

## Work-related questions

1. Describe the job you had before your ICU admission
2. Which situation reflects your situation best: before my ICU admission I was/I had:
  - a. employed
  - b. self-employed
  - c. partially incapacitated
  - d. (early) retired
  - e. unemployed / looking for employment
  - f. fully incapacitated
  - g. social assistance
  - h. fulltime 'man around the house'/'woman around the house'
  - i. student
3. What were your main tasks in the job you had before your ICU admission?
  - a. mostly physically demanding tasks
  - b. mostly mentally demanding tasks
  - c. a mixture of physically and mentally demanding tasks
  - d. no physically or mentally demanding tasks
4. According to your contract, how many hours did you work before your ICU admission?
5. How many hours did you work before your ICU admission?
6. Describe your current job
7. Which situation reflects your current situation best: after my ICU admission I was/I had:
  - a. employed
  - b. self-employed

- c. partially incapacitated
- d. (early) retired
- e. unemployed / looking for employment
- f. fully incapacitated
- g. social assistance
- h. fulltime 'man around the house'/'woman around the house'
- i. student

8. What are your main tasks in your current job?

- a. mostly physically demanding tasks
- b. mostly mentally demanding tasks
- c. a mixture of physically and mentally demanding tasks
- d. no physically or mentally demanding tasks

9. According to your current contract, how many hours do you work?

10. How many hours do you work after your ICU admission?

11. Are you disturbed by your health status within your current job?

- a. no
- b. a bit
- c. strongly

12. Did your financial situation decline compared to the situation before your ICU admission?

**Common problems after an ICU admission**

Do you experience decreased vision compared to the situation before ICU admission? Yes No

Do you experience decreased hearing compared to the situation before ICU admission? Yes No

Do you experience decreased taste compared to the situation before ICU admission? Yes No

Do you experience decreased voice compared to the situation before ICU admission? Yes No

Do you have more problems with your balance compared to your situation before ICU admission? Yes No

Do you experience a change in defecation (consistency, frequency) compared to your situation before ICU admission? Yes No

Do you experience more problems urinating compared to the situation before ICU admission? Yes No

Do you experience decreased sexual functions compared to the situation before ICU admission? Yes No

Do you experience a change menstruation compared to the situation before ICU admission? Yes No

Do you experience more stiffness of your joints compared to the situation before ICU admission? Yes No

Do you experience more muscle weakness compared to the situation before ICU admission? Yes No

Do you experience more hair loss compared to the situation before ICU admission? Yes No

Do you experience more itching or exfoliation of your skin compared to the situation before ICU admission? Yes No

**Visits to healthcare professionals after ICU admission**

Did you visit a general practitioner within the last 3 months? Yes No

Did you visit a district nurse or did you receive professional home care within the last 3 months? Yes No

Did you visit a physical therapist within the last 3 months? Yes No

Did you visit an occupational therapist within the last 3 months? Yes No

Did you visit a speech therapist within the last 3 months? Yes No

Did you visit a dietician within the last 3 months? Yes No

Did you visit a social worker within the last 3 months? Yes No

Did you visit a psychologist within the last 3 months? Yes No

Did you visit a psychiatrist within the last 3 months? Yes No

Did you visit a rehabilitation specialist within the last 3 months? Yes No

Did you visit a pulmonologist within the last 3 months? Yes No

Did you visit a dermatologist within the last 3 months?                      Yes                      No

Did you visit a neurologist within the last 3 months?                      Yes                      No

Did you visit an orthopaedist within the last 3 months?                      Yes                      No

Did you visit another healthcare professional within the last 3  
months? If yes, which healthcare professional?