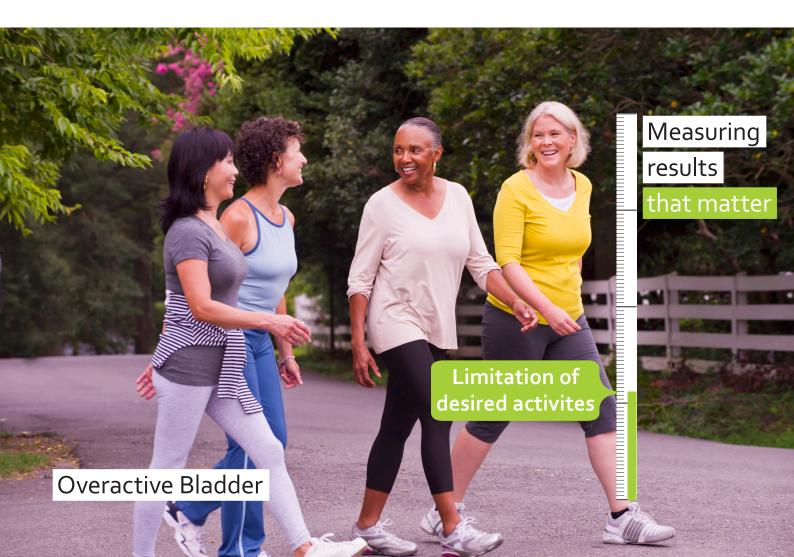


Version 1.2.2

Revised: April 10th, 2017





We are thrilled that you are interested in measuring outcomes for your patients with overactive bladder according to ICHOM standards. It is our hope that this Reference Guide will facilitate the process of implementing our Standard Set and ensure collection of comparable data for global benchmarking and learning.

© 2016 ICHOM. All rights reserved. When using this set of outcomes, or quoting therefrom, in any way, we solely require that you always make a reference to ICHOM as the source so that this organization can continue its work to define more standard outcome sets.

Introducing ICHOM and the Reference Guide

ICHOM brings together patient representatives, clinician leaders, and registry leaders from all over the world to develop Standard Sets, comprehensive yet parsimonious sets of outcomes and case-mix variables we recommend all providers track.

Each Standard Set focuses on patient-centered results, and provides an internationally-agreed upon method for measuring each of these outcomes. We do this because we believe that standardized outcomes measurement will open up new possibilities to compare performance globally, allow clinicians to learn from each other, and rapidly improve the care we provide our patients.

Our Standard Sets include initial conditions and risk factors to enable meaningful case-mix adjustment globally, ensuring that comparisons of outcomes will take into account the differences in patient populations across not just providers, but also countries and regions. We also include high-level treatment variables to allow stratification of outcomes by major treatment types. A comprehensive data dictionary is included in the appendix.

Working Group Members for Overactive Bladder

The following individuals dedicated both time and expertise to develop the ICHOM Standard Set for Overactive Bladder in partnership with ICHOM, under the leadership of Drs. Adrian Wagg and Ian Milsom.

Australia	New Zealand	United States
Kate Moore	Peter Herbison	Anita Anderson
George Szonyi		Jennifer Anger
Canada	Sweden	Caroline Foust-Wright
Adrian Wagg	Ian Milsom	Ann Gormley
Adrian Wagg	United Kingdom	Jessica McKinney Abraham Morse
Netherlands	Linda Cardozo	
John Heesakkers	Nikki Cotterill	Samantha Pulliam
	Philip Toozs-Hobson	

Supporting Organizations

The Overactive Bladder Standard Set is made possible only through the support of IUGA.

Thank you.



We would also like to acknowledge the following organizations for their support in sourcing consumer feedback:







Treatment Approaches Covered for Overactive Bladder

For Overactive Bladder, the following treatment approaches (or interventions) are covered by our Standard Set.

Treatment Approaches

Patient education | Behavioral modification | Pharmacological management |
Intradetrusor Botox, PTNS, SNS | Surgery

ICHOM Standard Set for Overactive Bladder

Case-Mix Variables

Patient Population	Measure	Supporting Information	Timing	Suggested Data Sources
Demographic Factor				
All patients	Year of birth Male or female	- N/A	Baseline	Patient-reported
Baseline Clinical Fact	tors			
	Patient height Patient weight	To calculate BMI	Baseline Pa	
All patients	History of surgery to the pelvis	For example, surgery for stress urinary incontinence, pelvic organ prolapse, bowel or rectal survery, or hysterectomy		
	Diagnosis of diabetes, irritable bowel syndrome, inflammatory bowel disease, cognitive impairment	N/A		Patient-reported
	Co-existing pelvic organ prolapse			
Female patients only	Co-existing stress incontinence			
	Current use of estrogens or hormone replacement therapy			
Male patients only	Diagnosis of BPH or prostatitis			
Patients reporting a history of pelvic surgery	Time since pelvic surgery	N/A		

Treatment Variables

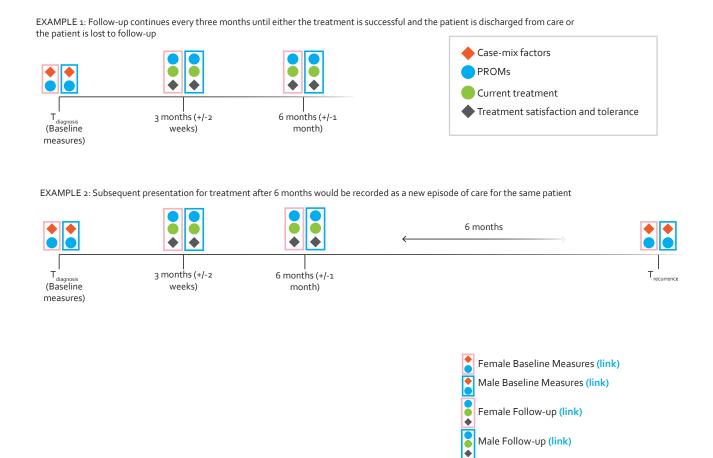
Patient Population	Measure	Supporting Information	Timing	Suggested Data Sources
All patients	Current OAB treatments	Including behavioral modifications, pelvic floor physical therapy, oral or topical medication, Intradetrusor onabotulinumtoxinA, electrical stimulation, PTNS, SNS, and surgery	Baseline and follow-up	Patient-reported

Outcomes

Patient Population	Measure	Supporting Information	Timing	Suggested Data Sources
OAB Symptom Seve	rity and Burden			
All patients	Frequency and perceived burden of OAB symptoms	Tracked via the ICIQ-OAB	Baseline and follow-up	Patient-reported
Health-Related Qua	lity of Life			
All patients	The effect of OAB on HRQoL domains	Assessed via the OAB-q SF (4- week recall)	Baseline and follow-up	Patient-reported
Sexual Function				
All patients	Interference with sexual functioning	Assessed via the ICIQ- FLUTSsex (women) or ICIQ- MLUTSsex (men)	Baseline and follow-up	Patient-reported
Side Effects and Burden of Treatment				
All patients	Treatment benefit and tolerance	Assessed via the TBS and a single question on treatment tolerability	Follow-up	Patient-reported
Treatment Satisfaction				
All patients	Patients satisfaction with treatment	Single item question	Follow-up	Patient-reported

Follow-Up Timeline and Sample Questionnaires

The following timeline illustrates when Standard Set variables should be collected from patients, clinicians, and administrative sources. Links to the sample questionnaires may be found in the legend below.



Collecting Patient-Reported Outcome Measures

Survey(s) Used	Licensing Information	Scoring Guide
ICIQ-OAB	Free for use in clinical practice, routine outcomes measurement, and clinical research but permission from the developer is required. Please visit the following webpage to obtain permission and an offical copy and scoring guide or to inquire about translations: http://www.iciq.net/userpolicy.html	Please visit the following webpage to obtain an offical copy and scoring guide: http://www.iciq.net/userpolicy.html
OAB-q SF (4-week recall)	Copyrighted to Pfizer. Licensing information to be determined.	Coyne KS et al (2015) An Overactive Bladder Symptom and Health-Related Quality of Life Short-Form: Validation of the OAB-q SF. Neurourology and Urodynamics 34: 255-263.
ICIQ-MLUTSsex and ICIQ- FLUTSsex	Free for use in clinical practice, routine outcomes measurement, and clinical research but permission from the developer is required. Please visit the following webpage to obtain permission and an offical copy and scoring guide or to inquire about translations: http://www.iciq.net/userpolicy.html	Please visit the following webpage to obtain an offical copy and scoring guide: http://www.iciq.net/userpolicy.html
TBS	Free for use without a license.	Please see Colman S et al (2008) Validation of the treatment benefit scale for assessing subjective outcomes in Treatment of Overactive Bladder. Urology 72: 803-807.

The Growing ICHOM Community

By implementing the ICHOM Standard Sets, you become part of an expanding, international community of innovative health care providers dedicated to improving value for patients. To learn more about how ICHOM can assist your organization in implementing outcome measurement, contact us at implement@ichom.org, or visit http://www.ichom.org/measure.

Appendix

Introduction to the Data Dictionary

This data dictionary is designed to help you measure the ICHOM Overactive Bladder Standard Set as consistently as possible to the Working Group recommendation. ICHOM is actively preparing for benchmarking efforts based on this data, and all data submitted for comparisons will need to be transformed into the following data structure if not already structured as such. We are happy to provide an Excel version of this data dictionary for technical use.

Please timestamp all variables. Some Standard Set variables are collected at multiple timepoints, and we will ask you to submit these variables in a concatenated VARIABLEID_TIMESTAMP form for future analyses. For example, VARIABLEID_BASE (baseline); VARIABLEID_6MO (6 month follow-up); VARIABLEID_1YR (1 year follow-up), etc.

Case-Mix Variables

CASE-MIX VARIABLES

Variable ID: N/A
Variable: Patient ID

Definition: Indicate the patient's medical record number

Supporting Definition: This number will not be shared with ICHOM. In the case patient-level data is

submitted to ICHOM for benchmarking or research purposes, a separate ICHOM Patient Identifier will be created and cross-linking between the ICHOM Patient Identifier and the medical record number will only be known at the treating

institution

Inclusion Criteria: All patients

Timing: On all forms

Reporting Source: Administrative or clinical

Type: Numerical

Response Options: According to institution

Demographic Factors

Variable ID: AGE

Variable: Year of birth

Definition: In what year were you born?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Numerical

Response Options: YYYY

Variable ID: SEX

Variable: Patient sex

Definition: Please indicate your sex:

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Male

1 = Female

Baseline Clinical Factors

Variable ID: HEIGHT
Variable: Body height

Definition: How tall are you?

Supporting Definition: For calculating BMI

Inclusion Criteria: All patients
Timing: Baseline

Reporting Source: Patient-reported

Type: Numerical

Response Options: Numerical value of height in metric or imperial system

Variable ID: HEIGHTUNIT
Variable: Body height units
Definition: Height units

Supporting Definition: N/A

Inclusion Criteria: All patients
Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = centimeters

2 = inches

Variable ID: WEIGHT
Variable: Body weight

Definition: How much do you weigh? **Supporting Definition:** For calculating BMI

Inclusion Criteria: All patients
Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: Numerical value of weight in metric or imperial system

Variable ID: WEIGHTUNIT
Variable: Body weight units
Definition: Weight units

Supporting Definition: N/A

Inclusion Criteria: All patients
Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer **Response Options:** 1 = kilograms

2 = pounds

Variable ID: COMORB

Variable: Cormobidities

Definition: Have you been told by your doctor or care provider that you have any of the

following? Tick all that apply.

Supporting Definition: N/A

Inclusion Criteria: All patients
Timing: Baseline

rinning: baseline

Reporting Source: Patient-reported

Type: Multiple answers

Response Options: o = None

1 = Diabetes

2 = Irritable bowel syndrome

3 = Inflammatory bowel disease (Crohn's, Ulcerative Colitis)

4 = A problem with your memory

Variable ID: POP

Variable: Pelvic organ prolapse

Definition: Do you have a feeling of a lump or "something coming down" or the need to

manually replace a prolapse in order to empty your bladder?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = No

1 = Yes

Variable: OTHERINCONT
Variable: Other incontinence

Definition: Do you leak urine with physical activity, coughing, laughing, or sneezing or have

you been told by a doctor that you have stress incontinence?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline

Reporting Source: Patient-reported **Type:** Multiple answers

Response Options: o = No

1 = Yes

Variable ID: PROSTATE

Variable: Enlarged prostate

Definition: Have you been told by a doctor that you have a problem with your prostate? Tick

all that apply.

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = No

1 = Enlarged prostate or benign prostatic hyperplasia (BPH)

2 = Prostatitis

Variable ID: HRT

Variable: Hormone Replacement Therapy

Definition: Are you currently taking estrogens or hormone replacement therapy by mouth, a

patch or cream on the skin, or as a suppository?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = No

1 = Yes, by mouth

2 = Yes, by a patch, cream on the skin, or suppository

Variable ID: HXPELVICSURGF

Variable: History of pelvic surgery

Definition: Have you had surgery to your pelvis? Please indicate what kind.

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline

Reporting Source: Patient-reported **Type:** Single answer

Response Options: o = No

1 = Yes, surgery for stress urinary incontinence

2 = Yes, prolapse surgery

3 = Yes, surgery to the rectum or bowel

4 = Yes, hysterectomy 5 = Yes, other surgery Variable ID: HXPELVICSURGM
Variable: History of pelvic surgery

Definition: Have you had surgery to your pelvis? Please indicate what kind.

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = No

1 = Yes, surgery to the rectum or bowel

2 = Yes, prostate surgery

Variable ID: TIMEPELVICSURG

Variable: Timing of previous pelvic surgery **Definition:** When did you have this surgery?

Supporting Definition: N/A

Inclusion Criteria: To all patients with score >o on HXPELVICSURG

Timing: Baseline

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Less than 6 months ago

2 = More than 6 moths ago but less than 1 year ago

3 = In the last 5 years 4 = In the last 10 years 5 = More than 10 years ago

Treatment Variables

Explanatory Variable

Variable ID: TX

Variable: Current treatment

Definition: What are you currently using to treat your OAB symptoms? Tick all that apply.

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Multiple answers

Response Options: o = Nothing

1 = Behavioral modifications such as changing your fluid intake, bladder training, or

Kegel exercises

2 = Pelvic floor physical therapy

3 = Medication taken by mouth or from a patch or jelly on the skin

4 = Botox injections to the bladder

5 = Electrical stimulation

6 = Percutaneous tibial nerve stimulation (PTNS)

7 = Sacral nerve stimulation (SNS)

8 = Surgery

OAB Symptom Severity and Burden

Variable ID: ICIQ-OAB1

> Variable: Question 1 of the ICIQ-OAB

Definition: How often do you pass urine during the day?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = 1 to 6 times

2 = 7 to 8 times 3 = 9 to 10 times 4 = 11 to 12 times

Variable ID: ICIQ-OAB₂

Variable: Question 2 of the ICIQ-OAB Definition: How much does this bother you?

5 = 13 or more times

Supporting Definition: Please select a number between o (not at all) and 10 (a great deal).

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Single answer Type:

Response Options: o = Not at all

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5 6 = 6

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: ICIQ-OAB₃

> Variable: Question 3 of the ICIQ-OAB

Definition: During the night, how many times do you have to get up to urinate, on average?

Supporting Definition: N/A

> **Inclusion Criteria:** All patients

> > Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None

> 1 = One 2 = Two 3 = Three

4 = Four or more

Variable ID: ICIQ-OAB4

Variable: Question 4 of the ICIQ-OAB **Definition:** How much does this bother you?

Supporting Definition: Please select a number between 0 (not at all) and 10 (a great deal).

Inclusion Criteria: All patients

> Timing: Baseline and follow-up

Reporting Source: Patient-reported Type: Single answer

Response Options: o = Not at all

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: ICIQ-OAB5

Variable: Question 5 of the ICIQ-OAB

Definition: Do you have to rush to the toilet to urinate?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Never

1 = Occasionally2 = Sometimes3 = Most of the time4 = All of the time

Variable ID: ICIQ-OAB6

Variable: Question 6 of the ICIQ-OAB **Definition:** How much does this bother you?

Supporting Definition: Please select a number between o (not at all) and 10 (a great deal).

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not at all

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: ICIQ-OAB7

Variable: Question 7 of the ICIQ-OAB

Definition: Does urine leak before you can get to the toilet?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = never

1 = occasionally 2 = sometimes

3 = most of the time 4 = all of the time

Health-Related Quality of Life

Variable ID: ICIQ-OAB8

Variable: Question 8 of the ICIQ-OAB **Definition:** How much does this bother you?

Supporting Definition: Please select a number between o (not at all) and 10 (a great deal).

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not at all

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: OAB-q SF1

Variable: Question 1 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms caused you to

plan "escape routes" to restrooms in public places?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF2

Variable: Question 2 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms made you feel

like there is something wrong with you?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF3

Variable: Question 3 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms interfered

with your ability to get a good night's rest?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF4

Variable: Question 4 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms made you

frustrated or annoyed about the amount of time you spend in the restroom?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time 2 = Some of the time 3 = A good bit of the time 4 = Most of the time

5 = All of the time

Variable ID: OAB-q SF5

Variable: Question 5 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms made you

avoid activities away from restrooms (i.e., walks, running, hiking)?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up **Reporting Source:** Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

5 - 7 11 01 1110

Variable ID: OAB-q SF6

Variable: Question 6 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms awakened you

during sleep?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF7

Variable: Question 7 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms caused you to

decrease your physical activities (exercising, sports, etc.)

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF8

Variable: Question 8 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms caused you to

have problems with your partner or spouse?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up **Reporting Source:** Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF9

Variable: Question 9 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms made you

uncomfortable while traveling with others because of needing to stop for a

restroom?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF10

Variable: Question 10 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms affected your

relationships with family and friends?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time 2 = Some of the time 3 = A good bit of the time 4 = Most of the time 5 = All of the time

Variable ID: OAB-q SF11

Variable: Question 11 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms interfered

with getting the amount of sleep you needed?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up **Reporting Source:** Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time
5 = All of the time

Variable ID: OAB-q SF12

Variable: Question 12 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms caused you

embarrassment?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time 2 = Some of the time 3 = A good bit of the time 4 = Most of the time 5 = All of the time

Variable ID: OAB-q SF13

Variable: Question 13 of the OAB-q SF

Definition: During the past four weeks, how often have your bladder symptoms caused you to

locate the closest restroom as soon as you arrive at a place you have never been?

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Baseline and follow-up **Reporting Source:** Patient-reported

Type: Single answer

Response Options: o = None of the time

1 = A little of the time
2 = Some of the time
3 = A good bit of the time
4 = Most of the time

5 = All of the time

Sexual Function

Variable ID: ICIQ-FLUTSsex1

Variable: Question 1 of the ICIQ-FLUTSsex

Definition: Do you have pain or discomfort because of a dry vagina?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Not at all

2 = A little 3 = Somewhat 4 = A lot

Variable ID: ICIQ-FLUTSsex2

Variable: Question 2 of the ICIQ-FLUTSsex **Definition:** How much does this bother you?

Supporting Definition: Please select a number between o (not at all) and 10 (a great deal).

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not at all

10 = A great deal

Variable ID: ICIQ-FLUTSsex3

9 = 9

Variable: Question 3 of the ICIQ-FLUTSsex

Definition: To what extent do you feel that your sex life has been spoilt by your urinary

symptoms?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Not at all

2 = A little 3 = Somewhat 4 = A lot

Variable ID: ICIQ-FLUTSsex4

Variable: Question 4 of the ICIQ-FLUTSsex **Definition:** How much of a problem is this for you?

Supporting Definition: Please select a number between o (not a problem) and 10 (a serious problem).

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = o

1 = 1

2 = 2

3 = 3

4 = 4 5 = 56 = 67 = 78 = 89 = 9 10 = 10 11 = 11 Variable ID: ICIQ-FLUTSsex5 Variable: Question 5 of the ICIQ-FLUTSsex **Definition:** Do you have pain when you have sexual intercourse? Supporting Definition: N/A Inclusion Criteria: Female patients **Timing:** Baseline and follow-up Reporting Source: Patient-reported Type: Single answer Response Options: 1 = Not at all 2 = A little 3 = Somewhat 4 = A lot 5 = I don't have sexual intercourse ICIQ-FLUTSsex6 Variable ID: Variable: Question 6 of the ICIQ-FLUTSsex **Definition:** How much does this bother you? Supporting Definition: Please select a number between o (not at all) and 10 (a great deal). **Inclusion Criteria:** Female patients Timing: Baseline and follow-up Reporting Source: Patient-reported Type: Single answer **Response Options:** o = Not at all 1 = 1 2 = 2

> 3 = 34 = 4

5 = 5

6 = 6

•

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: ICIQ-FLUTSsex7

Variable: Question 7 of the ICIQ-FLUTSsex

Definition: Do you leak urine when you have sexual intercourse?

Supporting Definition: N/A

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Not at all

2 = A little 3 = Somewhat 4 = A lot

5 = I don't have sexual intercourse

Variable ID: ICIQ-FLUTSsex8

Variable: Question 8 of the ICIQ-FLUTSsex **Definition:** How much does this bother you?

Supporting Definition: Please select a number between o (not at all) and 10 (a great deal).

Inclusion Criteria: Female patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not at all

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A great deal

Variable ID: ICIQ-MLUTSsex1

Variable: Question 1 of the ICIQ-MLUTSsex

Definition: Do you get erections? (Tick one box)

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Yes, with normal rigidity

2 = Yes, with reduced rigidity

3 = Yes, with severely reduced rigidity

4 = No, erection not possible

Variable ID: ICIQ-MLUTSsex2

Variable: Question 2 of the ICIQ-MLUTSsex **Definition:** How much of a problem is this for you?

Supporting Definition: Please select a number between o (not a problem) and 10 (a serious problem).

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not a problem

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A serious problem

Variable ID: ICIQ-MLUTSsex3

Variable: Question 3 of the ICIQ-MLUTSsex **Definition:** Do you have an ejaculation of semen?

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Yes, with normal quantity

2 = Yes, with reduced quantity

3 = Yes, with severely reduced quantity

4 = No ejaculation

Variable ID: ICIQ-MLUTSsex4

Variable: Question 4 of the ICIQ-MLUTSsex **Definition:** How much of a problem is this for you?

Supporting Definition: Please select a number between o (not a problem) and 10 (a serious problem).

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not a problem

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A serious problem

Variable ID: ICIQ-MLUTSsex5

Variable: Question 5 of the ICIQ-MLUTSsex

Definition: Do you have pain or discomfort during ejaculation?

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Yes, slight pain/discomfort

2 = Yes, moderate pain/discomfort 3 = Yes, severe pain/discomfort

Variable ID: ICIQ-MLUTSsex6

Variable: Question 6 of the ICIQ-MLUTSsex **Definition:** How much of a problem is this for you?

Supporting Definition: Please select a number between o (not a problem) and 10 (a serious problem).

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not a problem

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A serious problem

Variable ID: ICIQ-MLUTSsex7

Variable: Question 7 of the ICIQ-MLUTSsex

Definition: To what extent do you feel that your sex life has been spoilt by your urinary

symptoms?

Supporting Definition: N/A

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Not at all

2 = A little 3 = Somewhat 4 = A lot

Variable ID: ICIQ-MLUTSsex8

Variable: Question 8 of the ICIQ-MLUTSsex **Definition:** How much of a problem is this for you?

Supporting Definition: Please select a number between o (not a problem) and 10 (a serious problem).

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: o = Not a problem

1 = 1

2 = 2

3 = 3

4 = 4

5 = 5

6 = 6

7 = 7

8 = 8

9 = 9

10 = A serious problem

Variable ID: ICIQ-MLUTSsex9

Variable: Question 9 of the ICIQ-MLUTSsex

Definition: If you have no sex life, how long ago did this stop?

Supporting Definition: Please indicate years and months

Inclusion Criteria: Male patients

Timing: Baseline and follow-up

Reporting Source: Patient-reported

Type: Free text

Response Options: N/A

Side Effects and Burden of Treatment

Variable ID: TBS

Variable: Treatment benefit scale

Definition: My condition (urinary problems, incontinence) has...

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Greatly improved

2 = Improved 3 = Not changed

4 = Worsened during treatment

Variable ID: Txtolerance

Variable: Treatment tolerance

Definition: The tolerability of my treatment for OAB is...

Supporting Definition: N/A

Inclusion Criteria: All patients

Timing: Follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Inadequate

2 = Moderate 3 = Good 4 = Excellent

Treatment Satisfaction

Variable ID: Sat

Variable: Satisfaction with treatment **Definition:** My overall satisfaction is...

Supporting Definition: N/A

Inclusion Criteria: All patients
Timing: Follow-up

Reporting Source: Patient-reported

Type: Single answer

Response Options: 1 = Extremely satisfied

2 = Very satisfied

ICHOM Contact Information

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DATA COLLECTION REFERENCE GUIDE

Reference Guide Revisions

Reference Guide Version	Location within Reference Guide	Content Change
1.1	Outcomes table and Outcome Measures summary	Added "(4-week recall)" to OAB-q SF
1.1	Data Dictionary	Added stem of questionnaire to each question
1.2.0	Treatment Options	Added "ligament surgery"
1.2.1	Treatment Options	Revised "ligament surgery" to "surgery"
1.2.2	Contact Information	Removed inactive email address: ichomteam@ichom.org

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