

Health Survey

Please complete the survey below. Thank you!

1. In general, would you say your health is:
- 1 Excellent
 - 2 Very good
 - 3 Good
 - 4 Fair
 - 5 Poor
2. Compared to one year ago, how would you rate your health in general now?
- 1 Much better now than one year ago
 - 2 Somewhat better now than one year ago
 - 3 About the same
 - 4 Somewhat worse now than one year ago
 - 5 Much worse now than one year ago

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? (Choose one answer for each question.)

3. Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
4. Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
5. Lifting or carrying groceries
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
6. Climbing several flights of stairs
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
7. Climbing one flight of stairs
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
8. Bending, kneeling, or stooping
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
9. Walking more than a mile
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
10. Walking several blocks
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
11. Walking one block
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all
12. Bathing or dressing yourself
- 1 Yes, limited a lot
 - 2 Yes, limited a little
 - 3 No, not limited at all

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? (Choose one answer for each question.)

13. Cut down the amount of time you spent on work or other activities 1 Yes
 2 No
14. Accomplished less than you would like 1 Yes
 2 No
15. Were limited in the kind of work or other activities 1 Yes
 2 No
16. Had difficulty performing the work or other activities (for example, it took extra effort) 1 Yes
 2 No

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? (Choose one answer for each question.)

17. Cut down the amount of time you spent on work or other activities 1 Yes
 2 No
18. Accomplished less than you would like 1 Yes
 2 No
19. Didn't do work or other activities as carefully as usual 1 Yes
 2 No
20. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? (Choose one answer.) 1 Not at all
 2 Slightly
 3 Moderately
 4 Quite a bit
 5 Extremely
21. How much bodily pain have you had during the past 4 weeks? (Choose one answer.) 1 None
 2 Very mild
 3 Mild
 4 Moderate
 5 Severe
 6 Very severe
22. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)? (Choose one answer.) 1 Not at all
 2 A little bit
 3 Moderately
 4 Quite a bit
 5 Extremely

These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks . . . (Choose one answer for each question.)

23. Did you feel full of pep? 1 All of the time
 2 Most of the time
 3 A good bit of the time
 4 Some of the time
 5 A little of the time
 6 None of the time

24. Have you been a very nervous person?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
25. Have you felt so down in the dumps that nothing could cheer you up?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
26. Have you felt calm and peaceful?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
27. Did you have a lot of energy?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
28. Have you felt downhearted and blue?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
29. Did you feel worn out?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
30. Have you been a happy person?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
31. Did you feel tired?
- 1 All of the time
 - 2 Most of the time
 - 3 A good bit of the time
 - 4 Some of the time
 - 5 A little of the time
 - 6 None of the time
32. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?brbr(Choose one number)
- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 A little of the time
 - 5 None of the time

How TRUE or FALSE is each of the following statements for you. (Choose one number for each question.)

33. I seem to get sick a little easier than other people

- 1 Definitely true
- 2 Mostly true
- 3 Don't know
- 4 Mostly false
- 5 Definitely false

34. I am as healthy as anybody I know

- 1 Definitely true
- 2 Mostly true
- 3 Don't know
- 4 Mostly false
- 5 Definitely false

35. I expect my health to get worse

- 1 Definitely true
- 2 Mostly true
- 3 Don't know
- 4 Mostly false
- 5 Definitely false

36. My health is excellent

- 1 Definitely true
- 2 Mostly true
- 3 Don't know
- 4 Mostly false
- 5 Definitely false