

## WELSH INFORMATION STANDARDS BOARD

<b>DSC Notice:</b>	DSCN 2022 31
<b>Date of Issue:</b>	6 <sup>th</sup> July 2022

<p><b>Welsh Health Circular / Official Letter:</b></p> <p>WHC/2022/005: Welsh Value in Health Centre – Data Requirements</p>	<p><b>Subject:</b> Value in Health – Boston Carpal Tunnel Syndrome Questionnaire (BCTQ)</p>
<p><b>Sponsor:</b> Dr Sally Lewis, National Clinical Lead for Value-Based and Prudent Healthcare</p>	
<p><b>Effective from:</b> 1<sup>st</sup> July 2022</p>	
<p><b>DATA STANDARD CHANGE NOTICE</b></p> <p>A Data Standard Change Notice (DSCN) is an information mandate for a new or revised information standard.</p> <p>This DSCN was approved by the Welsh Information Standards Board (WISB) on 16<sup>th</sup> June 2022.</p> <p><b>WISB Reference:</b> ISRN 2022 / 026</p>	
<p><b>Summary:</b> To describe the content of Patient Reported Outcome Measures (PROMs) for the Boston Carpal Tunnel Syndrome Questionnaire (BSTQ) element of the applicable PROMs pathways as part of the Value in Health programme.</p>	
<p><b>Applies to:</b> This Standard applies to all bodies that commission or provide health and care services in Wales in partnership with the NHS including their relevant system suppliers.</p>	
<p>Please address enquiries about this Data Standard Change Notice to the Data Standards Team in Digital Health and Care Wales E-mail: <a href="mailto:data.standards@wales.nhs.uk">data.standards@wales.nhs.uk</a> / Tel: 029 2050 3593</p>	
<p>The Welsh Information Standards Board is responsible for appraising information standards. Submission documents and WISB Outcomes relating to the approval of this standard can be found at: <a href="https://nhs.wales365.sharepoint.com/sites/DHC_DST/Lists/Information%20Standards%20Assurance%20Submission%20Log/AllItems.aspx">https://nhs.wales365.sharepoint.com/sites/DHC_DST/Lists/Information%20Standards%20Assurance%20Submission%20Log/AllItems.aspx</a></p>	

## DATA STANDARD CHANGE NOTICE

### Introduction

The Value in Health (or VIH) programme was commissioned by Welsh Government to *"Improve the health outcomes of the people in Wales, in a financially sustainable way, through the creation of a data-driven system, which seeks to provide timely information to citizens, clinical teams and organisations to inform decision-making."*

Part of this programme includes the development of digital products capable of providing outcome-based analytical information at the point of care, as well as for secondary use analyses. In particular, these products aim to:

- Provide an analytical tool to allow clinicians to view data at population level and make informed decisions based on relationships they identify between diagnoses, treatments and outcomes/survival;
- Improve accessibility of national audit data and make this visible throughout the year rather than via the annual statutory reporting process;
- Improve data quality by making the data more visible and using measures to highlight data issues;
- Make historical data available to enable the identification of patterns and trends over time; and
- Provide drill-through functionality to allow clinicians to drill down to record level and identify corresponding patient records in operational systems.

This is to be achieved through the central collection of validated or standardised patient questionnaires including Patient-Reported Outcome Measures (PROMs) and national clinical audit data, and data linkage to associate these records with sources of existing activity data, through data sets such as Admitted Patient Care (APC ds), Outpatient activity (OP ds) and Emergency Department Data Set (EDDS).

The mandate for the necessary patient reported and clinical outcome data was issued to NHS Wales by Welsh Government via WHC (2022)005<sup>1</sup>. This describes the requirement in the context of national strategy for health and social care, and the necessity for services to adapt to the evolving healthcare needs of the ageing population to create a service that is flexible and more effective in dealing with these emerging challenges.

### Scope

A form can be issued to a patient at any point along their treatment pathway. Usually this occurs prior to, and at regular intervals following their treatment, as a means of measuring and monitoring the effectiveness of their treatment following an intervention from the patient's perspective.

Standardised data is vital to effective central storage of data and, in particular, to the data linkage and analysis processes necessary to interpret the data to provide meaningful and consistent information via the aforementioned digital dashboards and data visualisation tools. This DSCN provides a standard coding structure and process for the central submission, storage and communication of data for **Boston Carpal Tunnel Syndrome Questionnaire** PROMs questions.

This data standard defines the information specification, and serves as a basis for the development of technical and interoperability standards which, in turn, define the data extraction and communication mechanisms necessary to unlock data from PROMs applications for both national and local purposes, to enable analysis at patient and population

---

<sup>1</sup> <https://gov.wales/welsh-value-health-centre-data-requirements-whc2022005>

level. The detail of these technical standards is described in the associated technical specification documentation.

The scope of this standard is independent of the platform or source application used to capture information, however it is limited to the nationally-validated or standardised questionnaires and PROMs tools. The composition of these questionnaires is described in separate DSCNs, one for each questionnaire.

Also defined is a set of metadata items which underpin the data in an associated PROMs Metadata Standard. This comprises the following components or *data modules*:

- Patient Details;
- Document Details;
- Event Details;
- PROMs Details; and
- Data Entry Details.

This DSCN should be read in conjunction with the metadata specification and associated notices for related validated/standardised questionnaires and PROMs tools.

### Effective Date

This data standard is effective from the date of publication. Only those data flows that comply with the standard and associated technical standards will be processed for central storage and consumption by ViH products and nationally-developed views managed centrally by Digital Health and Care Wales (DHCW). Details of the implementation plan and central submission process are to be described in the associated technical specification.

### Description of Change

To introduce a standard coding structure for the **Boston Carpal Tunnel Syndrome Questionnaire** PROMs tool.

### Actions Required

Local Health Boards / Trust:

- To work collaboratively with DHCW and other provider organisations to develop the technical interoperability standards necessary for effective communication of PROMs data across systems and organisational boundaries; and ultimately
- To supply questionnaire and PROMs data to DHCW in accordance with the information specification described in this DSCN.

Digital Health and Care:

- To work collaboratively with provider organisations to develop the technical interoperability standards necessary for effective communication of questionnaire and PROMs data across systems and organisational boundaries; and ultimately
- To supply questionnaire and PROMs data to health boards and trusts in accordance with the information specification described in this DSCN.

---

**Appendix A: Table reflecting areas that are impacted as a result of this DSCN**

The following table shows where there are changes to the scope and/or definitions of applicable data sets, data items, terms and other associated areas that are linked with the changes documented within this DSCN.

Each data definition type is shown in the sequence in which it appears in this DSCN.

<b>Data Definition Type</b>	<b>Name</b>	<b>Status</b>
Data module	Patient Details	Existing
Data module	Document Details	Existing
Data module	Event Details	Existing
Data module	PROMs Details	Existing
Data module	Data Entry Details	Existing
Data module	Boston Carpal Tunnel Syndrome Questionnaire (BCTQ)	New
Data item	Night Pain	New
Data item	Sleepless nights	New
Data item	Daytime	New
Data item	Restless days	New
Data item	Length of pain	New
Data item	Numbness	New
Data item	Weakness	New
Data item	Tingling	New
Data item	Loss of sensation	New
Data item	Numbness - night	New
Data item	Grip	New
Data item	Writing	New
Data item	Buttoning clothes	New
Data item	Holding a book	New
Data item	Telephone	New
Data item	Opening jars	New
Data item	Chores	New
Data item	Carrying	New
Data item	Self-care	New
Data item	Symptom severity Score	New
	Functional status Score	New

## Appendix B: Data Set Structure

### Boston Carpal Tunnel Syndrome Questionnaire (BCTQ)

Data Type	Item Name	Reference	Data represents
Data Module	Patient Details	MPDPX	See PROMs Metadata specification
Data Module	Document Details	MDDPX	See PROMs Metadata specification
Data Module	Event Details	MEDPX	See PROMs Metadata specification
Data Module	PROMs Details	MPRPX	See PROMs Metadata specification
Data Module	Data Entry Details	MDEPX	See PROMs Metadata specification
Data Item	Nigh pain	BCTPX001X	Code from applicable value set
Data Item	Sleepless night	BCTPX002X	Code from applicable value set
Data Item	Daytime	BCTPX003X	Code from applicable value set
Data Item	Restless days	BCTPX004X	Code from applicable value set
Data Item	Length of pain	BCTPX005X	Code from applicable value set
Data Item	Numbness	BCTPX006X	Code from applicable value set
Data Item	Weakness	BCTPX007X	Code from applicable value set
Data Item	Tingling	BCTPX008X	Code from applicable value set
Data Item	Loss of sensation	BCTPX009X	Code from applicable value set
Data Item	Numbness - night	BCTPX010X	Code from applicable value set
Data Item	Grip	BCTPX011X	Code from applicable value set
Data Item	Writing	BCTPX012X	Code from applicable value set
Data Item	Buttoning clothes	BCTPX013X	Code from applicable value set
Data Item	Holding a book	BCTPX014X	Code from applicable value set
Data Item	Telephone	BCTPX015X	Code from applicable value set
Data Item	Opening jars	BCTPX016X	Code from applicable value set
Data Item	Chores	BCTPX017X	Code from applicable value set
Data Item	Carrying	BCTPX018X	Code from applicable value set
Data Item	Self-care	BCTPX019X	Code from applicable value set

<b>Data Type</b>	<b>Item Name</b>	<b>Reference</b>	<b>Data represents</b>
Data Item	Symptom severity Score	BCTPX020X	Calculated score
Data Item	Functional status Score	BCTPX021X	Calculated score

- **Please note that all data modules/items are mandatory, but the information specifications contain details for populating items where there is no data, e.g. 8 – N/A, 9 – Unknown, etc.**
- **Note also that a data record should be submitted as long as there is data for 1 or more questions. For questions where an answer has not been supplied, a value of NULL, N/A or Unknown should be provided against the relevant data item in accordance with the specification described below.**

**Appendix C: Information Specification**

**Boston Carpal Tunnel Syndrome Questionnaire (BCTQ)**

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
	The following questions refer to your symptoms for a typical twenty-four-hour period during the past two weeks.			Heading text – no return value												
	Circle one answer to each question			Rubric – no return value												
BCTPX001X	How severe is the hand or wrist pain that you have at night?	Night pain	1-digit numeric	<table border="1"> <tr><td>1</td><td>I do not have hand or wrist pain at night</td></tr> <tr><td>2</td><td>Mild pain</td></tr> <tr><td>3</td><td>Moderate pain</td></tr> <tr><td>4</td><td>Severe pain</td></tr> <tr><td>5</td><td>Very severe pain</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	I do not have hand or wrist pain at night	2	Mild pain	3	Moderate pain	4	Severe pain	5	Very severe pain	9	Unknown
1	I do not have hand or wrist pain at night															
2	Mild pain															
3	Moderate pain															
4	Severe pain															
5	Very severe pain															
9	Unknown															
BCTPX002X	How often did hand or wrist pain wake you up during a typical night in the past two weeks?	Sleepless night	1-digit numeric	<table border="1"> <tr><td>1</td><td>Never</td></tr> <tr><td>2</td><td>Once</td></tr> <tr><td>3</td><td>Two or three times</td></tr> <tr><td>4</td><td>Four or five times</td></tr> <tr><td>5</td><td>More than 5 times</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	Never	2	Once	3	Two or three times	4	Four or five times	5	More than 5 times	9	Unknown
1	Never															
2	Once															
3	Two or three times															
4	Four or five times															
5	More than 5 times															
9	Unknown															

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
BCTPX003X	Do you typically have pain in your hand or wrist during the daytime?	Daytime	1-digit numeric	<table border="1"> <tr><td>1</td><td>I never have pain during the day</td></tr> <tr><td>2</td><td>I have mild pain during the day</td></tr> <tr><td>3</td><td>I have moderate pain during the day</td></tr> <tr><td>4</td><td>I have severe pain during the day</td></tr> <tr><td>5</td><td>I have very severe pain during the day</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	I never have pain during the day	2	I have mild pain during the day	3	I have moderate pain during the day	4	I have severe pain during the day	5	I have very severe pain during the day	9	Unknown
1	I never have pain during the day															
2	I have mild pain during the day															
3	I have moderate pain during the day															
4	I have severe pain during the day															
5	I have very severe pain during the day															
9	Unknown															
BCTPX004X	How often do you have hand or wrist pain during the daytime?	Restless days	1-digit numeric	<table border="1"> <tr><td>1</td><td>Never</td></tr> <tr><td>2</td><td>Once or Twice a day</td></tr> <tr><td>3</td><td>Three to five times a day</td></tr> <tr><td>4</td><td>More than five times a day</td></tr> <tr><td>5</td><td>The pain is constant</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	Never	2	Once or Twice a day	3	Three to five times a day	4	More than five times a day	5	The pain is constant	9	Unknown
1	Never															
2	Once or Twice a day															
3	Three to five times a day															
4	More than five times a day															
5	The pain is constant															
9	Unknown															
BCTPX005X	How long, on average, does an episode of pain last during the daytime?	Length of pain	1-digit numeric	<table border="1"> <tr><td>1</td><td>I never get pain during the day</td></tr> <tr><td>2</td><td>Less than 10 minutes</td></tr> <tr><td>3</td><td>10-60 minutes</td></tr> <tr><td>4</td><td>Greater than 60 minutes</td></tr> <tr><td>5</td><td>The pain is constant throughout the day</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	I never get pain during the day	2	Less than 10 minutes	3	10-60 minutes	4	Greater than 60 minutes	5	The pain is constant throughout the day	9	Unknown
1	I never get pain during the day															
2	Less than 10 minutes															
3	10-60 minutes															
4	Greater than 60 minutes															
5	The pain is constant throughout the day															
9	Unknown															

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
BCTPX006X	Do you have numbness (loss of sensation) in your hand?	Numbness	1-digit numeric	<table border="1"> <tr><td>1</td><td>No</td></tr> <tr><td>2</td><td>I have mild numbness</td></tr> <tr><td>3</td><td>I have moderate numbness</td></tr> <tr><td>4</td><td>I have severe numbness</td></tr> <tr><td>5</td><td>I have very severe numbness</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No	2	I have mild numbness	3	I have moderate numbness	4	I have severe numbness	5	I have very severe numbness	9	Unknown
1	No															
2	I have mild numbness															
3	I have moderate numbness															
4	I have severe numbness															
5	I have very severe numbness															
9	Unknown															
BCTPX007X	Do you have weakness in your hand or wrist?	Weakness	1-digit numeric	<table border="1"> <tr><td>1</td><td>No weakness</td></tr> <tr><td>2</td><td>Mild weakness</td></tr> <tr><td>3</td><td>Moderate weakness</td></tr> <tr><td>4</td><td>Severe weakness</td></tr> <tr><td>5</td><td>Very severe weakness</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No weakness	2	Mild weakness	3	Moderate weakness	4	Severe weakness	5	Very severe weakness	9	Unknown
1	No weakness															
2	Mild weakness															
3	Moderate weakness															
4	Severe weakness															
5	Very severe weakness															
9	Unknown															
BCTPX008X	Do you have tingling sensations in your hand?	Tingling	1-digit numeric	<table border="1"> <tr><td>1</td><td>No tingling</td></tr> <tr><td>2</td><td>Mild tingling</td></tr> <tr><td>3</td><td>Moderate tingling</td></tr> <tr><td>4</td><td>Severe tingling</td></tr> <tr><td>5</td><td>Very severe tingling</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No tingling	2	Mild tingling	3	Moderate tingling	4	Severe tingling	5	Very severe tingling	9	Unknown
1	No tingling															
2	Mild tingling															
3	Moderate tingling															
4	Severe tingling															
5	Very severe tingling															
9	Unknown															

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
BCTPX009X	How severe is numbness (loss of sensation) or tingling at night?	Loss of sensation	1-digit numeric	<table border="1"> <tr><td>1</td><td>I have no numbness or tingling at night</td></tr> <tr><td>2</td><td>Mild</td></tr> <tr><td>3</td><td>Moderate</td></tr> <tr><td>4</td><td>Severe</td></tr> <tr><td>5</td><td>Very Severe</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	I have no numbness or tingling at night	2	Mild	3	Moderate	4	Severe	5	Very Severe	9	Unknown
1	I have no numbness or tingling at night															
2	Mild															
3	Moderate															
4	Severe															
5	Very Severe															
9	Unknown															
BCTPX010X	How often did hand numbness or tingling wake you up during a typical night during the past two weeks?	Numbness – night	1-digit numeric	<table border="1"> <tr><td>1</td><td>Never</td></tr> <tr><td>2</td><td>Once</td></tr> <tr><td>3</td><td>Two or three times</td></tr> <tr><td>4</td><td>Four or five times</td></tr> <tr><td>5</td><td>More than five times</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	Never	2	Once	3	Two or three times	4	Four or five times	5	More than five times	9	Unknown
1	Never															
2	Once															
3	Two or three times															
4	Four or five times															
5	More than five times															
9	Unknown															
BCTPX011X	Do you have difficulty with the grasping and use of small objects such as keys or pens?	Grip	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Very severe difficulty</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Very severe difficulty	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Very severe difficulty															
9	Unknown															
	On a typical day during the past two weeks have hand and wrist symptoms caused you to have any difficulty doing the activities listed below?			Heading text – no return value												

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
	Please circle one number that best describes your ability to do the activity.			Rubric – no return value												
BCTPX012X	Writing	Writing	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX013X	Buttoning of clothes	Buttoning clothes	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX014X	Holding a book while reading	Holding a book	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
BCTPX015X	Gripping of a telephone handle	Telephone	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX016X	Opening of jars	Opening jars	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX017X	Household chores	Chores	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															

Question Reference	Question Text	Data Item Name	Format	Value Set / Example												
BCTPX018X	Carrying of grocery bags	Carrying	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX019X	Bathing and dressing	Self-care	1-digit numeric	<table border="1"> <tr><td>1</td><td>No difficulty</td></tr> <tr><td>2</td><td>Mild difficulty</td></tr> <tr><td>3</td><td>Moderate difficulty</td></tr> <tr><td>4</td><td>Severe difficulty</td></tr> <tr><td>5</td><td>Cannot do at all due to hand or wrist symptoms</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	No difficulty	2	Mild difficulty	3	Moderate difficulty	4	Severe difficulty	5	Cannot do at all due to hand or wrist symptoms	9	Unknown
1	No difficulty															
2	Mild difficulty															
3	Moderate difficulty															
4	Severe difficulty															
5	Cannot do at all due to hand or wrist symptoms															
9	Unknown															
BCTPX020X	Symptom severity Score	Symptom severity Score	Decimal (to as many decimal places as possible, i.e. no rounding)	Score (1-5) based on Boston Carpal Tunnel Questionnaire scoring method, e.g. 2.5. Use NULL for missing, unknown or N/A values												
BCTPX021X	Functional status Score	Functional status Score	Decimal (to as many decimal places as possible, i.e. no rounding)	Score (1-5) based on Boston Carpal Tunnel Questionnaire scoring method, e.g. 2.5. Use NULL for missing, unknown or N/A values												