Abstract
Background: The International Classification of Functioning, Disability and Health (ICF) should be widely used in research and clinical practice, but there are few studies that do so with the evaluation instruments used in physical therapy. Objective: To compare instruments that evaluate sleep, cognition and function in stroke patients according to the ICF. Methods: Twelve patients (6 women) with a mean age of 55.4 (±6.2) years and a recovery time from 7 to 36 months took part in the study. Patients were evaluated using the Pittsburgh Sleep Quality Index (PSQI), the Mini-Mental State Examination (MMSE) and Barthel Index (BI). A frequency comparison of ICF categories and those of the above-mentioned instruments was performed using Fisher’s exact test and chi-square. Agreement regarding the categories was recorded by two evaluators and assessed with the Kappa index. Results: Mean scores of 5.0 (±3.0), 22.5 (±3.4) and 74.6 (±17.2) were found for the PSQI, MMSE and BI, respectively. The changes identified in the other instruments were recorded in 46 ICF categories, with the most frequent component being “Body Functions”, followed by “Activities and Participation”. We found an inter-rater agreement of 0.87 for the PSQI substantial), 0.44 for the MMSE (moderate) and 0.39 for BI (fair). Conclusions: The results indicate that the instruments’ concordance differed greatly, which suggests a more thorough use of these instruments in physical therapy to optimize the formulation and standardization of diagnoses.

Keywords
Classification of functioning, disability and health; stroke, sleep, cognition, physical therapy.