

MDHAQ

Multidimensional Health Assessment Questionnaire (MDHAQ) Patient Instruction Guide



Learn how to track your rheumatoid arthritis disease activity using part of the MDHAQ (pronounced em-dee-HACK) to calculate your RAPID3 score

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Included separately:



Multidimensional Health Assessment Questionnaire Form Tear Pad

Includes the RAPID3 questions



RAPID3 Patient Tracker



MDHAQ Patient Instructional Video Link

Welcome!



This instruction guide is designed to help you become more involved with your rheumatoid arthritis (RA) management. It will show you how to use the Multidimensional Health Assessment Questionnaire (MDHAQ, pronounced em-dee-HACK) to calculate your RAPID3 score by answering 3 questions. RAPID3 turns your answers about how your RA is affecting you into a number score. This guide will also show you how to use this score to follow your RA disease activity over time.

Keeping track of your RAPID3 score as it changes over time and sharing this information with your healthcare team can improve discussions during your office visits, which helps your healthcare provider better manage your RA.

Healthcare providers understand the importance of listening to their patients and value your opinion. In the treat-to-target approach to managing RA, healthcare providers work with their patients who have RA to set goals of remission or low disease activity (LDA). The RAPID3 score, in addition to physical exams, can show your progress toward your treatment goal.

Background on the MDHAQ



What is the MDHAQ?

The MDHAQ is an enhanced version of the modified MHAQ and the original Health Assessment Questionnaire (HAQ). The MDHAQ is different due to its inclusion of patient-friendly questions tied to *activities of daily living* (ADL). These quality-of-life issues were not adequately reflected in the original questionnaires. As a result, patients may have reported normal scores on certain disease-activity measures, but emotional and lifestyle challenges were not effectively factored into the broader clinical assessment.

Background on the RAPID3



What is the RAPID3?

RAPID3 stands for Routine Assessment of Patient Index Data 3. It is a measure of RA disease activity. The RAPID3 score is made up of the answers to 3 questions located on the MDHAQ form. The 3 questions are about your RA symptoms and can be completed in 3-5 minutes. RAPID3 was developed by rheumatologists as a way to see changes in your RA symptoms. RAPID3 is one of 5 RA disease activity measures recommended by the American College of Rheumatology.

The MDHAQ is a questionnaire about how your RA is affecting you. Three questions on this questionnaire are used to calculate your RAPID3 score and disease activity, and they are the only questions you will need to answer. These 3 questions ask about your physical function (FN), your level of pain (PN), and your overall estimation of how you are feeling (referred to as the patient global assessment [PTGL]). You are to complete these questions on your own, based on how you feel.

Please note that answering the other questions on the MDHAQ form may be helpful to your healthcare provider and you are strongly encouraged to complete them. However, only questions 1, 2, and 6 are needed to calculate your RAPID3 score.

Background on the RAPID3 (cont'd)



How does the RAPID3 measure disease activity?

RAPID3 scores place disease activity into 4 categories that estimate the severity of your disease. They include near remission (R), low severity (LS), moderate severity (MS), and high severity (HS). A chart describing these categories is located on the bottom of the RAPID3 scoring section on the MDHAQ form. One of the most important uses of the RAPID3 score is to determine the severity level of your RA based on your ability to perform certain functions, the level of pain you feel, and how you feel overall. Your disease severity is a useful measure to track your treatment progress and important to your healthcare provider in planning your medical care.



How are my RAPID3 scores used?

Your healthcare provider can use your RAPID3 scores to better understand your disease activity level. With RA, a single measure or test to assess your disease severity or treatment progress, such as a blood pressure test for high blood pressure, does not exist. In order for your healthcare provider to assess your RA disease activity level, many things must be considered, such as your physical examination, certain laboratory or diagnostic tests, and other medical conditions you may have in addition to your RA. Your RAPID3 scores provide your healthcare provider with another piece of information that can help him or her understand your disease activity level, which is important to the care you receive.



How do I correctly answer the MDHAQ questions?

There are no wrong answers to these questions. Just answer them as best you can. Don't ask a healthcare provider or loved one to answer these questions for you—this is about your experience(s) of how you feel.



When should I fill out the questionnaire?

It is recommended that you fill out the questionnaire and enter the RAPID3 score in your patient tracker:

- On the day of an appointment with your doctor**
- At least once a month**

Using the RAPID3 patient tracker to keep track of your scores is beneficial to both you and your healthcare provider. Every recording of your RAPID3 score and disease severity level—whether it's for an appointment with your doctor or a monthly self check—may help you and your healthcare provider learn more about changes in your disease over time, which is important in making treatment plan decisions.

While keeping track of your disease activity level is important, calculating your RAPID3 score on the day of an appointment with your doctor is most important. Bringing your MDHAQ form with your completed RAPID3 score and current disease activity level will provide your healthcare provider with the most current information about your assessment of your RA disease activity.

How to Complete the MDHAQ Questions

Questions 1, 2, and 6 on the MDHAQ form are the questions that make up the RAPID3. Your responses to these 3 questions are required to calculate your RAPID3 score. The instructions below will guide you through how to answer each question.

Name: _____ Date of Birth: _____ Today's Date: _____

1. Please check (✓) the **ONE** best answer for your abilities at this time:

OVER THE PAST WEEK, were you able to:

	Without ANY difficulty	With SOME difficulty	With MUCH difficulty	UNABLE to do
Dress yourself, including tying shoelaces and doing buttons?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Get in and out of bed?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Drink full cup or glass to your mouth?	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Walk outdoors on flat ground?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Wash and dry your entire body?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Bend down to pick up clothing from the floor?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Turn regular faucets on and off?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Get in and out of a car, bus, train, or airplane?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Walk two miles?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Participate in sports and games as you would like?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3
Get a good night's sleep?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
Deal with feelings of anxiety or being nervous?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
Deal with feelings of depression or feeling blue?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3

2. How much pain have you had because of your condition **OVER THE PAST WEEK**? Please indicate below how severe your pain has been:

NO PAIN ○○○○○○○○○○○○○○○○○○○○○○○○○○ **PAIN AS BAD AS IT COULD BE**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

3. When you awakened in the morning **OVER THE PAST WEEK**, did you feel stiff? No Yes
If "Yes," please indicate the number of minutes _____, or hours _____ until you are as limber as you will be for the day

4. How much of a problem has **UNUSUAL** fatigue or tiredness been for you **OVER THE PAST WEEK**? Please indicate below:

FATIGUE IS NO PROBLEM ○○○○○○○○○○○○○○○○○○○○○○○○○○ **FATIGUE IS A MAJOR PROBLEM**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

5. How do you feel **TODAY** compared to **ONE WEEK AGO**? Please check (✓) only one.
(1) Much Better , (2) Better , (3) the Same , (4) Worse , (5) Much Worse

6. Considering all the ways in which illness and health conditions may affect you at this time, please indicate below how you are doing:

VERY WELL ○○○○○○○○○○○○○○○○○○○○○○○○○○ **VERY POORLY**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

7. How often do you exercise aerobically (sweating, increased heart rate, shortness of breath) for at least one-half hour (30 minutes)? Please check (✓) only one.
 3 or more times a week 1-2 times per week 1-2 times per month Do not exercise regularly
 Cannot exercise due to disability/ handicap

8. Over the last 6 months, have you had: [please check (✓) **NO** or **YES** – please do not leave blank]

An operation or new illness	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of arthritis or other medication	<input type="checkbox"/> No <input type="checkbox"/> Yes
A patient visit or stay at a hospital	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of address	<input type="checkbox"/> No <input type="checkbox"/> Yes
An important new symptom	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of marital status	<input type="checkbox"/> No <input type="checkbox"/> Yes
Side effects of any drugs	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change job or work duties, quit work, retired	<input type="checkbox"/> No <input type="checkbox"/> Yes
Smoke cigarettes regularly	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change of medical insurance, Medicare, etc.	<input type="checkbox"/> No <input type="checkbox"/> Yes
A fall, accident or other trauma	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change of primary care or other doctor	<input type="checkbox"/> No <input type="checkbox"/> Yes

Please explain any "Yes" answers: _____

STEP 1

STEP 2

STEP 3

MDHAQ 365

FN (1) 5

PN (2)

PTGL (6)

RAPID3 (0-30)

Category
HS= >12
MS=6.1-12
LS= 3.1-6
R= ≤3

Please turn over

Question 1 Physical Functioning

The first part of the RAPID3 includes 10 questions about your ability to perform certain physical function (FN) activities. You are asked to answer each question as to whether you can perform them without ANY difficulty, with SOME difficulty, with MUCH difficulty, or if you are UNABLE to do them.

STEP 1

Answer each question by checking a box to the right of the question that describes how you feel. (For the questions that ask if you can walk 2 miles or participate in sports and games as you would like, please answer as best as you can. If you don't do those activities at this time, answer how difficult you think it would be if you were to participate in them.)

STEP 2

When you have finished answering the questions, count up the points using the numbers that appear to the right of the box. In the example, the responses result in 15 points.

STEP 3

Look at the long box to the right of Question 1 that contains the scoring boxes for the RAPID3. Under the FN box is a chart of numbers and what they equal divided by 3. Divide the number you calculated from Question 1 by 3 or use the chart under the FN (1) box to do the math for you. The number you get is your function (FN) score.

In this example, 15 points equals 5. Place 5 in the function (FN) score. This is the first number that will be used to calculate your RAPID3 score.

How to Complete the MDHAQ Questions (cont'd)

Name: _____ Date of Birth: _____ Today's Date: _____

MDHAQ EnV8 R865

1. Please check (✓) the **ONE** best answer for your abilities at this time:

OVER THE PAST WEEK, were you able to:	Without ANY difficulty	With SOME difficulty	With MUCH difficulty	UNABLE to do
Dress yourself, including tying shoelaces and doing buttons?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Get in and out of bed?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Lift a full cup or glass to your mouth?	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Walk outdoors on flat ground?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Wash and dry your entire body?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Bend down to pick up clothing from the floor?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Turn regular faucets on and off?	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Get in and out of a car, bus, train, or airplane?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
Do sports and games as you would like?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3
Get a good night's sleep?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
Deal with feelings of anxiety or being nervous?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
Deal with feelings of depression or feeling blue?	<input type="checkbox"/> 0	<input type="checkbox"/> 1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3

2. How much pain have you had because of your condition **OVER THE PAST WEEK**? Please indicate below how severe your pain has been:

NO PAIN ○○○●○○○○○○○○○○○○○○○○○○○ **PAIN AS BAD AS IT COULD BE**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

3. When you awakened in the morning **OVER THE PAST WEEK**, did you feel stiff? No Yes
If "Yes," please indicate the number of minutes _____, or hours _____ until you are as limber as you will be for the day.

4. Has a problem with **UNUSUAL** fatigue or tiredness been for you **OVER THE PAST WEEK**? Please indicate below:

○○○○○○○○○○○○○○○○○○○○ **FATIGUE IS A MAJOR PROBLEM**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

5. How do you feel **TODAY** compared to **ONE WEEK AGO**? Please check (✓) only one.
(1) Much Better , (2) Better , (3) the Same , (4) Worse , (5) Much Worse

6. Considering all the ways in which illness and health conditions may affect you at this time, please indicate below how you are doing:

VERY WELL ○○○○○○○○○●○○○○○○○○○○○○○○○ **VERY POORLY**
0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10

7. How often do you exercise aerobically (sweating, increased heart rate, shortness of breath) for at least one-half hour (30 minutes)? Please check (✓) only one.
 3 or more times a week 1-2 times per week 1-2 times per month Do not exercise regularly Cannot exercise due to disability/ handicap

8. Over the last 6 months, have you had: [please check (✓) **NO** or **YES** – please do not leave blank]

An operation or new illness	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of arthritis or other medication	<input type="checkbox"/> No <input type="checkbox"/> Yes
A patient visit or stay at a hospital	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of address	<input type="checkbox"/> No <input type="checkbox"/> Yes
An important new symptom	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change(s) of marital status	<input type="checkbox"/> No <input type="checkbox"/> Yes
Side effects of any drugs	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change job or work duties, quit work, retired	<input type="checkbox"/> No <input type="checkbox"/> Yes
Smoke cigarettes regularly	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change of medical insurance, Medicare, etc.	<input type="checkbox"/> No <input type="checkbox"/> Yes
A fall, accident or other trauma	<input type="checkbox"/> No <input type="checkbox"/> Yes	Change of primary care or other doctor	<input type="checkbox"/> No <input type="checkbox"/> Yes

Please explain any "Yes" answers: _____

Please turn over

FN (1)
5

PN (2)
1.5

PTGL (6)
4

RAPID3

(0-30)

Category
HS= >12
MS=6.1-12
LS= 3.1-6
R= <=3

Question 2 Pain

The second part of the RAPID3 is made up of Question 2 and measures your level of pain (PN).



Choose the circle that relates to the pain you are feeling, with "0" suggests no pain and "10" suggests pain as bad as it could be. After you select the circle that best describes the pain you are feeling, locate the number below the circle and enter this number in the box to the right labeled PN (2) for pain.

In the example above, 1.5 was chosen, which is the pain (PN) score. Place 1.5 in the PN (2) box. This will be the second number used to calculate your RAPID3 score.

Question 6 Patient Global Assessment

The third part of the RAPID3 is made up of Question 6. This question measures your patient global assessment (PTGL). Your RA as well as other health conditions should be considered when making this choice.



Choose the circle that relates to how you are feeling, with "0" indicating you are doing very well and "10" being you are doing very poorly. After you select the circle that best describes how you are feeling, locate the number below the circle and enter this number in the box to the right labeled PTGL (6).

In the example above, the patient global assessment (PTGL) score is 4. This is the third and final number used to calculate your RAPID3 score.

Please note that answering the other questions on the MDHAQ form may be helpful to your healthcare provider and you are strongly encouraged to complete them. However, only questions 1, 2, and 6 are needed to calculate your RAPID3 score.

How to Calculate Your RAPID3 Score

How to Determine Your Disease Activity Level

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FN (1)
5

With SOME difficulty	With MUCH difficulty	UNABLE to do
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

1=0.3 16=5.3
2=0.7 17=5.7
3=1.0 18=6.0
4=1.3 19=6.3
5=1.7 20=6.7
6=2.0 21=7.0
7=2.3 22=7.3
8=2.7 23=7.7
9=3.0 24=8.0
10=3.3 25=8.3
11=3.7 26=8.7
12=4.0 27=9.0
13=4.3 28=9.3
14=4.7 29=9.7
15=5.0 30=10

PN (2)
1.5

1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3

PTGL (6)
4

WEEK? Please indicate below

9.5 10 PAIN AS BAD AS IT COULD BE

Stiff? No Yes

If you are as limber as you will

OVER THE PAST WEEK?

9.5 10 FATIGUE IS A MAJOR PROBLEM

only one.

(5) Much Worse

at this time, please indicate

9.5 10 VERY POORLY

ess of breath) for at least

Do not exercise regularly

RAPID3
10.5
(0-30)

Category
HS= >12
MS=6.1-12
LS= 3.1-6
R= ≤3

CALCULATE YOUR RAPID3 SCORE

To calculate your RAPID3 score, add together the numbers located in the FN box, the PN box, and the PTGL box. Place the result in the box labeled RAPID3.

In this example, when you add the functional score of 5 to the pain score of 1.5 and the patient global assessment of 4, you get a total RAPID3 score of 10.5.

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FN (1)

With SOME difficulty	With MUCH difficulty	UNABLE to do
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
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<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

1=0.3 16=5.3
2=0.7 17=5.7
3=1.0 18=6.0
4=1.3 19=6.3
5=1.7 20=6.7
6=2.0 21=7.0
7=2.3 22=7.3
8=2.7 23=7.7
9=3.0 24=8.0
10=3.3 25=8.3
11=3.7 26=8.7
12=4.0 27=9.0
13=4.3 28=9.3
14=4.7 29=9.7
15=5.0 30=10

PN (2)

1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3
1.1	<input type="checkbox"/> 2.2	<input type="checkbox"/> 3.3

PTGL (6)

WEEK? Please indicate below

9.5 10 PAIN AS BAD AS IT COULD BE

Stiff? No Yes

If you are as limber as you will

OVER THE PAST WEEK?

9.5 10 FATIGUE IS A MAJOR PROBLEM

only one.

(5) Much Worse

at this time, please indicate

9.5 10 VERY POORLY

ess of breath) for at least

Do not exercise regularly

RAPID3

(0-30)

Category
HS= >12
MS=6.1-12
LS= 3.1-6
R= ≤3

RA DISEASE ACTIVITY LEVEL

Your RAPID3 score can be any number from 0-30. The severity level of your RA is estimated based on your RAPID3 score. A chart located at the bottom of the RAPID3 score section will tell you what category your RAPID3 score places you in. A score greater than 12 is classified as high severity (HS).

A score between 6.1 and 12 suggests moderate severity (MS). A score between 3.1 and 6 suggests low severity (LS), and a score less than or equal to 3 suggests remission (R).

In this example, the RAPID3 score of 10.5 indicates that this patient's RA is moderate severity (MS).

How to Fill Out Your RAPID3 Patient Tracker

Once you have completed questions 1, 2, and 6 of the MDHAQ and calculated your RAPID3 score, you are ready to record your scores in the RAPID3 logbook.



RAPID3 Score Entry Type

First, pick the reason you calculated your RAPID3 score. Was this an entry made on the day of an appointment with your doctor, or is this a routine monthly self check?

In this example, let's say you have an appointment with your doctor tomorrow and calculated the RAPID3 score to prepare for it. Choose the "Doctor's Appointment" option in this section.



RAPID3 Question Scores

Date your entry. Then fill in your FN, PN, PTGL, and RAPID3 scores in each section for the questionnaire you just filled out. This allows you to see how your scores may change over time.

The example on the right shows how you would enter an FN score of 5, a PN score of 1.5, and a PTGL score of 4, which makes the total RAPID3 score 10.5.



RAPID3 Score Chart and Disease Severity Category

What disease severity category did your RAPID3 score place you in?

Chart your RAPID3 score here by placing an X on the row of your score. The chart is set up for a score of 0-30 and shaded to reflect the score's severity level. It is important to note when your RAPID3 score moves into a new shaded section. This means your status has changed and you should discuss this with your healthcare provider as needed.

In this case we placed a mark at 10.5 (the RAPID3 score for this example).

The disease score of 10.5 puts you in the disease severity category of moderate severity because the score 10.5 falls in between the numbers 6.1 and 12.

RAPID3 SCORE TRACKER

A

Pick One

Doctor's Appointment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Routine Monthly Self Check	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B

Date	1/8				
Physical Function (FN) +	5				
Pain (PN) +	1.5				
Patient Global Assessment (PTGL) +	4				
=RAPID3 Score		10.5			

C

High Severity (RAPID3 Score greater than 12)	30				
29					
28					
27					
26					
25					
24					
23					
22					
21					
20					
19					
18					
17					
16					
15					
14					
13					
Moderate Severity (RAPID3 Score 6.1 to 12)	12				
11					
10	X				
9					
8					
7					
Low Severity (RAPID3 Score 3.1 to 6)	6				
5					
4					
Near Remission (RAPID3 Score less than or equal to 3)	3				
2					
1					
0					

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Keeping track of your RA disease activity is an individual decision. The important thing is that you are open and honest in sharing information about how you feel to help your healthcare provider do what is best for you. These patient education materials have been designed to help you do that. Your healthcare provider may find your RAPID3 score, MDHAQ forms, and tracking history useful in managing your RA. Some healthcare providers use other tests than the RAPID3 to assess their patients' disease activity. If this is the case with your healthcare provider, he or she may decide not to use your RAPID3 scores and information. Feel free to continue tracking your RAPID3 scores on your own if you find it helpful in monitoring your disease activity.

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