

HOBIT	Subject:	Visit:
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Form 156 v1: Glasgow Outcome Scale - Extended

Qa	Data collected	<input type="radio"/> No <input type="radio"/> Yes
Qb	Date of assessment	___ - ___ - ___ dd-mmm-yyyy
Qd	Respondent	<input type="radio"/> Study participant alone <input type="radio"/> Relative/caregiver/friend <input type="radio"/> Study participant plus Relative/caregiver/friend
Consciousness		
Q01	<p style="text-align: center;">Is the head injured person able to obey simple commands or say any words?</p> <p style="text-align: center;"><i>Anyone who shows ability to obey even simple commands, utter any word or communicate specifically in any other way is no longer considered to be in a vegetative state. Eye movements are not reliable evidence of meaningful responsiveness.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Independence in the home		
Q02a	<p style="text-align: center;">Is the assistance of another person at home essential each day for some activities of daily living?</p> <p style="text-align: center;"><i>For a 'No' answer, they should be able to look after themselves at home for 24 hours if necessary, though they need not actually look after themselves. Independence includes the ability to plan for and carry out the following activities: getting washed, putting on clean clothes without prompting, preparing food for themselves, dealing with callers and handling minor domestic crises. The person should be able to carry out activities without needing prompting or reminding and should be capable of being left alone overnight.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q02b	<p style="text-align: center;">Do they need frequent help or someone to be around the home most of the time?</p> <p style="text-align: center;"><i>For a 'No' answer, they should be able to look after themselves at home for up to 8 hours during the day if necessary, though they need not actually look after themselves.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q02c	Was assistance at home essential before the injury?	<input type="radio"/> No <input type="radio"/> Yes
Independence outside the home		
Q03a	<p style="text-align: center;">Are they able to shop without assistance?</p> <p style="text-align: center;"><i>This includes ability to plan what to buy, take care of the money themselves and behave appropriately in public. They need not normally shop but must be able to do so.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q03b	Were they able to shop without assistance before the injury?	<input type="radio"/> No <input type="radio"/> Yes
Name of person who collected data:		
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Travel			
Q04a	If Q01 = 'Yes'	<p style="text-align: center;">Are they able to travel locally without assistance?</p> <p style="text-align: center;"><i>They may drive or use public transport to get around. Ability to use a taxi is sufficient, provided they can phone for it themselves and instruct the driver.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q04b	If Q04a = 'No'	<p style="text-align: center;">Were they able to travel without assistance before the injury?</p>	<input type="radio"/> No <input type="radio"/> Yes
Work			
Q05a	If Q01 = 'Yes'	<p style="text-align: center;">Are they currently able to work to their previous capacity?</p> <p style="text-align: center;"><i>If they were working before, then their current capacity to work should be at the same level. If they were seeking work before, then the injury should not have adversely affected their chances of obtaining work or the level of work for which they are eligible. If the subject was a student before the injury then their capacity for study should not have been adversely affected.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q05b	If Q05a = 'No'	How restricted are they?	<input type="radio"/> Reduced work capacity <input type="radio"/> Able to work only in a sheltered workshop non-competitive job or currently unable to work
Q05c		<p style="text-align: center;">Were they either working or seeking employment before the injury (answer 'Yes') or were they doing neither (answer 'No')?</p>	<input type="radio"/> No <input type="radio"/> Yes
Social & leisure activities			
Q06a	If Q01 = 'Yes'	<p style="text-align: center;">Are they able to resume regular social and leisure activities outside of home?</p> <p style="text-align: center;"><i>They need not have resumed all their previous leisure activities but should not be prevented by physical or mental impairment. If they have stopped the majority of activities because of loss of interest or motivation, then this is also considered a disability.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q06b	If Q06a = 'No'	<p style="text-align: center;">What is the extent of the restriction on their participation in social and leisure activities, as compared to activity prior to injury?</p>	<input type="radio"/> A bit less - at least half as often <input type="radio"/> Much less - less than half as often <input type="radio"/> Unable - rarely, if ever, takes part
Q06c		<p style="text-align: center;">Did they engage in regular social and leisure activities outside home before?</p>	<input type="radio"/> No <input type="radio"/> Yes
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Family & friendships			
Q07a	If Q01 = 'Yes'	<p>Have there been psychological problems which have resulted in ongoing family disruption or disruption to friendships?</p> <p><i>Typical post-traumatic personality changes: quick temper, irritability, anxiety, insensitivity to others, mood swings, depression and unreasonable or childish behavior.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q07b		What has been the extent of the disruptions or strain?	<input type="radio"/> Occasional - less than weekly <input type="radio"/> Frequent - once a week or more, but tolerable <input type="radio"/> Constant - daily and intolerable
Q07c	If Q07a = 'Yes'	<p>Were there problems with family or friends before the injury?</p> <p><i>If there were some problems before but these have become markedly worse since injury, then answer 'No' to this question.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Return to normal life			
Q08a	If Q01 = 'Yes'	<p>Are there any other current problems relating to the injury which affect daily life?</p> <p><i>Other typical problems reported after head injury: headaches, dizziness, tiredness, sensitivity to noise and/or light, slowness, memory failures and concentration problems.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q08b	If Q08a = 'Yes'	<p>Were similar problems present before the injury?</p> <p><i>If there were some problems before injury but these have become markedly worse since injury, then answer 'No' to this question.</i></p>	<input type="radio"/> No <input type="radio"/> Yes
Q09		Assessor's name	
		<i>The assessor must be someone who is currently certified to perform the GOS-E and who is listed on the 1572.</i>	
Qc		General comments	
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