

Health&Care Information Model: nl.zorg.VermogenTotZichKleden

Final

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Content

1. nl.zorg.VermogenTotZichKleden-v3.0.....	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	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.VermogenTotZichKleden-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	1-4-2014
DCM::DeprecatedDate	
DCM::DescriptionLanguage	nl
DCM::EndorsingAuthority.Address	
DCM::EndorsingAuthority.Name	PM
DCM::EndorsingAuthority.Telecom	
DCM::Id	2.16.840.1.113883.2.4.3.11.60.40.3.4.11
DCM::KeywordList	Kleden, ADL, beperking
DCM::LifecycleStatus	Final
DCM::ModelerList	Werkgroep RadB Verpleegkundige Gegevens
DCM::Name	nl.zorg.VermogenTotZichKleden
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.VermogenTotZichKleden-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 get dressed independently 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, drinking, 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 dress themselves 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

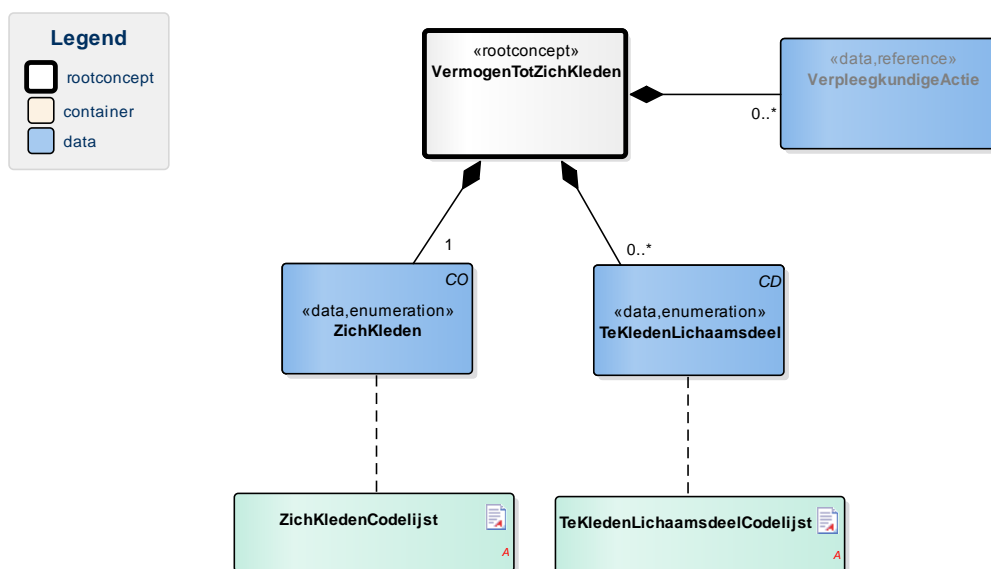
1.6 Evidence Base

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 get dressed on a five-point scale. In the KATZ-ADL and in the BarthelIndex, this falls under the aspect of Dressing. In these two tools, the ability is scored on a scale with fewer points.

1.7 Information Model



«rootconcept»	VermogenTotZichKleden
Alias	EN: AbilityToGetDressed
Definition	Root concept of the AbilityToGetDressed building block. This root concept contains all data elements of the AbilityToGetDressed building block.
Datatype	
DCM::DefinitionCode	NL-CM:4.11.1
Options	

«data»		ZichKleden	
Alias	EN: Dressing		
Definition	Dressing includes carrying out coordinated procedures and tasks for dressing and undressing and putting on and taking off shoes in the right order, with the outfit being appropriate for the social setting and weather. The BodyPartToBeDressed concept offers the option to specify to which part of the body the limitation applies. If no part of the body is indicated, the limitation will be assumed to apply to the entire body.		
Datatype	CO		
DCM::DefinitionCode	ICF: d540 Zich kleden		
DCM::DefinitionCode	NL-CM:4.11.2		
DCM::ExampleValue	Lichte beperking		
DCM::ValueSet	ZichKledenCodelijst	OID:	2.16.840.1.113883.2.4.3.11.60.40.2.4.11.1
Options			

«data»		TeKledenLichaamsdeel	
Alias	EN: BodyPartToBeDressed		
Definition	The part or parts of the body for which help getting dressed is wanted/necessary.		
Datatype	CD		
DCM::DefinitionCode	SNOMED CT: 38866009 Body part structure		
DCM::DefinitionCode	NL-CM:4.11.3		
DCM::ExampleValue	Bovenlichaam		
DCM::ValueSet	TeKledenLichaamsdeelCodelijst	OID:	2.16.840.1.113883.2.4.3.11.60.40.2.4.11.2
Options			

«data»		VerpleegkundigeActie	
Alias	EN: NursingProcedure		
Definition	The nursing procedures needed to help the patient get dressed.		
Datatype			
DCM::DefinitionCode	NL-CM:4.11.4		
DCM::ExampleValue	Helpen bij het dichtknopen van het overhemd.		
DCM::ReferencedDefinitionCode	NL-CM:14.2.9	This is a reference to concept VerpleegkundigeActie in information model VerpleegkundigeInterventie.	
Options			

«document»		TeKledenLichaamsdeelCodelijst	
Alias			
Definition			
Datatype			
Options			

TeKledenLichaamsdeelCodelijst		OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.11.2		
Concept Name	Concept Code	CodeSys. Name	CodeSystem OID	Description
Entire upper body	362874006	SNOMED CT	2.16.840.1.113883.6.96	Bovenlichaam
Entire lower body	362875007	SNOMED CT	2.16.840.1.113883.6.96	Onderlichaam

«document»		ZichKledenCodelijst		
Alias				
Definition				
Datatype				
Options				
ZichKledenCodelijst		OID: 2.16.840.1.113883.2.4.3.11.60.40.2.4.11.1		
Concept Name	Concept Code	CodeSys. Name	CodeSystem OID	Description
Geen beperking	d540.0	ICF	2.16.840.1.113883.6.254	Beperking 0-4%
Lichte beperking	d540.1	ICF	2.16.840.1.113883.6.254	Beperking 5-24%
Matige beperking	d540.2	ICF	2.16.840.1.113883.6.254	Beperking 25-49%
Ernstige beperking	d540.3	ICF	2.16.840.1.113883.6.254	Beperking 50-95%
Volledige beperking	d540.4	ICF	2.16.840.1.113883.6.254	Beperking 96-100%

1.8 Example Instances

VermogenTotZichKleden	
ZichKleden	Lichte beperking (5-24%)
TeKledenLichaamsdeel	Bovenlichaam
VerpleegkundigeActie	
Activiteit	Helpen bij het dichtknopen van het overhemd.

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

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