patient needs. In a transfer situation, it gives 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

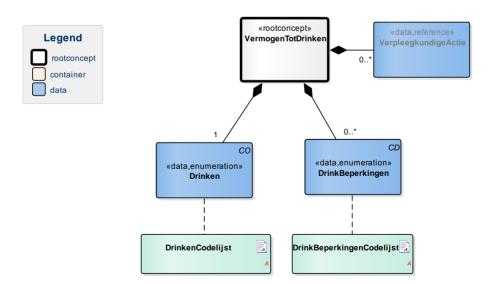
## 1.6 Evidence Base

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

In addition to this building block, 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 building block evaluates the ability to drink on a five-point scale. In the KATZ-ADL and in the Barthellndex, 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»	VermogenTotDrinken		
Alias	EN: AbilityToDrink		
Definition	Root concept of the AbilityToDrink building block. This concept contains all data elements of the AbilityToDrink building block.		
Datatype			
DCM::DefinitionCode	NL-CM:4.8.1		

Options
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«data»	Drinken		
Alias	EN: Drinking		
Definition	Drinking includes holding a drink, bringing it to the mouth, consuming it in a culturally acceptable manner, mixing, stirring and pouring liquids to drink, opening bottles and cans, drinking through a straw or drinking running water such as water from the tap.		
<b>Datatype</b> CO			
DCM::DefinitionCode	NL-CM:4.8.3		
DCM::DefinitionCode	ICF: d560 Drinken		
DCM::ExampleValue	Lichte beperking		
DCM::ValueSet	DrinkenCodelijst	OID:	
		2.16.840.1.113883.2.4.3.11.60.40.2.4.8.1	
Options			

«data»	DrinkBeperkingen		
Alias	Alias EN: DrinkingConstraints		
Definition	DrinkingConstraints specifies the patient's constraints in drinking.		
Datatype	CD		
DCM::DefinitionCode	NL-CM:4.8.4		
DCM::DefinitionCode	SNOMED CT: 288851008		
	Drinking abilities		
DCM::ExampleValue	Bereiden (openen/		
	uitschenken)		
DCM::ValueSet	DrinkBeperkingenCodelijst	OID:	
		2.16.840.1.113883.2.4.3.11.60.40.2.4.8.2	
Options			

«data»	VerpleegkundigeActie		
Alias	EN: NursingProcedure		
Definition	The nursing procedures needed to help the patient drink.		
Datatype			
DCM::DefinitionCode	NL-CM:4.8.2		
DCM::ExampleValue	Organiseren van aangepast drinkgerei.		
DCM::ReferencedDefi	NL-CM:14.2.9	This is a reference to concept	
nitionCode		VerpleegkundigeActie in information model	
		VerpleegkundigeInterventie.	
Options			

«document»	DrinkenCodelijst
Alias	
Definition	
Datatype	
Options	

DrinkenCodelijst		OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.8.1			
<b>Concept Name</b>	<b>Concept Code</b>	CodeSys. Name	CodeSystem OID	Description	
Geen beperking	d560.0	ICF	2.16.840.1.113883.6.254	Beperking 0-4%	
Lichte beperking	d560.1	ICF	2.16.840.1.113883.6.254	Beperking 5-24%	

Matige beperking	d560.2	ICF	2.16.840.1.113883.6.254	Beperking 25-49%
Ernstige beperking	d560.3	ICF	2.16.840.1.113883.6.254	Beperking 50-95%
Volledige beperking	d560.4	ICF	2.16.840.1.113883.6.254	Beperking 96-100%

<b>«document»</b> D	)rinkBeperking	genCodelijs	st	
Alias				
Definition				
Datatype				
Options				
DrinkBeperkingenCodelijs	t	OID: 2.16.840	0.1.113883.2.4.3.11.60.4	10.2.4.8.2
ConceptName	Concept Code	CodeSys. Name	CodeSystem OID	Description
Difficulty preparing drink	286506008	SNOMED CT	2.16.840.1.113883.6.96	Bereiden (openen/ uitschenken)
				l
Difficulty holding drinks	307071002	SNOMED CT	2.16.840.1.113883.6.96	Vastpakken

# 1.8 Example Instances

VermogenTotDrinken		
Drinken	Lichte beperking (5-24%)	
Drinkbeperkingen	en Vastpakken	
	Naar mond brengen	
VerpleegkundigeActie		
Activiteit	Organiseren van aangepast drinkgerei.	

# 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: <a href="http://www.rivm.nl/who-fic/icf.htm">http://www.rivm.nl/who-fic/icf.htm</a> [Geraadpleegd: 13 februari 2015]

#### 1.16 Functional Model

## 1.17 Traceability to other Standards

### 1.18 Disclaimer

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