



Health Questionnaire

English version for the UK

SAMPLE

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

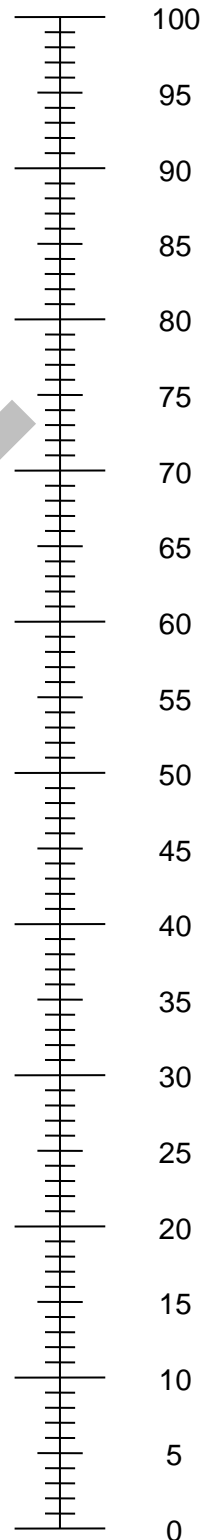
FEELING WORRIED, SAD OR UNHAPPY

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

- 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 your health is TODAY.
- Now, write the number you marked on the line in the box below.

YOUR HEALTH TODAY =

The best health
you can imagine



The worst health
you can imagine