

IDTYPE ID

ID Number _____

Framingham Study Health Questionnaire SF 36 Exam 6

INSTRUCTIONS:

This survey asks you for your views about your health. Answer every question by circling the appropriate number, 1, 2, 3, ...If you are unsure about how to answer a question, please give the best answer you can and make a comment in the left margin.

1. In general, would you say your health is: (circle one number)

SF1

Excellent	1
Very Good	2
Good	3
Fair	4
Poor	5

2. Compared to one year ago, how would you rate your health in general now? (circle one number)

SF2

Much better now	1
Somewhat better now	2
About the same	3
Somewhat worse now	4
Much worse now	5

3. 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? (Circle 1, 2, or 3 on each line)

	Yes, Limited A Lot	Yes, Limited A Little	No, Not Limited At All
SF3 a. Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports	1	2	3
SF4 b. Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf	1	2	3
SF5 c. Lifting or carrying groceries	1	2	3
SF6 d. Climbing several flights of stairs	1	2	3
SF7 e. Climbing one flight of stairs	1	2	3
SF8 f. Bending, kneeling, or stooping	1	2	3
SF9 g. Walking more than a mile	1	2	3
SF10 h. Walking several blocks	1	2	3
SF11 i. Walking one block	1	2	3
SF12 j. Bathing and dressing yourself	1	2	3

4. 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?

(Please answer YES or NO for each question by circling 1 or 2 on each line)

SF13

a. Cut down on the amount of time you spent on work or other activities

YES

NO

1

2

SF14

b. Accomplished less than you would like

1

2

SF15

c. Were limited in the kind of work or other activities

1

2

SF16

d. Had difficulty performing the work or other activities
(For example, it took extra effort)

1

2

5. 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)?

(Please answer YES or NO for each question by circling 1 or 2 on each line)

SF17

a. Cut down on the amount of time you spent on work or other activities

YES

NO

1

2

SF18

b. Accomplished less than you would like

1

2

SF19

c. Didn't do work or other activities as carefully as usual

1

2

6. 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?

(circle one number)

SF20

Not at all 1

Slightly 2

Moderately 3

Quite a bit 4

Extremely 5

7. How much bodily pain have you had during the past 4 weeks?

(circle one number)

SF21

None 1

Very mild 2

Mild 3

Moderate 4

Severe 5

Very severe 6

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

(circle one number)

SF22

- Not at all 1
- Slightly 2
- Moderately 3
- Quite a bit 4
- Extremely 5

9. These questions are about how you feel and how things have been with you during the past month. For each question, please indicate the one answer that comes closest to the way you have been feeling.

How much of the time during the past month...

	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
SF23 a. Did you feel full of pep?	1	2	3	4	5	6
SF24 b. Have you been a very nervous person?	1	2	3	4	5	6
SF25 c. Have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5	6
SF26 d. Have you felt calm and peaceful?	1	2	3	4	5	6
SF27 e. Did you have a lot of energy?	1	2	3	4	5	6
SF28 f. Have you felt downhearted and blue?	1	2	3	4	5	6
SF29 g. Did you feel worn out?	1	2	3	4	5	6
SF30 h. Have you been a happy person?	1	2	3	4	5	6
SF31 i. Did you feel tired?	1	2	3	4	5	6
SF32 j. Has your <u>health limited your social activities</u> (like visiting with friends or close relatives)?	1	2	3	4	5	6

10. Please choose the answer that best describes how true or false each of the following statements is for you

(circle one number on each line)

	Definitely true	Mostly True	Not Sure	Mostly False	Definitely False
SF33 a. I seem to get sick a little easier than other people	1	2	3	4	5
SF34 b. I am as healthy as anybody I know	1	2	3	4	5
SF35 c. I expect my health to get worse	1	2	3	4	5
SF36 d. My health is excellent	1	2	3	4	5