




Health Questionnaire

English version for the UK

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Please select the ONE box that best describes your health TODAY.

MOBILITY

I have no problems in walking about

I have slight problems in walking about

I have moderate problems in walking about

I have severe problems in walking about

I am unable to walk about

Please select the ONE box that best describes your health TODAY.

SELF-CARE

I have no problems washing or dressing myself

I have slight problems washing or dressing myself

I have moderate problems washing or dressing myself

I have severe problems washing or dressing myself

I am unable to wash or dress myself

Please select the ONE box that best describes your health TODAY.

USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)

I have no problems doing my usual activities

I have slight problems doing my usual activities

I have moderate problems doing my usual activities

I have severe problems doing my usual activities

I am unable to do my usual activities

Please select the ONE box that best describes your health TODAY.

PAIN / DISCOMFORT

I have no pain or discomfort

I have slight pain or discomfort

I have moderate pain or discomfort

I have severe pain or discomfort

I have extreme pain or discomfort

Please select the ONE box that best describes your health TODAY.

ANXIETY / DEPRESSION

I am not anxious or depressed

I am slightly anxious or depressed

I am moderately anxious or depressed

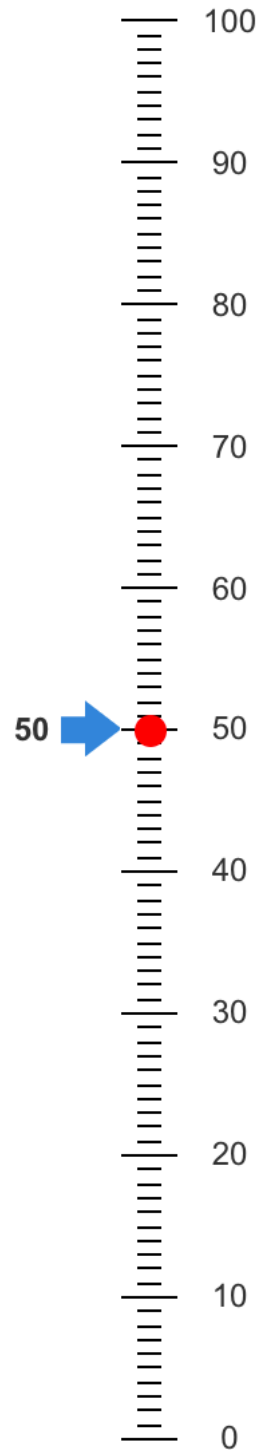
I am severely anxious or depressed

I am extremely anxious or depressed

- We would like to know how good or bad your health is TODAY.
- You will see a scale numbered from 0 to 100.
- 100 means the best health you can imagine.
0 means the worst health you can imagine.
- Please indicate on the scale how your health is TODAY.

YOUR
HEALTH
TODAY =
50

The best health
you can imagine



The worst health
you can imagine