Title: ACORN Data Dictionary Codebook

Date: 09 JUNE 2020

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Purpose: Variable definitions and meta-data for ACORN dataset

More information: acornregistry.org

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Variable / Field Name** | **Field Label**  ***Field Note*** | **Field Attributes (Field Type, Validation, Choices, Calculations, etc.)** |
| Instrument: **Demograph Admin** (demograph\_admin) | | | |
| 1 | pers\_age | Age | Number |
| 2 | pers\_sex | Gender | |  |  | | --- | --- | | 1 | Male | | 2 | Female | | 999 | Unknown/Not stated | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 3 | sch\_edu | Highest year of school completed | |  |  | | --- | --- | | 1 | Year 12 | | 2 | Year 11 | | 3 | Year 10 | | 4 | Year 9 | | 5 | Year 8 or below | | 6 | No schooling | | 999 | Unknown/Not stated | |
| 4 | non\_sch\_edu | Highest level of non-school education | |  |  | | --- | --- | | 1 | Trade Certificate | | 2 | Advanced Diploma | | 3 | Bachelor Degree | | 4 | Graduate Diploma | | 5 | Postgraduate Degree | | 6 | None | | 999 | Unknown/Not stated | |
| 5 | bmi | BMI  *auto calculated* | calc Calculation:  round(([wgt]\*10000)/(([hgt])^(2)),1) |

|  |  |  |  |
| --- | --- | --- | --- |
| Instrument: **Baseline Medical** (baseline\_medical) | | | |
| 6 | proc | Section Header: *Patient Index Surgery Details*  Procedure | |  |  | | --- | --- | | 1 | Primary joint replacement | | 2 | Unicompartment hip replacement | | 3 | Unicompartment knee replacement | | 4 | Revision surgery | | 999 | Unknown/Not stated | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7 | joint | Joint replaced | |  |  | | --- | --- | | 1 | hip | | 2 | knee | | 999 | Unknown/Not stated | |
| 8 | side | Side of joint replacement | |  |  | | --- | --- | | 1 | Right | | 2 | Left | | 3 | Both | | 999 | Unknown/Not stated | |
| 9 | pjr\_diag | Section Header: *Diagnosis/Reason for Surgery* |  |
|  | Show the field ONL | PJR diagnosis | |  |  | | --- | --- | | 1 | Osteoarthritis | | 2 | Rheumatoid Arthritis | | 3 | DDH | | 4 | Other inflammatory arthritis | | 5 | Osteonecrosis/AVN | | 6 | Tumour | | 89 | Other | | 999 | Unknown/Not stated | |
|  | Y if: |  |  |
|  | [proc]="1" or [proc] |  |  |
|  | ="2" or [proc]="3" |  |  |
| 10 | pjr\_diag\_oth  Show the field ONL Y if:  [proc]="1" or [proc]  ="2" or [proc]="3" an d [pjr\_diag]="89" | If 'other', specify diagnosis: | text |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 11 | rjr\_diag  Show the field ONL Y if:  [proc]="4" | Revision diagnosis | |  |  | | --- | --- | | 1 | Loosening | | 2 | Lysis | | 3 | Dislocation | | 4 | Implant breakage | | 5 | Infection | | 6 | Fracture | | 89 | Other | | 999 | Unknown/Not stated | |
| 12 | rjr\_diag\_oth  Show the field ONL Y if:  [proc]="4" and [rjr\_di ag]="89" | If 'other', specify diagnosis: | text |
| 13 | tjr\_any | Section Header: *Previous Joint Replacement*  Any previous hip or knee replacement? | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |
|  |  |  |  |
|  |  |  |  |
| 14 | kr\_prev | Any previous knee replacement surgery |  |
|  | Show the field ONL | *Any previous knee replacement* | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |
|  | Y if: |  |  |
|  | [tjr\_any]="1" |  |  |
| 15 | kr\_prev\_side  Show the field ONL Y if:  [tjr\_any]="1" and [kr\_ prev]="1" | Side of previous knee replacement | |  |  | | --- | --- | | 1 | Right | | 2 | Left | | 3 | Both | | 999 | Unknown/Not stated | |

Do you take daily medication for the condition?

cc\_hd\_meds

Show the field ONL Y if:

[cc\_hd]="1"

21

Have you ever been told by a doctor that you have a heart condition or disease?

cc\_hd

20

Do you experience other lower limb joint problems that interfere with your mobility?

cc\_ii\_arth

19

Section Header: *Comorbid Conditions*

Do you experience low back problems that intefere with your mobility?

cc\_lbp

18

Side of previous hip replacement

hr\_prev\_side

Show the field ONL Y if:

[tjr\_any]="1" and [hr\_ prev]="1"

17

Any previous hip replacement

hr\_prev

Show the field ONL Y if:

[tjr\_any]="1"

16

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Right |
| 2 | Left |
| 3 | Both |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 3 | Yes, including high BP (v7 form) |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

1. cc\_hbp
2. cc\_hbp\_meds

Show the field ONL Y if:

[cc\_hbp]="1"

1. cc\_diab
2. cc\_diab\_meds

Show the field ONL Y if:

[cc\_diab]="1"

1. cc\_sd
2. cc\_sd\_meds

Show the field ONL Y if:

[cc\_sd]="1"

1. cc\_lud

Have you ever been told by a doctor that you have high blood pressure?

Do you take daily medication for the condition?

Have you ever been told by a doctor that you have diabetes?

Do you take daily medication for the condition?

Have you ever been told by a doctor that you have a stomach/GIT condition or disease?

Do you take daily medication for the condition?

Have you ever been told by a doctor that you have a lung disease or condition?

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

1. cc\_lud\_meds

Show the field ONL Y if:

[cc\_lud]="1"

1. cc\_rf
2. cc\_rf\_meds

Show the field ONL Y if:

[cc\_rf]="1"

1. cc\_livd
2. cc\_livd\_meds

Show the field ONL Y if:

[cc\_livd]="1"

1. cc\_nc
2. cc\_nc\_meds

Show the field ONL Y if:

[cc\_nc]="1"

Do you take daily medication for the condition?

Have you ever been told by a doctor that you have renal failure?

Do you take daily medication or have regular dialysis for the condition?

Have you ever been told by a doctor that you have a liver disease or condition?

Do you take daily medication for the condition?

Have you ever been told by a doctor that you have a neurological disease or condition?

Do you take daily medication for the condition?

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 36 | cc\_dep | Have you ever been told by a doctor that you have depression or anxiety? |  |
| 37 | cc\_dep\_meds  Show the field ONL Y if:  [cc\_dep]="1" | Do you take daily medication for the condition? |  |
| Instrument: **Proms** (proms) | | | |
| 38 | q1\_eq5d\_mobility | Section Header: *Baseline EQ5D/EQVAS*  EQ5D Mobility  *Preoperative score* | |  |  | | --- | --- | | 1 | I have no problems with walking around | | 2 | I have slight problems with walking around | | 3 | I have moderate problems with walking around | | 4 | I have severe problems with walking around | | 5 | I am unable to walk around | | 999 | Unknown/Not stated | |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 39 | q1\_eq5d\_mobility\_ta s | EQ5D Mobility (Tas)  *Preoperative score* | |  |  | | --- | --- | | 6 | I have no problems walking about | | 7 | I have some problems walking about | | 8 | I have a lot of problems walking about | | 999 | Unknown/Not stated | |
|  | Show the field ONL Y if:  [hosp] = '9' or [hosp]  = '12' |  |  |
| 40 | q1\_eq5d\_personal\_c are | EQ5D Personal Care  *Preoperative score* |  |
| 41 | q1\_eq5d\_personal\_c are\_tas | EQ5D-3L Personal Care (Tas)  *Preoperative score* |  |
|  | Show the field ONL Y if:  [hosp] = '9' or [hosp]  = '12' |  |  |

|  |  |
| --- | --- |
| 6 | I have no problems washing or dressing myself |
| 7 | I have some problems washing or dressing myself |
| 8 | I have a lot of problems washing or dressing myself |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I have no problems with washing or dressing myself |
| 2 | I have slight problems with washing or dressing myself |
| 3 | I have moderate problems with washing or dressing myself |
| 4 | I have severe problems with washing or dressing myself |
| 5 | I am unable to washing or dressing myself |
| 999 | Unknown/Not stated |

EQ5D Discomfort

*Preoperative score*

q1\_eq5d\_discomfort

44

EQ5D-3L Usual Activities (Tas)

*Preoperative score*

q1\_eq5d\_usual\_acti vities\_tas

Show the field ONL Y if:

[hosp] = '9' or [hosp]

= '12'

43

EQ5D Usual Activities

*Preoperative score*

q1\_eq5d\_usual\_acti vities

42

|  |  |
| --- | --- |
| 1 | I have no problems doing my usual activities |
| 2 | I have slight problems doing my usual activities |
| 3 | I have moderate problems doing my usual activities |
| 4 | I have severe problems doing my usual activities |
| 5 | I am unable to do my usual activities |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 6 | I have no problems doing my usual activities |
| 7 | I have some problems doing my usual activities |
| 8 | I have a lot of problems doing my usual activities |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I have no pain or discomfort |
| 2 | I have slight pain or discomfort |
| 3 | I have moderate pain or discomfort |
| 4 | I have severe pain or discomfort |
| 5 | I have extreme pain or discomfort |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 45 | q1\_eq5d\_discomfort  \_tas | EQ5D-3L Discomfort (Tas)  *Preoperative score* |  |
|  | Show the field ONL Y if:  [hosp] = '9' or [hosp]  = '12' |  |  |
| 46 | q1\_eq5d\_anxiety | EQ5D Anxiety  *Preoperative score* |  |
| 47 | q1\_eq5d\_anxiety\_ta s | EQ5D-3L Anxiety (Tas)  *Preoperative score* |  |
|  | Show the field ONL Y if:  [hosp] = '9' or [hosp]  = '12' |  |  |
| 48 | q1\_eq5d\_vas | EQ VAS 0 to 100  *Preoperative score - must be a whole number* | integer, Min: 0, Max: 100 |

|  |  |
| --- | --- |
| 6 | I have no pain or discomfort |
| 7 | I have some pain or discomfort |
| 8 | I have a lot of pain or discomfort |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I am not anxious or depressed |
| 2 | I am slightly anxious or depressed |
| 3 | I am moderately anxious or depressed |
| 4 | I am severely anxious or depressed |
| 5 | I am extremely anxious or depressed |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 6 | I am not worried, sad or unhappy |
| 7 | I am a bit worried, sad or unhappy |
| 8 | I am very worried, sad or unhappy |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 49 | q1\_oxf\_hs\_pain | Section Header: *Baseline Oxford Hip Score* |  |
|  | Show the field ONL Y if:  [joint]="1" | Q1 OHS Pain: During the past 4 weeks how would you describe the pain you usually have from your hip? |  |
| 50 | q1\_oxf\_hs\_washing  Show the field ONL Y if:  [joint]="1" | Q2 OHS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your hip? |  |
| 51 | q1\_oxf\_hs\_transport  Show the field ONL Y if:  [joint]="1" | Q3 OHS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use) |  |
| 52 | q1\_oxf\_hs\_dressing  Show the field ONL Y if:  [joint]="1" | Q4 OHS Dressing: During the past 4 weeks have you been able to put on a pair of socks, stockings or tights? |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 53 | q1\_oxf\_hs\_shopping  Show the field ONL Y if:  [joint]="1" | Q5 OHS Shopping: During the past 4 weeks could you do the household shopping on your own? |  |
| 54 | q1\_oxf\_hs\_walking  Show the field ONL Y if:  [joint]="1" | Q6 OHS Walking: During the past 4 weeks for how long have you been able to walk before pain from your hip becomes severe? (with or without a stick) |  |
| 55 | q1\_oxf\_hs\_stairs  Show the field ONL Y if:  [joint]="1" | Q7 OHS Stairs: During the past 4 weeks have you been able to climb a flight of stairs? |  |
| 56 | q1\_oxf\_hs\_standing  Show the field ONL Y if:  [joint]="1" | Q8 OHS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your hip? |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 57 | q1\_oxf\_hs\_limping  Show the field ONL Y if:  [joint]="1" | Q9 OHS Limping: During the past 4 weeks have you been limping when walking, because of your hip? |  |
| 58 | q1\_oxf\_hs\_sudden\_ pain  Show the field ONL Y if:  [joint]="1" | Q10 OHS Sudden Pain: During the past 4 weeks have you had any sudden, severe pain  - 'shooting', 'stabbing' or 'spasms' - from the affected hip? |  |
| 59 | q1\_oxf\_hs\_work  Show the field ONL Y if:  [joint]="1" | Q11 OHS Work: During the past 4 weeks how much has pain from your hip interfered with your usual work (including housework)? |  |
| 60 | q1\_oxf\_hs\_night\_pai n  Show the field ONL Y if:  [joint]="1" | Q12 OHS Night Pain: During the past 4 weeks have you been troubled by pain from your hip in bed at night? |  |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No days = 4 |
| 3 | Only 1 or 2 days = 3 |
| 2 | Some days = 2 |
| 1 | Most days = 1 |
| 0 | Every day = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 61 | q1\_oxf\_hs\_total  Show the field ONL Y if:  [joint]="1" | OHS Total  *Preoperative total score* | calc  Calculation: ([q1\_oxf\_hs\_pain]+ [q1\_oxf\_hs\_washing]+ [q1\_oxf\_hs\_transport]+ [q1\_oxf\_hs\_dressing]+ [q1\_oxf\_hs\_shopping]+ [q1\_oxf\_hs\_walking]+ [q1\_oxf\_hs\_stairs]+ [q1\_oxf\_hs\_standing]+ [q1\_oxf\_hs\_limping]+ [q1\_oxf\_hs\_sudden\_pain]+ [q1\_oxf\_hs\_work]+ [q1\_oxf\_hs\_night\_pain]) |
| 62 | q1\_bi\_oxf\_hs\_pain | Section Header: *Baseline Oxford Hip Score Second Joint (LEFT)* |  |
|  | Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q1 OHS Pain: During the past 4 weeks how would you describe the pain you usually have from your hip? |  |
| 63 | q1\_bi\_oxf\_hs\_washi ng  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q2 OHS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your hip? |  |
| 64 | q1\_bi\_oxf\_hs\_transp ort  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q3 OHS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use) |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 65 | q1\_bi\_oxf\_hs\_dressi ng  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q4 OHS Dressing: During the past 4 weeks have you been able to put on a pair of socks, stockings or tights? |  |
| 66 | q1\_bi\_oxf\_hs\_shopp ing  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q5 OHS Shopping: During the past 4 weeks could you do the household shopping on your own? |  |
| 67 | q1\_bi\_oxf\_hs\_walkin g  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q6 OHS Walking: During the past 4 weeks for how long have you been able to walk before pain from your hip becomes severe? (with or without a stick) |  |
| 68 | q1\_bi\_oxf\_hs\_stairs  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q7 OHS Stairs: During the past 4 weeks have you been able to climb a flight of stairs? |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 69 | q1\_bi\_oxf\_hs\_standi ng  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q8 OHS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your hip? |  |
| 70 | q1\_bi\_oxf\_hs\_limpin g  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q9 OHS Limping: During the past 4 weeks have you been limping when walking, because of your hip? |  |
| 71 | q1\_bi\_oxf\_hs\_sudde n\_pain  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q10 OHS Sudden Pain: During the past 4 weeks have you had any sudden, severe pain  - 'shooting', 'stabbing' or 'spasms' - from the affected hip? |  |
| 72 | q1\_bi\_oxf\_hs\_work  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q11 OHS Work: During the past 4 weeks how much has pain from your hip interfered with your usual work (including housework)? |  |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No days = 4 |
| 3 | Only 1 or 2 days = 3 |
| 2 | Some days = 2 |
| 1 | Most days = 1 |
| 0 | Every day = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 73 | q1\_bi\_oxf\_hs\_night\_ pain  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q12 OHS Night Pain: During the past 4 weeks have you been troubled by pain from your hip in bed at night? |  |
| 74 | q1\_bi\_oxf\_hs\_total  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | OHS Total Second Hip  *Preoperative total score* | calc  Calculation: ([q1\_bi\_oxf\_hs\_pain]+ [q1\_bi\_oxf\_hs\_washing]+ [q1\_bi\_oxf\_hs\_transport]+ [q1\_bi\_oxf\_hs\_dressing]+ [q1\_bi\_oxf\_hs\_shopping]+ [q1\_bi\_oxf\_hs\_walking]+ [q1\_bi\_oxf\_hs\_stairs]+ [q1\_bi\_oxf\_hs\_standing]+ [q1\_bi\_oxf\_hs\_limping]+ [q1\_bi\_oxf\_hs\_sudden\_pain]+ [q1\_bi\_oxf\_hs\_work]+ [q1\_bi\_oxf\_hs\_night\_pain]) |
| 75 | q1\_oxf\_ks\_pain | Section Header: *Baseline Oxford Knee Score* |  |
|  | Show the field ONL Y if:  [joint]="2" | Q1 OKS Pain: During the past 4 weeks how would you describe the pain you usually have from your knee?  *Preoperative score* |  |
| 76 | q1\_oxf\_ks\_washing  Show the field ONL Y if:  [joint]="2" | Q2 OKS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your knee?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 77 | q1\_oxf\_ks\_transport  Show the field ONL Y if:  [joint]="2" | Q3 OKS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use) *Preoperative score* |  |
| 78 | q1\_oxf\_ks\_walking  Show the field ONL Y if:  [joint]="2" | Q4 OKS Walking: During the past 4 weeks for how long have you been able to walk before pain from your knee becomes severe? (with or without a stick)  *Preoperative score* |  |
| 79 | q1\_oxf\_ks\_standing  Show the field ONL Y if:  [joint]="2" | Q5 OKS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your knee?  *Preoperative score* |  |
| 80 | q1\_oxf\_ks\_limping  Show the field ONL Y if:  [joint]="2" | Q6 OKS Limping: During the past 4 weeks have you been limping when walking, because of your knee?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 81 | q1\_oxf\_ks\_kneeling  Show the field ONL Y if:  [joint]="2" | Q7 OKS Kneeling: During the past 4 weeks could you kneel down and get up again afterwards?  *Preoperative score* |  |
| 82 | q1\_oxf\_ks\_night\_pai n  Show the field ONL Y if:  [joint]="2" | Q8 OKS Night Pain: During the past 4 weeks have you been troubled by pain from your knee in bed at night?  *Preoperative score* |  |
| 83 | q1\_oxf\_ks\_work  Show the field ONL Y if:  [joint]="2" | Q9 OKS Work: During the past 4 weeks how much has pain from your knee interfered with your usual work (including housework)?  *Preoperative score* |  |
| 84 | q1\_oxf\_ks\_conf  Show the field ONL Y if:  [joint]="2" | Q10 OKS Confidence: During the past 4 weeks have you felt that your knee might suddenly 'give way' or let you down?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 85 | q1\_oxf\_ks\_shopping  Show the field ONL Y if:  [joint]="2" | Q11 OKS Shopping: During the past 4 weeks could you do the household shopping on your own?  *Preoperative score* |  |
| 86 | q1\_oxf\_ks\_stairs  Show the field ONL Y if:  [joint]="2" | Q12 OKS Stairs: During the past 4 weeks could you walk down one flight of stairs? *Preoperative score* |  |
| 87 | q1\_oxf\_ks\_total  Show the field ONL Y if:  [joint]="2" | OKS Total  *Preoperative total score* | calc  Calculation: ([q1\_oxf\_ks\_pain]+ [q1\_oxf\_ks\_washing]+ [q1\_oxf\_ks\_transport]+ [q1\_oxf\_ks\_walking]+ [q1\_oxf\_ks\_standing]+ [q1\_oxf\_ks\_limping]+ [q1\_oxf\_ks\_kneeling]+ [q1\_oxf\_ks\_night\_pain]+ [q1\_oxf\_ks\_work]+[q1\_oxf\_ks\_conf]+ [q1\_oxf\_ks\_shopping]+ [q1\_oxf\_ks\_stairs]) |
| 88 | q1\_bi\_oxf\_ks\_pain | Section Header: *Baseline Oxford Knee Score Second Joint (LEFT)* |  |
|  | Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q1 OKS Pain: During the past 4 weeks how would you describe the pain you usually have from your knee?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 89 | q1\_bi\_oxf\_ks\_washi ng  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q2 OKS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your knee?  *Preoperative score* |  |
| 90 | q1\_bi\_oxf\_ks\_transp ort  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q3 OKS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use) *Preoperative score* |  |
| 91 | q1\_bi\_oxf\_ks\_walkin g  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q4 OKS Walking: During the past 4 weeks for how long have you been able to walk before pain from your knee becomes severe? (with or without a stick)  *Preoperative score* |  |
| 92 | q1\_bi\_oxf\_ks\_standi ng  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q5 OKS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your knee?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 93 | q1\_bi\_oxf\_ks\_limpin g  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q6 OKS Limping: During the past 4 weeks have you been limping when walking, because of your knee?  *Preoperative score* |  |
| 94 | q1\_bi\_oxf\_ks\_kneeli ng  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q7 OKS Kneeling: During the past 4 weeks could you kneel down and get up again afterwards?  *Preoperative score* |  |
| 95 | q1\_bi\_oxf\_ks\_night\_ pain  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q8 OKS Night Pain: During the past 4 weeks have you been troubled by pain from your knee in bed at night?  *Preoperative score* |  |
| 96 | q1\_bi\_oxf\_ks\_work  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q9 OKS Work: During the past 4 weeks how much has pain from your knee interfered with your usual work (including housework)?  *Preoperative score* |  |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 97 | q1\_bi\_oxf\_ks\_conf  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q10 OKS Confidence: During the past 4 weeks have you felt that your knee might suddenly 'give way' or let you down?  *Preoperative score* |  |
| 98 | q1\_bi\_oxf\_ks\_shopp ing  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q11 OKS Shopping: During the past 4 weeks could you do the household shopping on your own?  *Preoperative score* |  |
| 99 | q1\_bi\_oxf\_ks\_stairs  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q12 OKS Stairs: During the past 4 weeks could you walk down one flight of stairs? *Preoperative score* |  |
| 100 | q1\_bi\_oxf\_ks\_total  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | OKS Total Second Knee  *Preoperative total score second joint bilateral surgery* | calc  Calculation: ([q1\_bi\_oxf\_ks\_pain]+ [q1\_bi\_oxf\_ks\_washing]+ [q1\_bi\_oxf\_ks\_transport]+ [q1\_bi\_oxf\_ks\_walking]+ [q1\_bi\_oxf\_ks\_standing]+ [q1\_bi\_oxf\_ks\_limping]+ [q1\_bi\_oxf\_ks\_kneeling]+ [q1\_bi\_oxf\_ks\_night\_pain]+ [q1\_bi\_oxf\_ks\_work]+ [q1\_bi\_oxf\_ks\_conf]+ [q1\_bi\_oxf\_ks\_shopping]+ [q1\_bi\_oxf\_ks\_stairs]) |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 101 | manoxtotalbase | Manual Baseline Oxford Total | integer, Min: 0, Max: 48 |
| 102 | mth6\_eq5d\_mobility | Section Header: *Six Month EQ5D/EQVAS*  EQ5D Mobility  *6 month score* |  |
| 103 | mth6\_eq5d\_persona l\_care | EQ5D Personal Care  *6 month score* |  |

|  |  |
| --- | --- |
| 1 | I have no problems with walking around |
| 2 | I have slight problems with walking around |
| 3 | I have moderate problems with walking around |
| 4 | I have severe problems with walking around |
| 5 | I am unable to walk around |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I have no problems with washing or dressing myself |
| 2 | I have slight problems with washing or dressing myself |
| 3 | I have moderate problems with washing or dressing myself |
| 4 | I have severe problems with washing or dressing myself |
| 5 | I am unable to washing or dressing myself |
| 999 | Unknown/Not stated |

1. mth6\_eq5d\_usual\_a ct
2. mth6\_eq5d\_discomf ort
3. mth6\_eq5d\_anxiety

EQ5D Usual Activities

*6 month score*

EQ5D Discomfort

*6 month score*

EQ5D Anxiety

*6 month score*

|  |  |
| --- | --- |
| 1 | I have no problems doing my usual activities |
| 2 | I have slight problems doing my usual activities |
| 3 | I have moderate problems doing my usual activities |
| 4 | I have severe problems doing my usual activities |
| 5 | I am unable to do my usual activities |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I have no pain or discomfort |
| 2 | I have slight pain or discomfort |
| 3 | I have moderate pain or discomfort |
| 4 | I have severe pain or discomfort |
| 5 | I have extreme pain or discomfort |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | I am not anxious or depressed |
| 2 | I am slightly anxious or depressed |
| 3 | I am moderately anxious or depressed |
| 4 | I am severely anxious or depressed |
| 5 | I am extremely anxious or depressed |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 107 | mth6\_eq5d\_vas | EQ VAS 0 to 100  *6 month score - must be a whole number* | integer, Min: 0, Max: 100 |
| 108 | mth6\_oxf\_hs\_pain | Section Header: *Six Month Oxford Hip Score* |  |
|  | Show the field ONL Y if:  [joint]="1" | Q1 OHS Pain: During the past 4 weeks how would you describe the pain you usually have from your hip?  *6 month score* |  |
| 109 | mth6\_oxf\_hs\_washi ng  Show the field ONL Y if:  [joint]="1" | Q2 OHS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your hip? *6 month score* |  |
| 110 | mth6\_oxf\_hs\_transp ort  Show the field ONL Y if:  [joint]="1" | Q3 OHS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use)  *6 month score* |  |
| 111 | mth6\_oxf\_hs\_dressi ng  Show the field ONL Y if:  [joint]="1" | Q4 OHS Dressing: During the past 4 weeks have you been able to put on a pair of socks, stockings or tights?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 112 | mth6\_oxf\_hs\_shoppi ng  Show the field ONL Y if:  [joint]="1" | Q5 OHS Shopping: During the past 4 weeks could you do the household shopping on your own?  *6 month score* |  |
| 113 | mth6\_oxf\_hs\_walkin g  Show the field ONL Y if:  [joint]="1" | Q6 OHS Walking: During the past 4 weeks for how long have you been able to walk before pain from your hip becomes severe? (with or without a stick)  *6 month score* |  |
| 114 | mth6\_oxf\_hs\_stairs  Show the field ONL Y if:  [joint]="1" | Q7 OHS Stairs: During the past 4 weeks have you been able to climb a flight of stairs?  *6 month score* |  |
| 115 | mth6\_oxf\_hs\_standi ng  Show the field ONL Y if:  [joint]="1" | Q8 OHS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your hip?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 116 | mth6\_oxf\_hs\_limpin g  Show the field ONL Y if:  [joint]="1" | Q9 OHS Limping: During the past 4 weeks have you been limping when walking, because of your hip?  *6 month score* |  |
| 117 | mth6\_oxf\_hs\_sudde n\_pain  Show the field ONL Y if:  [joint]="1" | Q10 OHS Sudden Pain: During the past 4 weeks have you had any sudden, severe pain  - 'shooting', 'stabbing' or 'spasms' - from the affected hip?  *6 month score* |  |
| 118 | mth6\_oxf\_hs\_work  Show the field ONL Y if:  [joint]="1" | Q11 OHS Work: During the past 4 weeks how much has pain from your hip interfered with your usual work (including housework)?  *6 month score* |  |
| 119 | mth6\_oxf\_hs\_night\_ pain  Show the field ONL Y if:  [joint]="1" | Q12 OHS Night Pain: During the past 4 weeks have you been troubled by pain from your hip in bed at night?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No days = 4 |
| 3 | Only 1 or 2 days = 3 |
| 2 | Some days = 2 |
| 1 | Most days = 1 |
| 0 | Every day = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 120 | mth6\_oxf\_hs\_total  Show the field ONL Y if:  [joint]="1" | OHS Total  *6 month total score* | calc  Calculation: ([mth6\_oxf\_hs\_pain]+ [mth6\_oxf\_hs\_washing]+ [mth6\_oxf\_hs\_transport]+ [mth6\_oxf\_hs\_dressing]+ [mth6\_oxf\_hs\_shopping]+ [mth6\_oxf\_hs\_walking]+ [mth6\_oxf\_hs\_stairs]+ [mth6\_oxf\_hs\_standing]+ [mth6\_oxf\_hs\_limping]+ [mth6\_oxf\_hs\_sudden\_pain]+ [mth6\_oxf\_hs\_work]+ [mth6\_oxf\_hs\_night\_pain]) |
| 121 | mth6\_bi\_oxf\_hs\_pai n | Section Header: *Six Month Oxford Hip Score Second Joint (LEFT)* |  |
|  | Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q1 OHS Pain: During the past 4 weeks how would you describe the pain you usually have from your hip?  *6 month score* |  |
| 122 | mth6\_bi\_oxf\_hs\_wa shing  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q2 OHS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your hip? *6 month score* |  |
| 123 | mth6\_bi\_oxf\_hs\_tran sport  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q3 OHS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use)  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 124 | mth6\_bi\_oxf\_hs\_dre ssing  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q4 OHS Dressing: During the past 4 weeks have you been able to put on a pair of socks, stockings or tights?  *6 month score* |  |
| 125 | mth6\_bi\_oxf\_hs\_sho pping  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q5 OHS Shopping: During the past 4 weeks could you do the household shopping on your own?  *6 month score* |  |
| 126 | mth6\_bi\_oxf\_hs\_wal king  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q6 OHS Walking: During the past 4 weeks for how long have you been able to walk before pain from your hip becomes severe? (with or without a stick)  *6 month score* |  |
| 127 | mth6\_bi\_oxf\_hs\_stai rs  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q7 OHS Stairs: During the past 4 weeks have you been able to climb a flight of stairs?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 128 | mth6\_bi\_oxf\_hs\_sta nding  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q8 OHS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your hip?  *6 month score* |  |
| 129 | mth6\_bi\_oxf\_hs\_lim ping  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q9 OHS Limping: During the past 4 weeks have you been limping when walking, because of your hip?  *6 month score* |  |
| 130 | mth6\_bi\_oxf\_hs\_sud dpain  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q10 OHS Sudden Pain: During the past 4 weeks have you had any sudden, severe pain  - 'shooting', 'stabbing' or 'spasms' - from the affected hip?  *6 month score* |  |
| 131 | mth6\_bi\_oxf\_hs\_wor k  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q11 OHS Work: During the past 4 weeks how much has pain from your hip interfered with your usual work (including housework)?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No days = 4 |
| 3 | Only 1 or 2 days = 3 |
| 2 | Some days = 2 |
| 1 | Most days = 1 |
| 0 | Every day = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 132 | mth6\_bi\_oxf\_hs\_nig ht\_pain  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | Q12 OHS Night Pain: During the past 4 weeks have you been troubled by pain from your hip in bed at night?  *6 month score* |  |
| 133 | mth6\_bi\_oxf\_hs\_tota l  Show the field ONL Y if:  [joint]="1" and [side]  ="3" | OHS Total Second Hip  *6 month total score* | calc  Calculation: ([mth6\_bi\_oxf\_hs\_pain]+ [mth6\_bi\_oxf\_hs\_washing]+ [mth6\_bi\_oxf\_hs\_transport]+ [mth6\_bi\_oxf\_hs\_dressing]+ [mth6\_bi\_oxf\_hs\_shopping]+ [mth6\_bi\_oxf\_hs\_walking]+ [mth6\_bi\_oxf\_hs\_stairs]+ [mth6\_bi\_oxf\_hs\_standing]+ [mth6\_bi\_oxf\_hs\_limping]+ [mth6\_bi\_oxf\_hs\_suddpain]+ [mth6\_bi\_oxf\_hs\_work]+ [mth6\_bi\_oxf\_hs\_night\_pain]) |
| 134 | mth6\_oxf\_ks\_pain | Section Header: *Six Month Oxford Knee Score* |  |
|  | Show the field ONL Y if:  [joint]="2" | Q1 OKS Pain: During the past 4 weeks how would you describe the pain you usually have from your knee?  *6 month score* |  |
| 135 | mth6\_oxf\_ks\_washin g  Show the field ONL Y if:  [joint]="2" | Q2 OKS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your knee?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 136 | mth6\_oxf\_ks\_transp ort  Show the field ONL Y if:  [joint]="2" | Q3 OKS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use)  *6 month score* |  |
| 137 | mth6\_oxf\_ks\_walkin g  Show the field ONL Y if:  [joint]="2" | Q4 OKS Walking: During the past 4 weeks for how long have you been able to walk before pain from your knee becomes severe? (with or without a stick)  *6 month score* |  |
| 138 | mth6\_oxf\_ks\_standi ng  Show the field ONL Y if:  [joint]="2" | Q5 OKS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your knee?  *6 month score* |  |
| 139 | mth6\_oxf\_ks\_limpin g  Show the field ONL Y if:  [joint]="2" | Q6 OKS Limping: During the past 4 weeks have you been limping when walking, because of your knee?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | No trouble at all = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 140 | mth6\_oxf\_ks\_kneeli ng  Show the field ONL Y if:  [joint]="2" | Q7 OKS Kneeling: During the past 4 weeks could you kneel down and get up again afterwards?  *6 month score* |  |
| 141 | mth6\_oxf\_ks\_night\_ pain  Show the field ONL Y if:  [joint]="2" | Q8 OKS Night Pain: During the past 4 weeks have you been troubled by pain from your knee in bed at night?  *6 month score* |  |
| 142 | mth6\_oxf\_ks\_work  Show the field ONL Y if:  [joint]="2" | Q9 OKS Work: During the past 4 weeks how much has pain from your knee interfered with your usual work (including housework)?  *6 month score* |  |
| 143 | mth6\_oxf\_ks\_conf  Show the field ONL Y if:  [joint]="2" | Q10 OKS Confidence: During the past 4 weeks have you felt that your knee might suddenly 'give way' or let you down?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 144 | mth6\_oxf\_ks\_shoppi ng  Show the field ONL Y if:  [joint]="2" | Q11 OKS Shopping: During the past 4 weeks could you do the household shopping on your own?  *6 month score* |  |
| 145 | mth6\_oxf\_ks\_stairs  Show the field ONL Y if:  [joint]="2" | Q12 OKS Stairs: During the past 4 weeks could you walk down one flight of stairs? *6 month score* |  |
| 146 | mth6\_oxf\_ks\_total  Show the field ONL Y if:  [joint]="2" | OKS Total  *6 month total score* | calc  Calculation: ([mth6\_oxf\_ks\_pain]+ [mth6\_oxf\_ks\_washing]+ [mth6\_oxf\_ks\_transport]+ [mth6\_oxf\_ks\_walking]+ [mth6\_oxf\_ks\_standing]+ [mth6\_oxf\_ks\_limping]+ [mth6\_oxf\_ks\_kneeling]+ [mth6\_oxf\_ks\_night\_pain]+ [mth6\_oxf\_ks\_work]+ [mth6\_oxf\_ks\_conf]+ [mth6\_oxf\_ks\_shopping]+ [mth6\_oxf\_ks\_stairs]) |
| 147 | mth6\_bi\_oxf\_ks\_pai n | Section Header: *Six Month Oxford Knee Score Second Joint (LEFT)* |  |
|  | Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q1 OKS Pain: During the past 4 weeks how would you describe the pain you usually have from your knee?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very mild = 3 |
| 2 | Mild = 2 |
| 1 | Moderate = 1 |
| 0 | Severe = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 148 | mth6\_bi\_oxf\_ks\_was hing  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q2 OKS Washing: During the past 4 weeks have you had any trouble with washing and drying yourself (all over) because of your knee?  *6 month score* |  |
| 149 | mth6\_bi\_oxf\_ks\_tran sport  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q3 OKS Transport: During the past 4 weeks have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use)  *6 month score* |  |
| 150 | mth6\_bi\_oxf\_ks\_wal king  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q4 OKS Walking: During the past 4 weeks for how long have you been able to walk before pain from your knee becomes severe? (with or without a stick)  *6 month score* |  |
| 151 | mth6\_bi\_oxf\_ks\_sta nding  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q5 OKS Standing: During the past 4 weeks after a meal (sat at a table), how painful has it been for you to stand up from a chair because of your knee?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | None = 4 |
| 3 | Very little trouble = 3 |
| 2 | Moderate trouble = 2 |
| 1 | Extreme difficulty = 1 |
| 0 | Impossible to do = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No pain/more than 30 minutes  = 4 |
| 3 | 16 to 30 minutes = 3 |
| 2 | 5 to 15 minutes = 2 |
| 1 | Around the house only = 1 |
| 0 | Not at all/severe on walking = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all painful = 4 |
| 3 | Slightly painful = 3 |
| 2 | Moderately painful = 2 |
| 1 | Very painful = 1 |
| 0 | Unbearable = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 152 | mth6\_bi\_oxf\_ks\_lim ping  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q6 OKS Limping: During the past 4 weeks have you been limping when walking, because of your knee?  *6 month score* |  |
| 153 | mth6\_bi\_oxf\_ks\_kne eling  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q7 OKS Kneeling: During the past 4 weeks could you kneel down and get up again afterwards?  *6 month score* |  |
| 154 | mth6\_bi\_oxf\_ks\_nig ht\_pain  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q8 OKS Night Pain: During the past 4 weeks have you been troubled by pain from your knee in bed at night?  *6 month score* |  |
| 155 | mth6\_bi\_oxf\_ks\_wor k  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q9 OKS Work: During the past 4 weeks how much has pain from your knee interfered with your usual work (including housework)?  *6 month score* |  |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | No nights = 4 |
| 3 | Only 1 or 2 nights = 3 |
| 2 | Some nights = 2 |
| 1 | Most nights = 1 |
| 0 | Every night = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Not at all = 4 |
| 3 | A little bit = 3 |
| 2 | Moderately = 2 |
| 1 | Greatly = 1 |
| 0 | Totally = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| 156 | mth6\_bi\_oxf\_ks\_con f  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q10 OKS Confidence: During the past 4 weeks have you felt that your knee might suddenly 'give way' or let you down?  *6 month score* |  |
| 157 | mth6\_bi\_oxf\_ks\_sho pping  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q11 OKS Shopping: During the past 4 weeks could you do the household shopping on your own?  *6 month score* |  |
| 158 | mth6\_bi\_oxf\_ks\_stai rs  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | Q12 OKS Stairs: During the past 4 weeks could you walk down one flight of stairs? *6 month score* |  |
| 159 | mth6\_bi\_oxf\_ks\_tota l  Show the field ONL Y if:  [joint]="2" and [side]  ="3" | OKS Total Second Knee  *6 month total score* | calc  Calculation: ([mth6\_bi\_oxf\_ks\_pain]+ [mth6\_bi\_oxf\_ks\_washing]+ [mth6\_bi\_oxf\_ks\_transport]+ [mth6\_bi\_oxf\_ks\_walking]+ [mth6\_bi\_oxf\_ks\_standing]+ [mth6\_bi\_oxf\_ks\_limping]+ [mth6\_bi\_oxf\_ks\_kneeling]+ [mth6\_bi\_oxf\_ks\_night\_pain]+ [mth6\_bi\_oxf\_ks\_work]+ [mth6\_bi\_oxf\_ks\_conf]+ [mth6\_bi\_oxf\_ks\_shopping]+ [mth6\_bi\_oxf\_ks\_stairs]) |

|  |  |
| --- | --- |
| 4 | Rarely/never = 4 |
| 3 | Sometimes or just at first = 3 |
| 2 | Often not just at first = 2 |
| 1 | Most of the time = 1 |
| 0 | All of the time = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 4 | Yes easily = 4 |
| 3 | With little difficulty = 3 |
| 2 | With moderate difficulty = 2 |
| 1 | With extreme difficulty = 1 |
| 0 | No impossible = 0 |
| 999 | Unknown/Not stated |

|  |  |  |  |
| --- | --- | --- | --- |
| Instrument: **Surgical** (surgical) | | | |
| 160 | los | Length of Stay (in days)  *Date of admission is day 0* | integer |

1. asa

162adm\_hdu

163planned\_hdu

Show the field ONL Y if:

[adm\_hdu]="1" 164 bld\_transf

165 transf\_source

Show the field ONL Y if: [bld\_transf]="1"

1. units\_transf

ASA Score

Admitted to a high care bed?

If yes, was the admission planned?

Blood transfusion

Source of transfused blood

Units transferred

*Record number of units*

|  |  |
| --- | --- |
| 1 | 1=A normal healthy person |
| 2 | 2=A person with mild systemic disease |
| 3 | 3=A person with severe systemic disease |
| 4 | 4=A person with severe systemic disease that is a constant threat to life |
| 5 | 5=A moribund person who is not expected to survive |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Autologous |
| 2 | Donor |
| 999 | Unknown/Not stated |

integer, Min: 0, Max: 8

1. adm\_compl
2. adm\_compl\_spec

Show the field ONL Y if: [adm\_compl]="1"

Section Header: *Admitted Complications*

Did the person experience any complications during admission?

Specify complications (all that apply)

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

checkbox

* 1. adm\_compl\_spec 1 Drug reaction
  2. adm\_compl\_spec 2 Delirium
  3. adm\_compl\_spec 3 SSI requiring oral   
      antibiotics
  4. adm\_compl\_spec 4 SSI requiring IV   
      antibiotics
  5. adm\_compl\_spec 5 SSI requiring   
      surgery with no   
      prosthesis   
      removal
  6. adm\_compl\_spec 6 SSI requiring surgery   
      with prosthesis removal
  7. adm\_compl\_spec 7 DVT
  8. adm\_compl\_spec 8 PE

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

79

89

999

adm\_compl\_spec 9 adm\_compl\_spec 10

adm\_compl\_spec 11 adm\_compl\_spec 12 adm\_compl\_spec 13 adm\_compl\_spec 14 adm\_compl\_spec 15 adm\_compl\_spec 16 adm\_compl\_spec 17

adm\_compl\_spec 18

adm\_compl\_spec 19 adm\_compl\_spec 20 adm\_compl\_spec 21 adm\_compl\_spec 22 adm\_compl\_spec 23

adm\_compl\_spec 24 adm\_compl\_spec 25

adm\_compl\_spec 79 adm\_compl\_spec 89 adm\_compl\_spec 999

Fat emboli

Respiratory infection

CVS

Dislocation Fracture Nerve injury

Bladder infection

Bladder retention

Wound dehisence

Reoperation during index admission

Pressure area Fall Hypotension Cellulitis

Superficial SSI (earlier forms)

Deep SSI (earlier forms)

Bladder infection/retention (earlier forms)

Death Other

Unknown/Not stated

|  |  |  |  |
| --- | --- | --- | --- |
| 169 | dc\_dest | Section Header: *Discharge Destination*  Discharge Destination |  |
| Instrument: **Recovery** (recovery) | | | |

|  |  |
| --- | --- |
| 1 | Usual residence or residence of relative/friend |
| 2 | Inpatient rehabilitation same hospital |
| 3 | Inpatient rehabilitation another hospital |
| 4 | Hostel if not usual place of residence |
| 5 | Nursing Home if not usual place of residence |
| 6 | Another acute care hospital |
| 7 | Death |
| 8 | Inpatient rehab (anywhere, older forms) |
| 89 | Other |
| 999 | Unknown/Not stated |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 170 | readm\_mth6 | Section Header: *Six Month Readmission*  Readmitted to any hospital since discharge from acute care for management of index joint ? | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |
| 171 | readm\_mth6\_reas  Show the field ONL Y if: [readm\_mth6]="1" | Primary reason for readmission |  |

|  |  |
| --- | --- |
| 1 | DVT |
| 2 | PE |
| 3 | MUA |
| 4 | Dislocation |
| 5 | SSI |
| 6 | Wound dehiscence |
| 7 | index joint revision |
| 89 | Other |
| 999 | Unknown/Not stated |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 172 | readm\_mth6\_oth\_sp ec  Show the field ONL Y if: [readm\_mth6]="1" | If other, specify: | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |
| 173 | readm\_mth6\_any |  | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |
| 174 | reop\_mth6 | Section Header: *Six Month Reoperation*  Reoperation on the replaced joint(s) since discharge? | |  |  | | --- | --- | | 1 | Yes | | 2 | No | | 999 | Unknown/Not stated | |

|  |  |  |  |
| --- | --- | --- | --- |
| 175 | reop\_mth6\_reason  Show the field ONL Y if: [reop\_mth6]="1" | Reason for reoperation |  |
| 176 | compl\_mth6\_nonad m | Section Header: *Six Month Reported Recovery*  Has the person reported any other problem/complication not requiring readmission? |  |

|  |  |
| --- | --- |
| 1 | Yes |
| 2 | No |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | SSI requiring surgery with no prosthesis removal |
| 2 | SSI requiring surgery with prosthesis removal |
| 3 | Dislocation |
| 4 | Joint stiffness |
| 5 | Periprosthetic fracture |
| 6 | Implant fracture |
| 7 | Bleeding |
| 8 | Pain |
| 89 | Other |
| 999 | Unknown/Not stated |

1. compl\_mth6\_nonad m\_spec

Show the field ONL Y if: [compl\_mth6\_nonad m]="1"

If yes, specify from list

checkbox

* 1. compl\_mth6\_nonadm\_spec 1
  2. compl\_mth6\_nonadm\_spec 2
  3. compl\_mth6\_nonadm\_spec 3
  4. compl\_mth6\_nonadm\_spec 4
  5. compl\_mth6\_nonadm\_spec 5
  6. compl\_mth6\_nonadm\_spec 6
  7. compl\_mth6\_nonadm\_spec 7
  8. compl\_mth6\_nonadm\_spec 8
  9. compl\_mth6\_nonadm\_spec 9
  10. compl\_mth6\_nonadm\_spec 10

SSI requiring oral antibiotics

SSI requiring IV antibiotics

DVT index leg DVT other leg DVT both legs PE

Dislocation Joint stiffness

Bladder infection/retention

Fracture

11

12

13

14

15

16

17

18

19

20

89

999

compl\_mth6\_nonadm\_spec 11 compl\_mth6\_nonadm\_spec 12 compl\_mth6\_nonadm\_spec 13 compl\_mth6\_nonadm\_spec 14 compl\_mth6\_nonadm\_spec 15

compl\_mth6\_nonadm\_spec 16 compl\_mth6\_nonadm\_spec 17 compl\_mth6\_nonadm\_spec 18 compl\_mth6\_nonadm\_spec 19 compl\_mth6\_nonadm\_spec 20 compl\_mth6\_nonadm\_spec 89 compl\_mth6\_nonadm\_spec 999

Unexpected pain Cardiac

Stroke

Leg length discrepancy

Joint or lower limb swelling

Parasthesia/Numbness Cellulitis

Neuropathy Muscle weakness

Respiratory infection Other

Unknown/Not stated

|  |  |  |  |
| --- | --- | --- | --- |
| Instrument: **Exp Satis Succ** (exp\_satis\_succ) | | | |
| 177 | q1\_exp\_pain | Section Header: *Expectations*  What are your expectations of your knee/hip pain 6 months after your surgery?  *Collected pre-operatively* |  |
| 178 | q1\_exp\_function | What are your expectations of your functional ability 6 months after your surgery?  *Collected pre-operatively* |  |
| 179 | mth6\_satisf | Section Header: *Satisfaction and Success*  How would you describe the results of your operation?  *Collected 6 months post-operatively* |  |
| 180 | mth6\_success | Overall, how are the problems now with your hip/knee compared to before your operation?  *Collected 6 months post-operatively* |  |

|  |  |
| --- | --- |
| 1 | Severe pain |
| 2 | Moderate pain |
| 3 | Slight pain |
| 4 | No pain |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 1 | Severe limitation |
| 2 | Moderate limitation |
| 3 | Slight limitation |
| 4 | No limitation |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 0 | Poor |
| 1 | Fair |
| 2 | Good |
| 3 | Very good |
| 4 | Excellent |
| 999 | Unknown/Not stated |

|  |  |
| --- | --- |
| 0 | Much worse |
| 1 | A little worse |
| 2 | About the same |
| 3 | A little better |
| 4 | Much better |
| 999 | Unknown/Not stated |