

## The Reintegration to Normal Living Index (RNLI)

Overview: Wood-Daughnee et al developed the Reintegration to Normal Living Index (RNLI) to evaluate the global function status of a patient during rehabilitation. The instrument can be used to evaluate the degree to which the patient has been able to return to a normal life. The authors are from McGill University and Montreal General Hospital.

Questions:

- (1) I move around my living quarters as I feel necessary.
- (2) I move around my community as I feel necessary.
- (3) I am able to take trips out of town as I feel are necessary.
- (4) I am comfortable with how my self-care needs (dressing feeding toileting bathing) are met.
- (5) I spend most of my days occupied in work activity that is necessary or important to me.
- (6) I am able to participate in recreational activities (hobbies crafts sports reading television games computers etc.) as I want to.
- (7) I participate in social activities with family friends and/or business acquaintances as is necessary or desirable to me.
- (8) I assume a role in my family which meets my needs and those of other family members.
- (9) In general I am comfortable with my personal relationships.
- (10) In general I am comfortable with myself when I am in the company of others.
- (11) I feel that I can deal with life events as they happen.

where:

- Wheelchairs or other adaptive aids may be used.

Scoring is based on distance along a 10 cm visual analogue scale (VAS).

Response	Score
no reintegration	0
complete reintegration	10

total score = SUM(points for all 11 items)

adjusted score = (total score) / 110 \* 100

Interpretation:

- minimum adjusted score: 0
- maximum adjusted score: 100

- The higher the score the better the patient's perceived reintegration.

References:

Wood-Dauphinee S Williams JI. Reintegration to normal living as a proxy to quality of life. *J Chron Dis.* 1987; 40: 491-499. (Figure 2 page 495).

Wood-Dauphinee SL Opzoomer A et al. Assessment of global function: The Reintegration to Normal Living Index. *Arch Phys Med Rehabil.* 1988; 69: 583-590.