

Implementation of EQ-5D Assessment in Clinical Practice – Guidelines Summary

Consider your current clinical practice, and try to answer each of the following:

What are your goals for collecting EQ-5D in your clinical practice? *(Check all that apply)*

- Screening tool
- Monitoring tool
- Patient-centered care
- Decision aids
- Facilitating multi-disciplinary team communications
- Evaluating quality of care

What resources are available?

Staff:

Funding:

Others:

Which key barriers require attention?

Clinic workflow:

Healthcare team buy-in:

Others:

Which groups of patients will you assess?

- All patients
- Chronic disease patients
- Others; specify:

How do you select which version of the EQ-5D to use? Other PROMs? *(Check all that apply)*

- EQ-5D-3L
- EQ-5D-5L
- EQ-5D-Y
- Other; specify:

How often should patients complete questionnaires?

Purpose:

Clinical context (if any):

Resources:

Timing of administration:

- Before the visit
- During the visit
- After the visit

Frequency of administration:

- One time
- Multiple times; specify:

How and where will the EQ-5D be administered? (Check all that apply)

How:

- Self-administered
- Clinician-administered
- Computer assisted
- Other; specify:

Where:

- In clinic
- Via mail (paper)
- Via phone
- Web-based
- Other; specify:

What tools are available to aid in interpretation and how will scores requiring follow-up be determined?

- ✓ General written guidelines
- ✓ Cut-off score for levels of severity
- ✓ Reference scores from similar populations
- ✓ Population norms
- ✓ Interviews to clarify scores
- ✓ Comparison with previous scores
- ✓ Minimal important difference

When, where, how, and to whom will results be presented? *(Check all that apply)*

WHEN?

- Prior to the visit
- During the visit
- After the visit
- Other; specify:

WHERE?

- Within clinical workflow
- Outside clinical workflow
- Other; specify:

HOW?

- Numeric representation
- Graphical representation
- Presentation of trends over time
- Comparison with reference scores
- Other; specify:

TO WHOM?

- Member of the healthcare team
- Patient, family, caregiver
- Other; specify:

What will be done to respond to issues identified through the EQ-5D?

Specify your plan (Depends on the purpose)

How will the value of using the EQ-5D be evaluated? *(Check all that apply)*

- Feedback from healthcare team members
- Feedback from patients
- Feedback from clinic/PCN staff
- Other; specify: