

## ERRATA APPROVED

### interRAI Mental Health (MH) 9.1

These changes have been approved by the interRAI Instrument and Systems Development Committee (ISD)  
List released: June 10, 2014

|                                 |   |
|---------------------------------|---|
| <b>Edition</b>                  | interRAI Standard Edition   |
| Version # and Publication Dates | MH 9.1 March 2010<br>MH 9.1.1 September 2010<br>MH 9.1.2 October 2011 |

Yellow highlight indicates SUBSTANTIVE EDITORIAL change or correction that was approved.

Red text indicates words to insert; red text with strikethrough (~~example~~) indicates words to delete.

| <b>FORM</b> |        |   |  |
|-------------|--------|---|--|
| Page        | Item # | Change Suggested/Requested  |  |
| 2           | C      | Section C Head<br>"MENTAL STATUS STATE INDICATORS"  |  |
| 2           | C1     | add the item head to C1:<br>"MENTAL STATE INDICATORS"   |  |
| 3           | D5d    | "Person <del>had</del> has to have a drink..."  |  |
| 3           | E2     | "INTENT OF ANY SELF-INJURIOUS ATTEMPT WAS TO KILL <del>HIM/HERSELF</del> SELF"  |  |
| 4           | G5     | CHANGE IN DECISION MAKING AS COMPARED TO 90 DAYS AGO<br>(OR SINCE LAST ASSESSMENT IF LESS THAN 90 DAYS AGO)   |  |
| 6           | J12    | 1 <del>Control</del> Managed with any catheter or ostomy over last 3 days   |  |
| 6           | J10    | 10. RECENT FALLS<br>[Skip if last assessment more than 30 days ago or if this is first assessment; <b>only code falls that have occurred since the last assessment.</b> ]<br>0 No<br>1 Yes<br>[blank] Not applicable (first assessment, or more than 30 days since last assessment) |  |

| MANUAL |                 |  |  |
|--------|-----------------|--|--|
| Page   | Item #          | Change Suggested/Requested   |  |
|        | Localized items | Drop this note from items flagged as [Country Specific]<br><br><b>NOTE: If not in in Canada, please consult your addendum.</b>   |  |
| 27     | C               | Section C head:<br><b>"MENTAL STATUS STATE INDICATORS"</b>   |  |
| 41     | D5d             | "Person <del>had</del> has to have a drink..."   |  |
| 48     | E2              | "Intent of Any Self-Injurious Attempt Was to Kill <del>Him or Herself-Self</del> "   |  |
| 63     | G5              | Change in Decision Making as Compared to 90 Days Ago (or since Last Assessment <b>if Less Than 90 Days Ago</b> )   |  |
| 86     | J10             | If this is the first assessment, or if more than 30 days have passed since the last assessment, simply leave this item blank.<br>If this is a follow-up assessment, with less than 30 days since the last assessment,<br><b>code for the occurrence of one or more falls since the last assessment. only code falls that have occurred since the last assessment.</b>  |  |
| 87     | J11a            | Change header:<br><del>J11a. Frequency of pain — Measures how often the person experiences pain (reports or shows evidence of pain); includes grimacing, teeth clenching, moaning, withdrawal when touched, and other nonverbal signs suggesting pain. If the person has not demonstrated any pain in the last 3 days because of an effective pain management regimen, the minimum value for pain frequency should be "1".</del><br><br>to header and definition:<br><b>J11a. Frequency with which person complains or shows evidence of pain</b><br><br><b>Definition</b><br><b>Measures how often the person experiences pain (reports or shows evidence of pain); includes grimacing, teeth clenching, moaning, withdrawal when touched, and other nonverbal signs suggesting pain. If the person has not demonstrated any pain in the last 3 days because of an effective pain management regimen, the minimum value for pain frequency should be "1".</b> |  |
| 88     | J11b            | Change header:<br><del>J11b. Intensity of pain — Measures the level of pain as the person perceives it (as described or manifested by the person). Use the following scale to indicate the level of pain experienced. Code for the highest level of pain present.</del>  |  |

|     |      |  |  |  |
|-----|------|--|--|--|
|     |      | <p>to header and definition:</p> <p><b>J11b. Intensity of highest level of pain present</b></p> <p><b>Definition</b><br/>         Measures the level of pain as the person perceives it (as described or manifested by the person). Use the following scale to indicate the level of pain experienced. Code for the highest level of pain present.</p>   |  |  |
| 88  | J11c | <p>Change header:</p> <p><del>J11c. Consistency of pain — Measures the frequency (ebb and flow) of pain from the person's perspective.</del></p> <p>to header and definition:</p> <p><b>J11c. Consistency of pain</b></p> <p><b>Definition</b><br/>         Measures the frequency (ebb and flow) of pain from the person's perspective.</p>   |  |  |
| 88  | J11d | <p>Change header:</p> <p><del>J11d. Pain control — The ability of the current therapeutic regimen to control the person's pain adequately (from the person's point of view). This item describes the adequacy or inadequacy of pain control measures (such as medications, massage, TENS, or other therapeutic regimen) instituted by the person, caregiver, or clinical staff caring for the person.</del></p> <p>to header and definition:</p> <p><b>J11d. Pain control</b></p> <p><b>Definition</b><br/>         The ability of the current therapeutic regimen to control the person's pain adequately (from the person's point of view). This item describes the adequacy or inadequacy of pain control measures (such as medications, massage, TENS, or other therapeutic regimen) instituted by the person, caregiver, or clinical staff caring for the person.</p> |  |  |
| 90  | J12  | <p>1. <del>Complete control</del> <b>Managed</b> with any catheter or ostomy <b>over last 3 days</b> — <del>Control</del> <b>Managed</b> with <del>use of</del> any type of catheter or urinary collection device.</p>   |  |  |
| 115 | O2b  | <p>"Weight gain may be an indication of poor nutritional intake or <del>a psychiatric an</del> eating disorder. "</p>  |  |  |
| 133 | S3   | <p><del>Rett's disorder syndrome</del><br/> <del>Tourette's disorder syndrome</del></p>  |  |  |