

Section A: Your Health

The next questions ask about your views about your health. This information will help you keep track of how you feel, and how well you are able to do your usual activities.

1. In general, would you say your health is:

- ☐ Excellent
☐ Very good
☐ Good
☐ Fair
☐ Poor

QA_SF12_1

FMT_EVCGCFP

2. The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

Yes, limited a lot	Yes, limited a little	No, not limited at all
t	t	t

2a. Moderate activities, such as moving a table, pushing..... ☐ ☐ ☐
 a vacuum cleaner, bowling, or playing golf QA_SF12_2A FMT_LIMITED_3CAT

2b. Climbing several flights of stairs ☐ ☐ ☐
 a vacuum cleaner, bowling, or playing golf QA_SF12_2B FMT_LIMITED_3CAT

3. During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

All of the time	Most of the time	Some of the time	A little of the time	None of the time
t	t	t	t	t

3a. Accomplished less than you ☐ ☐ ☐ ☐
 would like QA_SF12_3A FMT_ALLNONE_5CAT

3b. Were limited in the kind of ☐ ☐ ☐ ☐
 work or other activities QA_SF12_3B FMT_ALLNONE_5CAT

4. During the past 4 weeks, how much of the time 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)?

	All of the time t	Most of the time t	Some of the time t	A little of the time t	None of the time t
4a. <u>Accomplished less</u> than you would like	<input type="radio"/> QA_SF12_4A	<input type="radio"/>	<input type="radio"/> FMT_ALLTONONE_SCAT	<input type="radio"/>	<input type="radio"/>
4b. Did work or activities <u>less</u> <u>carefully than usual</u>	<input type="radio"/> QA_SF12_4B	<input type="radio"/>	<input type="radio"/> FMT_ALLTONONE_SCAT	<input type="radio"/>	<input type="radio"/>

5. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

<input type="radio"/> Not at all	QA_SF12_5	FMT_SATIS_SCAT
<input type="radio"/> a little bit		
<input type="radio"/> Moderately		
<input type="radio"/> Quite a bit		
<input type="radio"/> Extremely		

6. 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...

	All of the time t	Most of the time t	Some of the time t	a little of the time t	None of the time t
6a. Have you felt calm and peaceful	<input type="radio"/> QA_SF12_6A	<input type="radio"/>	<input type="radio"/> FMT_ALLTONONE_SCAT	<input type="radio"/>	<input type="radio"/>
6b. Did you have a lot of energy	<input type="radio"/> QA_SF12_6B	<input type="radio"/>	<input type="radio"/> FMT_ALLTONONE_SCAT	<input type="radio"/>	<input type="radio"/>
6c. Have you felt downhearted and	<input type="radio"/> QA_SF12_6C	<input type="radio"/>	<input type="radio"/> FMT_ALLTONONE_SCAT	<input type="radio"/>	<input type="radio"/>
depressed					

7. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

<input type="radio"/> All of the time		
<input type="radio"/> Most of the time	QA_SF12_7	FMT_ALLTONONE_SCAT
<input type="radio"/> Some of the time		
<input type="radio"/> A little of the time		
<input type="radio"/> None of the time		