



Health Questionnaire

English version for the UK

(Validated for Ireland)

Under each heading, please choose the ONE answer that best describes your health TODAY.

MOBILITY

- I have no problems in walking about ☐
- I have some problems in walking about ☐
- I am confined to bed ☐

SELF-CARE

- I have no problems with self-care ☐
- I have some problems washing or dressing myself ☐
- I am unable to wash or dress myself ☐

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

- I have no problems doing my usual activities ☐
- I have some problems doing my usual activities ☐
- I am unable to do my usual activities ☐

PAIN / DISCOMFORT

- I have no pain or discomfort ☐
- I have moderate pain or discomfort ☐
- I have extreme pain or discomfort ☐

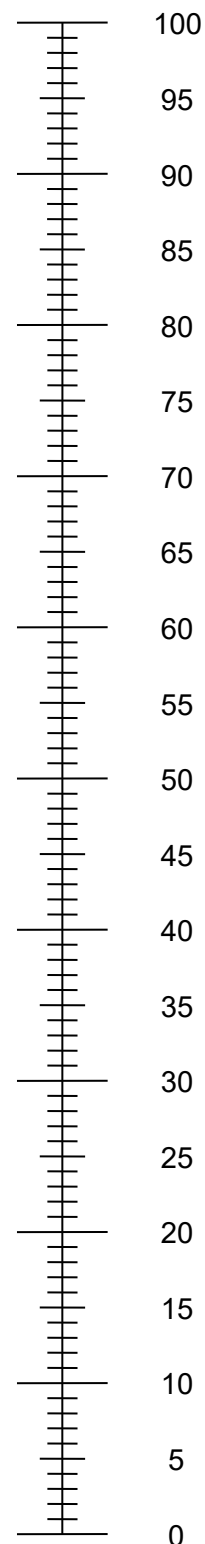
ANXIETY / DEPRESSION

- I am not anxious or depressed ☐
- I am moderately anxious or depressed ☐
- I am extremely anxious or depressed ☐

- 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 to show 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