

SF36 Physical and Emotional Health Survey

In general, would you say your health is: excellent very good good fair poor				1.		
<u>Compared to one year ago</u>, how would you rate your general health <u>now</u>?				2.		
much better somewhat better about the same somewhat worse much worse						
The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?			A Lot	A Little	Not At All	3.
Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports			1	2	3	3a.
Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf			1	2	3	3b.
Lifting or carrying groceries			1	2	3	3c.
Climbing several flights of stairs			1	2	3	3d.
Climbing one flight of stairs			1	2	3	3e.
Bending, kneeling, or stooping			1	2	3	3f.
Walking more than a mile			1	2	3	3g.
Walking several blocks			1	2	3	3h.
Walking one block			1	2	3	3i.
Bathing or dressing yourself			1	2	3	3j.
During the <u>past 4 weeks</u>, have you had any of the following problems with your work or other regular daily activities as a result of your <u>physical health</u>?				YES	NO	4.
Cut down on the amount of time you spent on work or other activities				1	2	4a.
Accomplished less than you would like				1	2	4b.
Were limited in the kind of work or other activities				1	2	4c.
Had difficulty performing work or other activities (for example, it took extra effort)				1	2	4d.
During the <u>past 4 weeks</u>, have you had any of the following problems with your work or other regular daily activities as a result of any <u>emotional problems</u> (such as depression or anxiety)?						5.
Cut down on the amount of time you spent on work or other activities				1	2	5a.
Accomplished less than you would like				1	2	5b.
Didn't do work or other activities as carefully as usual				1	2	5c.

During the <u>past 4 weeks</u>, to what extent has your <u>physical health</u> or <u>emotional problems</u> interfered with your normal social activities with family, friends, neighbors or groups?							6.
not at all slightly moderately quite a bit extremely							
How much <u>physical</u> pain have you had <u>during the past 4 weeks</u>?							7.
none very mild mild moderate severe very severe							
<u>During the past 4 weeks</u>, how much did pain interfere with your normal work (including both work outside the home and inside the home)?							8.
not at all a little bit moderately quite a bit extremely							
These questions are about how you feel and how things have been with you <u>during the past 4 weeks</u>. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time <u>during the past 4 weeks</u>:	All of the Time	Most of the Time	A Good Bit of the Time	Some of the Time	A Little of the Time	None of the Time	9.
Did you feel full of life?	1	2	3	4	5	6	9a.
Have you been a very nervous person?	1	2	3	4	5	6	9b.
Have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5	6	9c.
Have you felt calm and peaceful?	1	2	3	4	5	6	9d.
Did you have a lot of energy?	1	2	3	4	5	6	9e.
Have you felt downhearted and blue?	1	2	3	4	5	6	9f.
Did you feel worn out?	1	2	3	4	5	6	9g.
Have you been a happy person?	1	2	3	4	5	6	9h.
Did you feel tired?	1	2	3	4	5	6	9i.
<u>During the past 4 weeks</u>, how much of the time has your <u>physical health</u> or <u>emotional problems</u> interfered with your social activities (like visiting friends, relatives, etc)?							10.
all of the time most of the time some of the time a little of the time none of the time							
How TRUE or FALSE is <u>each</u> of the following statements for you?	Definitely True	Mostly True	Don't Know	Mostly False	Definitely False		11.
I seem to get sick a little easier than other people	1	2	3	4	5		11a.
I am as healthy as anybody I know	1	2	3	4	5		11b.
I expect my health to get worse	1	2	3	4	5		11c.
My health is excellent	1	2	3	4	5		11d.

Signature: _____ Date: _____