
NHATS Round 6

Section RH [Rehabilitation]

Sequence: 26

RH1

rh6rehab

R6 RH1 RECEIVED REHAB IN LAST YEAR

DISPLAY INSTRUCTIONS:

Display “last year” in underlined text.

QUESTION TEXT:

Physical rehabilitation or “rehab” services can help you improve function and the ability to carry out daily activities. Services include physical therapy, occupational therapy, and speech therapy. Rehab can be received in different settings. For instance, while you are staying in the hospital, after a hospital stay in a nursing home or rehab facility, at a doctor’s or therapist’s office or clinic, or at home.

In the last year, {have you/has SP} received any rehab services?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX RH1

BOX RH1

NOT ON FILE

If RH1=1 (YES) go to RH1A.

Otherwise, go to Section SD – Smoking.

RH1A

rh6rehabmo

R6 RH1A MONTHS OF REHAB

DISPLAY INSTRUCTIONS:

Display “last year” in underlined text.

QUESTION TEXT:

In the last year, for about how many months altogether did {you/SP} receive rehab services?

Was it for less than one month, one to three months, four to five months, or six or more months?

CODES

1	LESS THAN 1 MONTH	
2	1 TO 3 MONTHS	RH2
3	4 TO 5 MONTHS	RH2
4	6 OR MORE MONTHS	RH2
	REFUSED	RH2
	DON'T KNOW	RH2

RH1B

rh6rehabweek

R6 RH1B WEEKS OF REHAB

DISPLAY INSTRUCTIONS:

Display “last year” in underlined text.

In the last year, for about how many weeks altogether did {you/SP} receive rehab services? Was it less than one week, one to two weeks, or three to four weeks?

CODES

- 1 LESS THAN 1 WEEK
- 2 1 TO 2 WEEKS
- 3 3 TO 4 WEEKS
- REFUSED
- DON'T KNOW

RH2

rh6rehabsur

R6 RH2 REHAB POST SURGERY

DISPLAY INSTRUCTIONS:

Display "last year" in underlined text.

QUESTION TEXT:

We are interested in the reasons {you/SP} received rehab in the last year.

Did {you/SP} receive rehab to help {you/him/her} recover following surgery?

CODES

- 1 YES
 - 2 NO
 - REFUSED
 - DON'T KNOW
- RH4
RH4
RH4

RH3

rh6surgcond

R6 RH3 MAIN MED CONDITION FOR SURGERY

DISPLAY INSTRUCTIONS:

Display "main medical condition" in underlined text.

QUESTION TEXT:

SHOW CARD RH1

Please look at this card and tell me, what was the main medical condition for which {you/SP} had surgery?

CODES

- 1 A FRACTURE, SPRAIN, OR INJURY
 - 2 A HIP, KNEE OR OTHER JOINT REPLACEMENT
 - 3 ANOTHER MUSCULOSKELETAL CONDITION
 - 4 A STROKE OR TIA
 - 5 A HEART ATTACK
 - 6 ANOTHER HEART CONDITION OR VASCULAR DISEASE
 - 7 A BREATHING CONDITION
 - 8 A NEUROLOGICAL CONDITION LIKE MS OR PARKINSON'S
 - 9 CANCER
 - 94 ANOTHER CONDITION (SPECIFY)
 - 95 NO MEDICAL CONDITION (IF VOLUNTEERED)
 - REFUSED
 - DON'T KNOW
- RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5
RH5

RH3B

RH3B

NOT ON FILE

QUESTION TEXT:

SPECIFY OTHER MEDICAL CONDITION TARGETED BY SURGERY

ENTER TEXT

LEGNTH

50

PROGRAMMER INSTRUCTIONS:

Go to RH5.

RH4

rh6rehabcond

R6 RH4 MAIN MED CONDITION FOR REHAB

DISPLAY INSTRUCTIONS:

Display "main medical condition" in underlined text.

QUESTION TEXT:

SHOW CARD RH1

Please look at this card and tell me, what was the main medical condition for which {you/SP} received rehab in the last year?

CODES

1	A FRACTURE, SPRAIN, OR INJURY	RH5
2	A HIP, KNEE OR OTHER JOINT REPLACEMENT ANOTHER	RH5
3	MUSCULOSKELETAL CONDITION	RH5
4	A STROKE OR TIA	RH5
5	A HEART ATTACK	RH5
6	ANOTHER HEART CONDITION OR VASCULAR DISEASE	RH5
7	A BREATHING CONDITION	RH5
8	A NEUROLOGICAL CONDITION LIKE MS OR PARKINSON'S	RH5
9	CANCER	RH5
94	ANOTHER CONDITION (SPECIFY)	RH5
95	NO MEDICAL CONDITION (IF VOLUNTEERED)	RH5
	REFUSED	RH5
	DON'T KNOW	RH5

RH4B

RH4B

NOT ON FILE

QUESTION TEXT:

SPECIFY OTHER MEDICAL CONDITION

ENTER TEXT

LEGNTH

50

RH5

rh6funcback

R6 RH5 IMPROVE FUNCTION IN BACK

rh6funchips

R6 RH5 IMPROVE FUNCTION IN HIPS

rh6funcnees

R6 RH5 IMPROVE FUNCTION IN KNEES

rh6funcfeet

R6 RH5 IMPROVE FUNCTION IN FEET

rh6funchands

R6 RH5 IMPROVE FUNCTION IN HANDS

rh6funcwrist	R6 RH5 IMPROVE FUNCTION IN WRIST
rh6funcshold	R6 RH5 IMPROVE FUNCTION IN SHOULDERS
rh6funchead	R6 RH5 IMPROVE FUNCTION IN HEAD
rh6funcneck	R6 RH5 IMPROVE FUNCTION IN NECK
rh6funcarms	R6 RH5 IMPROVE FUNCTION IN ARMS
rh6funclegs	R6 RH5 IMPROVE FUNCTION IN LEGS
rh6funcstom	R6 RH5 IMPROVE FUNCTION IN STOMACH
rh6funcmouth	R6 RH5 IMPROVE FUNCTION IN MOUTH
rh6funcheart	R6 RH5 IMPROVE FUNCTION IN HEART
rh6funclungs	R6 RH5 IMPROVE FUNCTION IN LUNGS (From Other Specify)
rh6funcos	R6 RH5 IMPROVE FUNCTION OTHER SPECIFY
rh6funcnotsp	R6 RH5 IMPROVE FUNCTION NO SPECIFIC PLACE

Display “where” in underlined.

QUESTION TEXT:

SHOW CARD RH2

Next, please look at this card and tell me where {you were/SP was} trying to improve function?

PROBE: Anywhere else?

SELECT ALL THAT APPLY

CODES	Code All That Apply	
1	BACK	RH6
2	HIP(S)	RH6
3	KNEES(S)	RH6
4	FEET	RH6
5	HAND(S)	RH6
6	WRIST(S)	RH6
7	SHOULDER(S)	RH6
8	HEAD	RH6
9	NECK	RH6
10	ARM(S)	RH6
11	LEG(S)	RH6
12	STOMACH	RH6
13	MOUTH OR THROAT	RH6
14	HEART	RH6
15	LUNGS	RH6
94	OTHER PLACES (SPECIFY)	
95	NO SPECIFIC PLACE (IF VOLUNTEERED)	RH6
	REFUSED	RH6
	DON'T KNOW	RH6

PROGRAMMER INSTRUCTIONS:

Response code 95 cannot be selected in combination with any other code. Display error message

“INCONSISTENT ANSWER. ‘NO SPECIFIC PLACE’ CANNOT BE SELECTED WITH ANY OTHER CATEGORY”
when leaving the screen.

RH5A

RH5A

NOT ON FILE

QUESTION TEXT:

SPECIFY OTHER BODY STRUCTURES TARGETED BY THERAPY

ENTER TEXT

Length

50

RH6

rh6impchew

R6 RH6 IMPROVE CHEWING SWALLOWING

rh6impspeak

R6 RH6 IMPROVE SPEAKING BEING UNDERSTOOD

rh6impspain

R6 RH6 IMPROVE PAIN LEVEL

rh6impbreath

R6 RH6 IMPROVE BREATHING

rh6impbweak

R6 RH6 IMPROVE STRENGTH

rh6impmove

R6 RH6 IMPROVE MOVEMENT RANGE OF MOTION

rh6impenergy

R6 RH6 IMPROVE ENERGY LEVEL

rh6impbal

R6 RH6 IMPROVE BALANCE COORDINATION

rh6impfall

R6 RH6 IMPROVE PROBLEMS WITH FALLS

rh6impmemory

R6 RH6 IMPROVE MEMORY

rh6impnone

R6 RH6 IMPROVE NONE OF THESE PROBLEMS

DISPLAY INSTRUCTIONS:

Display “which of these problems” in underlined text.

QUESTION TEXT:

SHOW CARD RH3

Next, please look at this card and tell me which of these problems {were you/was SP} trying to improve?

PROBE: Any others?

SELECT ALL THAT APPLY

CODES

1
2
3

DIFFICULTY CHEWING OR SWALLOWING

DIFFICULTY SPEAKING OR BEING UNDERSTOOD

PAIN LEVEL

- 4 PROBLEM WITH BREATHING
- 5 PROBLEM WITH STRENGTH (MUSCLE WEAKNESS)
- 6 PROBLEM WITH MOVEMENT (RANGE OF MOTION)
- 7 LOW ENERGY LEVEL
- 8 PROBLEM WITH BALANCE OR COORIDNATION
- 9 PROBLEM WITH FALLS
- 10 PROBLEM WITH MEMORY
- 95 NONE OF THESE PROBLEMS
- REFUSED
- DON'T KNOW

RH6B	rh6impbed	R6 RH6B IMPROVE GETTING OUT OF BED
	rh6impwalk	R6 RH6B IMPROVE WALKING INSIDE HOME
	rh6impleave	R6 RH6B IMPROVE LEAVING HOME OUTSIDE
	rh6impdistnc	R6 RH6B IMPROVE WALKING DISTANCES OUTSIDE
	rh6impclimb	R6 RH6B IMPROVE CLIMBING STAIRS
	rh6impdrive	R5 RH6B IMPROVE DRIVING
	rh6imptransp	R6 RH6B IMPROVE USING OTHER TRANSPORTATION
	rh6impnotths	R6 RH6B IMPROVE NONE OF THESE MOBIL ACT

DISPLAY INSTRUCTIONS:

Display "which of these" in underlined text.

QUESTION TEXT:

SHOW CARD RH4

Sometimes rehab focuses on improving ways of moving or getting around. Please look at this card and tell me which of these {were you/was SP} trying to improve?

PROBE: Any others?

SELECT ALL THAT APPLY

CODES	Code All That Apply
1	GETTING OUT OF BED
2	WALKING AROUND INSIDE AT HOME
3	LEAVING HOME TO GO OUTSIDE
4	WALKING DISTANCES OUTSIDE (SEVERAL BLOCKS)
5	CLIMBING STAIRS
6	DRIVING
7	USING OTHER FORMS OF TRANSPORTATION
95	NONE OF THESE
	REFUSED
	DON'T KNOW

RH6C	rh6impsc	R6 RH6C IMPROVE CARING FOR SELF
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rh6imphh	R6 RH6C IMPROVE HOUSEHOLD ACTIVITIES
rh6impcomp	R6 RH6C IMPROVE USING COMPUTER TABLET
rh6impwork	R6 RH6C IMPROVE WORKING VOLUNTEERING
rh6impcare	R6 RH6C IMPROVE PROVIDING CARE
rh6impactiv	R6 RH6C IMPROVE PARTICIPATING ACTIVITIES
rh6impactnon	R6 RH6C IMPROVE NONE OF THESE ACTIVITIES

DISPLAY INSTRUCTIONS:

Display “which of these” in underlined text.

QUESTION TEXT:

SHOW CARD RH5

Sometimes rehab focuses on improving the ability to carry out specific activities. Please look at this card and tell me which of these activities {were you/was SP} trying to improve?

PROBE: Any others?

SELECT ALL THAT APPLY

CODES

- 1 CARING FOR SELF (WASHING UP, TOILETING, DRESSING, EATING)
- 2 HOUSEHOLD TASKS (SHOPPING FOR GROCERIES, PREPARING MEALS, DOING LAUNDRY)
- 3 USING A COMPUTER, LAPTOP OR TABLET
- 4 WORKING OR VOLUNTEERING
- 5 PROVIDING CARE TO SOMEONE ELSE
- 6 PARTICIPATING IN SOCIAL, RELIGIOUS, OR COMMUNITY ACTIVITIES
- 95 NONE OF THESE ACTIVITIES REFUSED DON'T KNOW

RH6D	rh6devcane	R6 RH6D THERAPIST RECOMMEND CANE WALKER
	rh6devwhich	R6 RH6D THERAPIST RECOMMEND WHEELCHR SCOOTER
	rh6devramp	R6 RH6D THERAPIST RECOMMEND ENTRANCE RAMP
	rh6devstair	R6 RH6D THERAPIST RECOMMEND STAIR LIFT GLIDE
	rh6devtub	R6 RH6D THERAPIST RECOMMEND GRABBAR TUB SEAT
	rh6devtoil	R6 RH6D THERAPIST RECOMMEND GRABBAR TOIL SEAT
	rh6deveat	R6 RH6D THERAPIST RECOMMEND ADAPTED UTENSIL
	rh6devdres	R6 RH6D THERAPIST RECOMMEND DRESSING DEV

rh6devgrab	R6 RH6D THERAPIST RECOMMEND REACHER GRABBER
rh6devcomp	R6 RH6D THERAPIST RECOMMEND COMPUTER DEVICE
rh6devcar	R6 RH6D THERAPIST RECOMMEND CAR DEVICE
rh6devoth	R6 RH6D THERAPIST RECOMMEND OTHER CHANGES

DISPLAY INSTRUCTIONS:

Use “Same Question Stem” display.

If STRUCTURE flag = 2 (MULTI-UNIT) and HO2=1 (COMMON OR SHARED ENTRANCE), do not display RH6D3.

If STRUCTURE flag = 2 (MULTI-UNIT) or HO5=1 (ONE FLOOR), do not display RH6D4.

If HO11A= 2 (NO BATHTUB) and HO11B = 1 (YES, SHOWER STALL), display “shower” in RH6D5.

Else if HO11a = 1 (YES, BATHTUB) and HO11b = 2 (NO SHOWER STALL), display “tub area” in RH6D5.

Otherwise, display “shower or tub area” in RH6D5.

If DROVEINLASTYEAR flag <> 1 (YES), use null display in RH6D11.

Otherwise, display “or {drive/drives}” in RH6D11.

If at RH6D1, do not display question text in brackets.

Otherwise, display question text in brackets.

QUESTION TEXT:

{Rehab therapists sometimes recommend devices or equipment to make activities easier, safer or so patients can do them on their own.

In the last year did any of {your/SP’s} therapists recommend... {

{variable text [a – l]}

RESPONSE [1] a. a cane or walker?

RESPONSE [2] b. a wheelchair or scooter?

RESPONSE [3] c. a ramp at the entrance to {your/SP’s} home?

RESPONSE [4] d. a stair lift or stair glide?

RESPONSE [5] e. a grab bar or seat in the {{shower} or {tub area}}?

IF NEEDED: A grab bar is designed to help you steady yourself. It may be attached to the wall or built into the shower or tub. Do not include towel racks. A seat includes a chair, stool, or bench used in the shower or bathtub. Some seats are placed in the shower or tub, others are built in.

RESPONSE [6] f. grab bars or a raised seat for the toilet?

IF NEEDED: A grab bar is designed to help you steady yourself. It may be attached to the wall or built into the shower or tub. Do not include towel racks.

RESPONSE [7] g. adapted utensils to help with eating or cutting up food?

RESPONSE [8] h. special items to help with dressing such as buttonhooks or clothes that are designed to get on and off easily?

RESPONSE [9] i. a reacher or grabber to pick up things more easily?

RESPONSE [10] j. adaptive devices for a computer, laptop or tablet?

RESPONSE [11] k. adaptive devices for the car that {you ride /SP rides} in { or {drive/drives}}?

RESPONSE [12] l. other changes to the home environment to help with daily tasks?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

RH7

rh6place1

R6 RH7A RECEIVE REHAB OVERNIGHT HOSP
NH REHAB

rh6place2

R6 RH7B RECEIVE REHAB OUTPATIENT

rh6place3

R6 RH7C RECEIVE REHAB HOME

rh6place4

R6 RH7D RECEIVE REHAB SOMEWHERE ELSE

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.

Display "where" in underlined text.

If at RH7A, do not display question text in brackets.
Otherwise, display question text in brackets.

QUESTION TEXT:

{{}}Next, we are interested in where {you/SP} received rehab services in the last year.

In the last year, did {you/SP} receive rehab ... {}

RESPONSE [1] a. as an overnight patient in a hospital, nursing home, or rehab facility?

RESPONSE [2] b. at an outpatient center, clinic, or facility, or at a doctor's or therapist's office?

IF NEEDED: Outpatient means you did not stay overnight.

RESPONSE [3] c. at home?

RESPONSE [4] d. somewhere else?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

BOX RH7E

BOX RH7E

NOT ON FILE

If RH7D=1 (YES) go to RH7E.
Otherwise, go to Box RH8.

RH7E

rh6places

R6 RH7E RECEIVE REHAB OTHER SPECIFY
PLACE TYPE

QUESTION TEXT:

SPECIFY WHERE SP RECEIVED REHAB

ENTER TEXT

LENGTH

50

BOX RH8**BOX RH8****NOT ON FILE**

If more than one item at RH7A-D = 1 (YES), go to RH8.
Otherwise, go to RH9.

RH8**rh6placelast****R6 RH8 PLACE LAST RECEIVED REHAB****DISPLAY INSTRUCTIONS:**

Display “last” in underlined text.

If RH7A = 1 (YES), display “as an overnight patient in a hospital, nursing home, or rehab facility;” and response option 1. OVERNIGHT PATIENT IN HOSPITAL, NURSING HOME, OR REHAB FACILITY.

If RH7B = 1 (YES), display “as an outpatient at a center, clinic, or facility, or at a doctor’s or therapist’s office;” and response option 2. OUTPATIENT AT A CENTER, CLINIC, FACILITY, DOCTOR’S OR THERAPIST’S OFFICE.

If RH7C = 1 (YES), display “at home;” and response option 3. HOME.

If RH7D = 1 (YES), display “at {TEXT FROM RH7E}” and response option 4. SOMEWHERE ELSE.

Display “or” between places received services.

QUESTION TEXT:

Which place did {you/SP} last receive these services?

IF NEEDED: Was it {as an overnight patient in a hospital, nursing home, or rehab facility;/as an outpatient at a center, clinic, or facility, or at a doctor’s or therapist’s office;/at home;/at {TEXT FROM RH7E}}?

CODES

- | | |
|---|--|
| 1 | OVERNIGHT PATIENT IN HOSPITAL, NURSING HOME, OR REHAB FACILITY |
| 2 | OUTPATIENT AT A CENTER, CLINIC, FACILITY, DOCTOR’S OR THERAPIST’S OFFICEHOME |
| 3 | SOMEWHERE ELSE |
| 4 | REFUSED
DON’T KNOW |

RH9**rh6ability****R6 RH9 FUNCTIONING IMPROVE IN REHAB****QUESTION TEXT:**

While {you were/SP was} receiving rehab services in the last year, did {your/his/her} functioning and ability to do activities improve, get worse, or stay about the same?

CODES

- | | | |
|---|-------------------------------------|------|
| 1 | IMPROVED | |
| 2 | GOT WORSE | RH9B |
| 3 | STAYED ABOUT THE SAME | RH10 |
| 4 | VARIED/UP AND DOWN (IF VOLUNTEERED) | RH10 |
| | REFUSED | RH10 |
| | DON’T KNOW | RH10 |

RH9A**rh6abilimp****R6 RH9A HOW MUCH FUNCTIONING**

IMPROVE IN REHAB

QUESTION TEXT:

Did it improve a lot, somewhat, or a little?

CODES

- 1 A LOT
- 2 SOMEWHAT
- 3 A LITTLE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to RH10.

RH9B

rh6abilworse

R6 RH9A HOW MUCH FUNCTIONING WORSE
IN REHAB

QUESTION TEXT:

Did it get a lot worse, somewhat worse or a little worse?

CODES

- 1 A LOT
- 2 SOMEWHAT
- 3 A LITTLE
- REFUSED
- DON'T KNOW

RH10

rh6rehabnow

R6 RH10 STILL RECEIVING REHAB

DISPLAY INSTRUCTIONS:

Display "still" in underlined text.

QUESTION TEXT:

{Are you/Is SP} still receiving rehab services?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

BOX RH11

BOX RH11

NOT ON FILE

If RH10=2 (NO) go to RH11.
Otherwise, go to Section SD – Smoking.

RH11

rh6metgoals

R6 RH11 MET GOALS WHEN REHAB ENDED

QUESTION TEXT:

When {your/SP's} rehab services ended, had {you/SP} met all or most of {your/his/her} goals?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

RH12

rh6metinsur

R6 RH12 MET INSURANCE LIMIT WHEN REHAB ENDED

QUESTION TEXT:

When {your/SP's} rehab services ended, had {you/SP} met the limit of {your/{his/her}} insurance coverage?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

RH13

rh6abilnow

R6 RH13 FUNCTIONING IMPROVE WHEN REHAB ENDED

QUESTION TEXT:

Since {your/SP's} rehab services ended, have {your/his/her} functioning and ability to do activities improved, got worse, or stayed about the same?

CODES

- 1 IMPROVED
 - 2 GOT WORSE
 - 3 STAYED ABOUT THE SAME
 - 4 VARIED/UP AND DOWN (IF VOLUNTEERED)
- REFUSED
DON'T KNOW
- RH15
Section SD
Section SD
Section SD
Section SD

RH14

rh6nowimp

R6 RH14 HOW MUCH FUNCTION IMPROVE AFTER REHAB

QUESTION TEXT:

Did it improve a lot, somewhat, or a little?

CODES

- 1 A LOT
- 2 SOMEWHAT
- 3 A LITTLE
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to Section SD – Smoking.

RH15

rh6nowworse

R6 RH15 HOW MUCH FUNCTION WORSE
AFTER REHAB

QUESTION TEXT:

Did it get a lot worse, somewhat worse, or a little worse?

CODES

1	A LOT
2	SOMEWHAT
3	A LITTLE
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to Section SD – Smoking.