

THR Post-acute Rehab Questionnaire

Name: _____ Date: _____ Rehab clinic: _____

Reflect on the rehabilitation assessments and treatments you provide to patients after total hip replacement surgery and check each quality indicator activity that you routinely do. Check if you used a standardized tool/approach to assess at the start and end of the rehabilitation program (i.e., at least twice).

Assessments	Start	End
QI-1: Assessed level of surgical hip pain (e.g., 0 to 10 scale, HOOS or OHS subscale)	☐	☐
QI-2: Performed a physical examination that included: - Gait and use of walking aids (e.g., symmetry, step length, use of gait aids) - Standing posture and lower limb alignment (e.g., pelvic alignment, genu valgus) - Bilateral active lower limb range of motion (at least both hips using a goniometer) - Bilateral passive lower limb range of motions (at least both hips using a goniometer) - Bilateral lower limb flexibility/contractures (e.g., Thomas Test, hamstring length) - Bilateral lower limb strength including hip flexors, extensors, abductors and quads) - Static and dynamic balance (e.g., single leg stand, Berg Balance, BESTest) - Leg length discrepancy (can do once at ≥ 3 months post-op)	☐ ☐ ☐ ☐ ☐ ☐ ☐	☐ ☐ ☐ ☐ ☐ ☐ ☐
QI-3: Assessed self-reported physical function (e.g., LEFS, Oxford Hip Score)	☐	☐
QI-4: Assessed performance-based function (<u>at least one</u> of the following): ☐ stair ascent/descent ☐ 30sec chair stand test ☐ self-paced or fast walking speed ☐ timed up and go test ☐ 6 min walk test	☐	☐
QI-5: Assessed participation (e.g., caregiving, paid/unpaid work, leisure and sports)	☐	☐
QI-6a: Assessed physical activity level and sedentary behaviour (e.g., PA vital signs, PA questionnaire) (can do once)	☐	
QI-6b: Provided education on benefits of physical activity and tailored guidance and support on resuming a physically active lifestyle (can do once)	☐	
QI-7: Assessed health-related quality of life (e.g., HOOS subscale, EQ-5D, AQOL)	☐	☐

Rehabilitation interventions: Check each item that was done	Yes
QI-8: Provided a physiotherapy program that was: - Individualized to the patient's functional needs and goals - Supervised by a physiotherapist or rehabilitation assistant with joint replacement experience - Appropriately dosed (e.g., intensity, frequency) - Regularly progressed (e.g., based on RPE, reps in reserve, 10RM) - At least 6 weeks in duration (e.g., from initial assessment to discharge) - Monitored for attendance (e.g., exercise log, wearable device)	☐ ☐ ☐ ☐ ☐ ☐
QI-9: AND included the all of the following components: - Pain management strategies (e.g., ice, mind-body approaches) - Active hip range of motion exercises - Progressive resistance training for lower limb muscles - Static and dynamic balance training (e.g., tandem stance/walking, side stepping, stepping over objects, forward/sideways reaching) - Postural and core stability training (e.g., engaging lower abs, lower gluts) - Gait training including use of walking aids, walking on different surfaces, slopes or speeds) - Functional exercises (e.g., stair climbing, rising/lowering to chair and floor) - A home exercise program (e.g., printed exercise sheet, website, App)	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

	Yes
QI-10: Assessed the patient's experience and satisfaction with rehabilitation process and outcomes of care (e.g., program evaluation form, emailed questionnaire after discharge)	☐

Notes and reflections about the rehabilitation care you routinely provide after hip replacement surgery.