

ICF DOCUMENTATION FORM for the BRIEF ICF CORE SET FOR ACUTE INFLAMMATORY ARTHRITIS

ICF categories marked in dark grey belong to the Generic Set and are included in all documentation forms

∞ Category from the Generic Set not included in the Brief ICF Core Set for Acute Inflammatory Arthritis

BODY FUNCTIONS = physiological functions of body systems (including psychological functions) <i>How much impairment does the person have in...</i>		No impairment	Mild impairment	Moderate impairment	Severe impairment	Complete impairment	Not specified	Not applicable
b126	Temperament and personality functions	0	1	2	3	4	8	9
	General mental functions of constitutional disposition of the individual to react in a particular way to situations, including the set of mental characteristics that makes the individual distinct from others. <i>Inclusions: functions of extraversion, introversion, agreeableness, conscientiousness, psychic and emotional stability, and openness to experience; optimism; novelty seeking; confidence; trustworthiness</i> <i>Exclusions: intellectual functions (b117); energy and drive functions (b130); psychomotor functions (b147); emotional functions (b152)</i>							
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation							
	Description of the problem:							
b130	Energy and drive functions	0	1	2	3	4	8	9
	General mental functions of physiological and psychological mechanisms that cause the individual to move towards satisfying specific needs and general goals in a persistent manner. <i>Inclusions: functions of energy level, motivation, appetite, craving (including craving for substances that can be abused) and impulse control</i> <i>Exclusions: consciousness functions (b110); temperament and personality functions (b126); sleep functions (b134); psychomotor functions (b147); emotional functions (b152)</i>							
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation							
	Description of the problem:							
b134	Sleep functions	0	1	2	3	4	8	9
	General mental functions of periodic, reversible and selective physical and mental disengagement from one's immediate environment accompanied by characteristic physiological changes. <i>Inclusions: functions of amount of sleeping, and onset, maintenance and quality of sleep; functions involving the sleep cycle, such as in insomnia, hypersomnia and narcolepsy</i> <i>Exclusions: consciousness functions (b110); energy and drive functions (b130); attention functions (b140); psychomotor functions (b147)</i>							
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation							
	Description of the problem:							
b152	Emotional functions	0	1	2	3	4	8	9
	Specific mental functions related to the feeling and affective components of the processes of the mind. <i>Inclusions: functions of appropriateness of emotion, regulation and range of emotion; affect; sadness, happiness, love, fear, anger, hate, tension, anxiety, joy, sorrow; lability of emotion; flattening of affect</i> <i>Exclusions: temperament and personality functions (b126); energy and drive functions (b130)</i>							
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation							
	Description of the problem:							

b280	Sensation of pain	0	1	2	3	4	8	9
<p>Sensation of unpleasant feeling indicating potential or actual damage to some body structure. <i>Inclusions: sensations of generalized or localized pain in one or more body part, pain in a dermatome, stabbing pain, burning pain, dull pain, aching pain; impairments such as myalgia, analgesia and hyperalgesia</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								
b415	Blood vessel functions	0	1	2	3	4	8	9
<p>Functions of transporting blood throughout the body. <i>Inclusions: functions of arteries, capillaries and veins; vasomotor function; functions of pulmonary arteries, capillaries and veins; functions of valves of veins; impairments such as in blockage or constriction of arteries; atherosclerosis, arteriosclerosis, thromboembolism and varicose veins</i> <i>Exclusions: heart functions (b410); blood pressure functions (b420); haematological system functions (b430); exercise tolerance functions (b455)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								
b430	Haematological system functions	0	1	2	3	4	8	9
<p>Functions of blood production, oxygen and metabolite carriage, and clotting. <i>Inclusions: functions of the production of blood and bone marrow; oxygen-carrying functions of blood; blood-related functions of spleen; metabolite-carrying functions of blood; clotting; impairments such as in anaemia, haemophilia and other clotting dysfunctions</i> <i>Exclusions: functions of the cardiovascular system (b410-b429); immunological system functions (b435); exercise tolerance functions (b455)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								
b435	Immunological system functions	0	1	2	3	4	8	9
<p>Functions of the body related to protection against foreign substances, including infections, by specific and non-specific immune responses. <i>Inclusions: immune response (specific and non-specific); hypersensitivity reactions; functions of lymphatic vessels and nodes; functions of cell-mediated immunity, antibody-mediated immunity; response to immunization; impairments such as in autoimmunity, allergic reactions, lymphadenitis and lymphoedema</i> <i>Exclusion: haematological system functions (b430)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								
b440	Respiration functions	0	1	2	3	4	8	9
<p>Functions of inhaling air into the lungs, the exchange of gases between air and blood, and exhaling air. <i>Inclusions: functions of respiration rate, rhythm and depth; impairments such as apnoea, hyperventilation, irregular respiration, paradoxical respiration and bronchial spasm and as in pulmonary emphysema.</i> <i>Exclusions: respiratory muscle functions (b445); additional respiratory functions (b450); exercise tolerance functions (b455)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								
b455	Exercise tolerance functions	0	1	2	3	4	8	9
<p>Functions related to respiratory and cardiovascular capacity as required for enduring physical exertion. <i>Inclusions: functions of physical endurance, aerobic capacity, stamina and fatigability</i> <i>Exclusions: functions of the cardiovascular system (b410-b429); haematological system functions (b430); respiration functions (b440); respiratory muscle functions (b445); additional respiratory functions (b450)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>								

b710	Mobility of joint functions	0	1	2	3	4	8	9
	<p>Functions of the range and ease of movement of a joint. <i>Inclusions: functions of mobility of single or several joints, vertebral, shoulder, elbow, wrist, hip, knee, ankle, small joints of hands and feet; mobility of joints generalized; impairments such as in hypermobility of joints, frozen joints, frozen shoulder, arthritis</i> <i>Exclusions: stability of joint functions (b715); control of voluntary movement functions (b760)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>							
b715	Stability of joint functions	0	1	2	3	4	8	9
	<p>Functions of the maintenance of structural integrity of the joints. <i>Inclusions: functions of the stability of a single joint, several joints, and joints generalized; impairments such as in unstable shoulder joint, dislocation of a joint, dislocation of shoulder and hip</i> <i>Exclusion: mobility of joint functions (b710)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>							
b780	Sensations related to muscles and movement functions	0	1	2	3	4	8	9
	<p>Sensations associated with the muscles or muscle groups of the body and their movement. <i>Inclusions: sensations of muscle stiffness and tightness of muscles, muscle spasm or constriction, and heaviness of muscles</i> <i>Exclusion: sensation of pain (b280)</i></p> <p>Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem:</p>							

BODY STRUCTURES = anatomical parts of the body such as organs, limbs and their components <i>How much impairment does the person have in the...</i>			No impairment	Mild impairment	Moderate impairment	Severe impairment	Complete impairment	Not specified	Not applicable			
s220	Structure of the eyeball	Extent	0	1	2	3	4	8	9			
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												
s710	Structure of head and neck region	Extent	0	1	2	3	4	5	6	7	8	9
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												
s720	Structure of shoulder region	Extent	0	1	2	3	4	5	6	7	8	9
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												
s730	Structure of upper extremity	Extent	0	1	2	3	4	5	6	7	8	9
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												
s740	Structure of pelvic region	Extent	0	1	2	3	4	5	6	7	8	9
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												
s750	Structure of lower extremity	Extent	0	1	2	3	4	5	6	7	8	9
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation												
Description of the problem:												

s760	Structure of trunk	Extent	0	1	2	3	4	8	9			
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation											
	Description of the problem:											
s770	Additional musculoskeletal structures related to movement	Extent	0	1	2	3	4	8	9			
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation											
	Description of the problem:											
s810	Structure of areas of skin	Extent	0	1	2	3	4	8	9			
		Nature*	0	1	2	3	4	5	6	7	8	9
		Location**	0	1	2	3	4	5	6	7	8	9
	Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation											
	Description of the problem:											

* Rating of the *nature of the impairment* in body structures: 0 = no change in structure, 1 = total absence, 2 = partial absence, 3 = additional part, 4 = aberrant dimension, 5 = discontinuity, 6 = deviating position, 7 = qualitative changes in structure, 8 = not specified, 9 = not applicable

** Rating of the *location of the impairment* in body structures: 0 = more than one region, 1 = right, 2 = left, 3 = both sides, 4 = front, 5 = back, 6 = proximal, 7 = distal, 8 = not specified, 9 = not applicable

ACTIVITIES AND PARTICIPATION = execution of a task or action by an individual and involvement in a life situation <i>How much difficulty does the person have in the...</i> P = performance of... C = capacity in...		No difficulty	Mild difficulty	Moderate difficulty	Severe difficulty	Complete difficulty	Not specified	Not applicable	
d230	Carrying out daily routine	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
Carrying out simple or complex and coordinated actions in order to plan, manage and complete the requirements of day-to-day procedures or duties, such as budgeting time and making plans for separate activities throughout the day. <i>Inclusions: managing and completing the daily routine; managing one's own activity level</i> <i>Exclusion: undertaking multiple tasks (d220)</i>									
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation									
Description of the problem P: C:									
d410	Changing basic body position	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
Getting into and out of a body position and moving from one location to another, such as getting up out of a chair to lie down on a bed, and getting into and out of positions of kneeling or squatting. <i>Inclusions: changing body position from lying down, from squatting or kneeling, from sitting or standing, bending and shifting the body's centre of gravity</i> <i>Exclusion: transferring oneself (d420)</i>									
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation									
Description of the problem P: C:									
d440	Fine hand use	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
Performing the coordinated actions of handling objects, picking up, manipulating and releasing them using one's hand, fingers and thumb, such as required to lift coins off a table or turn a dial or knob. <i>Inclusions: picking up, grasping, manipulating and releasing</i> <i>Exclusion: lifting and carrying objects (d430)</i>									
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation									
Description of the problem P: C:									
d445	Hand and arm use	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
Performing the coordinated actions required to move objects or to manipulate them by using hands and arms, such as when turning door handles or throwing or catching an object <i>Inclusions: pulling or pushing objects; reaching; turning or twisting the hands or arms; throwing; catching</i> <i>Exclusion: fine hand use (d440)</i>									
Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation									
Description of the problem P: C:									

d450	Walking	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Moving along a surface on foot, step by step, so that one foot is always on the ground, such as when strolling, sauntering, walking forwards, backwards or sideways.</p> <p><i>Inclusions: walking short or long distances; walking on different surfaces; walking around obstacles</i></p> <p><i>Exclusions: transferring oneself (d420); moving around (d455)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d455 [∞]	Moving around	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Moving the whole body from one place to another by means other than walking, such as climbing over a rock or running down a street, skipping, scampering, jumping, somersaulting or running around obstacles.</p> <p><i>Inclusions: crawling, climbing, running, jogging, jumping and swimming</i></p> <p><i>Exclusions: transferring oneself (d420); walking (d450)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d510	Washing oneself	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Washing and drying one's whole body, or body parts, using water and appropriate cleaning and drying materials or methods, such as bathing, showering, washing hands and feet, face and hair, and drying with a towel.</p> <p><i>Inclusions: washing body parts, the whole body; and drying oneself</i></p> <p><i>Exclusions: caring for body parts (d520); toileting (d530)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d530	Toileting	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Planning and carrying out the elimination of human waste (menstruation, urination and defecation), and cleaning oneself afterwards.</p> <p><i>Inclusions: regulating urination, defecation and menstrual care</i></p> <p><i>Exclusions: washing oneself (d510); caring for body parts (d520)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d540	Dressing	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Carrying out the coordinated actions and tasks of putting on and taking off clothes and footwear in sequence and in keeping with climatic and social conditions, such as by putting on, adjusting and removing shirts, skirts, blouses, pants, undergarments, saris, kimono, tights, hats, gloves, coats, shoes, boots, sandals and slippers.</p> <p><i>Inclusions: putting on or taking off clothes and footwear and choosing appropriate clothing</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								

d550	Eating	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Carrying out the coordinated tasks and actions of eating food that has been served, bringing it to the mouth and consuming it in culturally acceptable ways, cutting or breaking food into pieces, opening bottles and cans, using eating implements, having meals, feasting or dining.</p> <p><i>Exclusion: drinking (d560)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d845	Acquiring, keeping and terminating a job	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Seeking, finding and choosing employment, being hired and accepting employment, maintaining and advancing through a job, trade, occupation or profession, and leaving a job in an appropriate manner.</p> <p><i>Inclusions: seeking employment; preparing a resume or curriculum vitae; contacting employers and preparing interviews; maintaining a job; monitoring one's own work performance; giving notice; and terminating a job</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								
d850 [∞]	Remunerative employment	P	0	1	2	3	4	8	9
		C	0	1	2	3	4	8	9
	<p>Engaging in all aspects of work, as an occupation, trade, profession or other form of employment, for payment, as an employee, full or part time, or self-employed, such as seeking employment and getting a job, doing the required tasks of the job, attending work on time as required, supervising other workers or being supervised, and performing required tasks alone or in groups.</p> <p><i>Inclusions: self-employment, part-time and full-time employment</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the problem</p> <p>P:</p> <p>C:</p>								

ENVIRONMENTAL FACTORS		Complete facilitator	Substantial facilitator	Moderate facilitator	Mild facilitator	No barrier/facilitator	Mild barrier	Moderate barrier	Severe barrier	Complete barrier	Not specified	Not applicable
= make up the physical, social and attitudinal environment in which people live and conduct their lives How much of a facilitator or barrier does the person experience with respect to...												
e110	Products or substances for personal consumption Any natural or human-made object or substance gathered, processed or manufactured for ingestion. <i>Inclusions: food, drink and drugs</i> Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation Description of the facilitator/barrier:	+4	+3	+2	+1	0	1	2	3	4	8	9
e115	Products and technology for personal use in daily living Equipment, products and technologies used by people in daily activities, including those adapted or specially designed, located in, on or near the person using them. <i>Inclusions: general and assistive products and technology for personal use</i> Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation Description of the facilitator/barrier:	+4	+3	+2	+1	0	1	2	3	4	8	9
e120	Products and technology for personal indoor and outdoor mobility and transportation Equipment, products and technologies used by people in activities of moving inside and outside buildings, including those adapted or specially designed, located in, on or near the person using them. <i>Inclusions: general and assistive products and technology for personal indoor and outdoor mobility and transportation</i> Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation Description of the facilitator/barrier:	+4	+3	+2	+1	0	1	2	3	4	8	9
e340	Personal care providers and personal assistants Individuals who provide services as required to support individuals in their daily activities and maintenance of performance at work, education or other life situation, provided either through public or private funds, or else on a voluntary basis, such as providers of support for home-making and maintenance, personal assistants, transport assistants, paid help, nannies and others who function as primary caregivers. <i>Exclusions: immediate family (e310); extended family (e315); friends (e320); general social support services (e5750); health professionals (e355)</i> Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation Description of the facilitator/barrier:	+4	+3	+2	+1	0	1	2	3	4	8	9
e355	Health professionals All service providers working within the context of the health system, such as doctors, nurses, physiotherapists, occupational therapists, speech therapists, audiologists, orthotist-prosthetists, medical social workers. <i>Exclusion: other professionals (e360)</i> Sources of information: <input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation Description of the facilitator/barrier:	+4	+3	+2	+1	0	1	2	3	4	8	9

e410	Individual attitudes of immediate family members	+4	+3	+2	+1	0	1	2	3	4	8	9
	<p>General or specific opinions and beliefs of immediate family members about the person or about other matters (e.g. social, political and economic issues) that influence individual behaviour and actions.</p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the facilitator/barrier:</p>											
e580	Health services, systems and policies	+4	+3	+2	+1	0	1	2	3	4	8	9
	<p>Services, systems and policies for preventing and treating health problems, providing medical rehabilitation and promoting a healthy lifestyle.</p> <p><i>Exclusion: general social support services, systems and policies (e575)</i></p> <p>Sources of information:</p> <p><input type="checkbox"/> Case history <input type="checkbox"/> Patient-reported questionnaire <input type="checkbox"/> Clinical examination <input type="checkbox"/> Technical investigation</p> <p>Description of the facilitator/barrier:</p>											

Functioning Profile Acute Inflammatory Arthritis (Brief Version)

BODY FUNCTIONS			Impairment				
			0	1	2	3	4
b126	Temperament and personality functions						
b130	Energy and drive functions						
b134	Sleep functions						
b152	Emotional functions						
b280	Sensation of pain						
b415	Blood vessel functions						
b430	Haematological system functions						
b440	Respiration functions						
b455	Exercise tolerance functions						
b710	Mobility of joint functions						
b715	Stability of joint functions						
b730	Muscle power functions						
b780	Sensations related to muscles and movement functions						
BODY STRUCTURES			Impairment				
			0	1	2	3	4
s220	Structure of eyeball						
s710	Structure of head and neck region						
s720	Structure of shoulder region						
s730	Structure of upper extremity						
s740	Structure of pelvic region						
s750	Structure of lower extremity						
s760	Structure of trunk						
s770	Additional musculoskeletal structures related to movement						
s810	Structure of areas of skin						
ACTIVITIES AND PARTICIPATION			Difficulty				
			0	1	2	3	4
d230	Carrying out daily routine	P					
		C					
d410	Changing basic body position	P					
		C					
d440	Fine hand use	P					
		C					
d445	Hand and arm use	P					
		C					
d450	Walking	P					
		C					
d455	Moving around	P					
		C					
d510	Washing oneself	P					
		C					
d530	Toileting	P					
		C					
d540	Dressing	P					
		C					
d550	Eating	P					
		C					
d845	Acquiring, keeping and terminating a job	P					
		C					
d850	Remunerative employment	P					
		C					

ENVIRONMENTAL FACTORS		Facilitator					Barrier				
		+4	+3	+2	+1	0	1	2	3	4	
e110	Products or substances for personal consumption										
e115	Products and technology for personal use in daily living										
e120	Products and technology for personal indoor and outdoor mobility and transportation										
e340	Personal care providers and personal assistants										
e355	Health professionals										
e410	Individual attitudes of immediate family members										
e580	Health services, systems and policies										

In Body Functions, Body Structures, Activities and Participation: 0 = no problem, 1 = mild problem, 2 = moderate problem, 3 = severe problem, 4 = complete problem; In Environmental Factors: 0 = no barrier/facilitator, 1 = mild barrier, 2 = moderate barrier, 3 = severe barrier, 4 = complete barrier, +1 = mild facilitator, +2 = moderate facilitator, +3 = substantial facilitator, +4 = complete facilitator, 8 = not specified, 9 = not applicable.

P = Performance, C = Capacity