



**Health Questionnaire**

**English version for the UK**

**Describing your health TODAY**

Under each heading, please tick the ONE box that best describes your health TODAY.

**Mobility** (*walking about*)

- I have no problems walking about
- I have some problems walking about
- I have a lot of problems walking about

**Looking after myself**

- I have no problems washing or dressing myself
- I have some problems washing or dressing myself
- I have a lot of problems washing or dressing myself

**Doing usual activities** (*for example, going to school, hobbies, sports, playing, doing things with family or friends*)

- I have no problems doing my usual activities
- I have some problems doing my usual activities
- I have a lot of problems doing my usual activities

**Having pain or discomfort**

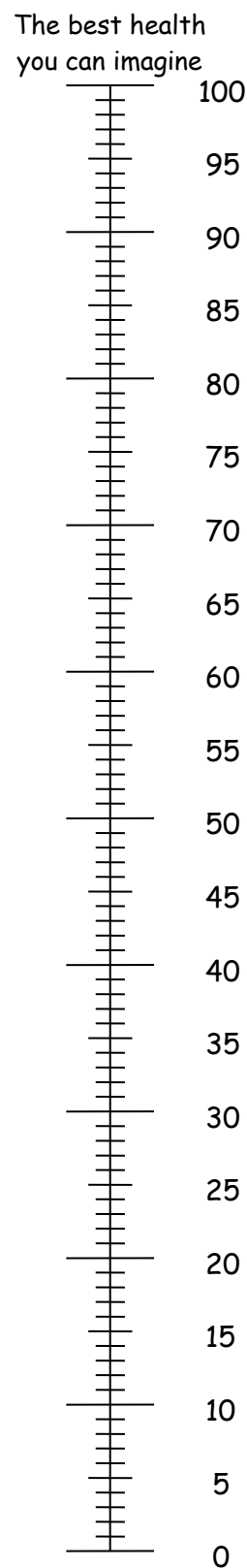
- I have no pain or discomfort
- I have some pain or discomfort
- I have a lot of pain or discomfort

**Feeling worried, sad or unhappy**

- I am not worried, sad or unhappy
- I am a bit worried, sad or unhappy
- I am very worried, sad or unhappy

**How good is your health TODAY**

- We would like to know how good or bad your health is TODAY.
- This line is numbered from 0 to 100.
- 100 means the best health you can imagine.  
0 means the worst health you can imagine.
- Please mark an X on the line that shows how good or bad your health is TODAY.



The worst health you can imagine