

Initial number

ICIQ-LUTSqol 08/04

CONFIDENTIAL

DAY

MONTH

YEAR

Today's date

Quality of life

Below are some daily activities that can be affected by urinary problems. How much does your urinary problem affect you? We would like you to answer every question. Simply tick the box that applies to you.

We would be grateful if you could answer the following questions, thinking about how you have been, on average, over the PAST FOUR WEEKS.

1. Please write in your date of birth:

DAY

MONTH

YEAR

2. Are you (tick one):

Female

Male

3a. To what extent does your urinary problem affect your household tasks (e.g. cleaning, shopping, etc.)

not at all 1

slightly 2

moderately 3

a lot 4

3b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

4a. Does your urinary problem affect your job, or your normal daily activities outside the home?

not at all 1

slightly 2

moderately 3

a lot 4

4b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

5a. Does your urinary problem affect your physical activities (e.g. going for a walk, run, sport, gym, etc.)?

not at all 1
 slightly 2
 moderately 3
 a lot 4

5b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 **10**
 not at all a great deal

6a. Does your urinary problem affect your ability to travel?

not at all 1
 slightly 2
 moderately 3
 a lot 4

6b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 **10**
 not at all a great deal

7a. Does your urinary problem limit your social life?

not at all 1
 slightly 2
 moderately 3
 a lot 4

7b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 **10**
 not at all a great deal

8a. Does your urinary problem limit your ability to see/visit friends?

not at all 1
 slightly 2
 moderately 3
 a lot 4

8b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 **10**
 not at all a great deal

9a. Does your urinary problem affect your relationship with your partner?

- not applicable 8
- not at all 1
- slightly 2
- moderately 3
- a lot 4

9b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

10a. Does your urinary problem affect your sex life?

- not applicable 8
- not at all 1
- slightly 2
- moderately 3
- a lot 4

10b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

11a. Does your urinary problem affect your family life?

- not applicable 8
- not at all 1
- slightly 2
- moderately 3
- a lot 4

11b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

12a. Does your urinary problem make you feel depressed?

- not at all 1
- slightly 2
- moderately 3
- very much 4

12b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

13a. Does your urinary problem make you feel anxious or nervous?

- not at all 1
- slightly 2
- moderately 3
- very much 4

13b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

14a. Does your urinary problem make you feel bad about yourself?

- not at all 1
- slightly 2
- moderately 3
- very much 4

14b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

15a. Does your urinary problem affect your sleep?

- never 1
- sometimes 2
- often 3
- all the time 4

15b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

16a. Do you feel worn out/tired?

- never 1
- sometimes 2
- often 3
- all the time 4

16b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
not at all a great deal

Do you do any of the following? If so, how much?

17a. Wear pads to keep dry?

never 1
 sometimes 2
 often 3
 all the time 4

17b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

18a. Be careful how much fluid you drink?

never 1
 sometimes 2
 often 3
 all the time 4

18b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

19a. Change your underclothes when they get wet?

never 1
 sometimes 2
 often 3
 all the time 4

19b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

20a. Worry in case you smell?

never 1
 sometimes 2
 often 3
 all the time 4

20b. How much does this bother you?
Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

21a. Get embarrassed because of your urinary problem?

- never 1
 sometimes 2
 often 3
 all the time 4

21b. How much does this bother you?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

22. Overall, how much do urinary symptoms interfere with your everyday life?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 not at all a great deal

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Thank you very much for answering these questions.

SAMPLE