The SF-36v2 Health Survey
Instructions for Completing the Questionnaire

Please answer every question. Some questions may look like others, but each one is different. Please take the time to read and answer each question carefully by filling in the bubble that best represents your response.

## EXAMPLE

This is for your review. Do not answer this question. The questionnaire begins with the section Your Health in General below.

For each question you will be asked to fill in a bubble in each line:

1. How strongly do you agree or disagree with each of the following statements?

|  | Strongly <br> agree | Agree | Uncertain | Disagree | Strongly <br> disagree |
| :--- | :---: | :---: | :---: | :---: | :---: |
| a) I enjoy listening to music | 0 | 0 | 0 | 0 | 0 |
| B) I enjoy reading magazines | 0 | 0 | 0 | 0 | 0 |

Please begin answering the questions now, there are eleven questions

## Your Health in General

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

| Excellent | Very good | Good | Fair | Poor |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | 0 | 0 | 0 | 0 | 0 |

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

| Much better <br> now than one <br> year ago | Somewhat <br> better now <br> than one year <br> ago | About the <br> same as one <br> year ago | Somewhat <br> worse now <br> than one year | Much worse <br> now than one <br> year ago |
| :--- | :--- | :--- | :--- | :--- |
| 0 | 0 | 0 | ago |  |

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?
a) Vigorous activities, such as running, lifting heavy

| Yes, limited |  |  |
| :---: | :---: | :---: |
| a lot | Yes, <br> limited a <br> little | No, not <br> limited <br> at all |
| 0 | 0 | 0 | objects, participating in strenuous sports

b) Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
c) Lifting or carrying groceries

0
0
0
d) Climbing several flights of stairs
e) Climbing one flight of stairs
f) Bending, kneeling, or stooping
0
0
0
g) Walking more than a kilometre
h) Walking several hundred metres
i) Walking one hundred metres
j) Bathing or dressing yourself
0

0
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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 your physical health?

| All of | Most of <br> the | Some <br> the | A little the <br> of the | None <br> of the |
| :---: | :---: | :---: | :---: | :---: |
| time | time | time | time | time |

a) Cut down on the amount of time you spent on work or other activities
b) Accomplished less than you would like
c) Were limited in the kind of work or other activities
d) Had difficulty performing the work or other activities (for example it took extra effort)
5. 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 | Most of <br> the <br> the | Some <br> of the | A little <br> of the | None <br> of the |
| :---: | :---: | :---: | :---: | :---: |
| time | time | time | time | time |

a) Cut down on the amount of time you spent on work or other activities
b) Accomplished less than you would like0
0
$0 \quad 0 \quad 0 \quad 0$
c) Did work or other activities less carefully than usual
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, neighbours, or groups?

| Not at all | Slightly | Moderately | Quite a bit | Extremely |
| :---: | :---: | :---: | :---: | :---: |
| 0 | $O$ | $O$ | 0 | 0 |

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

| None | Very Mild | Mild | Moderate | Severe | Very <br> Severe |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 0 | 0 | 0 | 0 | 0 | 0 |

8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?
Not at all
0
Slightly
0
Moderately
0
Quite a bit
0
Extremely
0
9. 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 <br> time | Most of <br> the time | Some of <br> the time | A little of <br> the time | None of <br> the time |
| :--- | :---: | :---: | :---: | :---: | :---: |
| a) Did you feel full of life? 0 0 0 0 |  |  |  |  |  |
| b) Have you been very <br> nervous? <br> c) Have you felt so down in the | 0 | 0 | 0 | 0 | 0 |

10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with you social activities (like visiting friends, relatives, etc.)?
$\begin{array}{ccccc}\text { All of the } & \begin{array}{c}\text { Most of the } \\ \text { time }\end{array} & \begin{array}{c}\text { Some of the } \\ \text { time }\end{array} & \begin{array}{c}\text { A little of the } \\ \text { time }\end{array} & \begin{array}{c}\text { None of the } \\ \text { time }\end{array} \\ 0 & 0 & 0 & 0 & 0\end{array}$
11. How TRUE or FALSE is each of the following statements for you?

|  | Definitely <br> true | Mostly <br> true | Don't <br> know | Mostly <br> false | Definitely <br> false |
| :--- | :---: | :---: | :---: | ---: | ---: |
| a) I seem to get sick a <br> little easier than other <br> people | 0 | 0 | 0 | 0 | 0 |
| b) I am as healthy as <br> anybody I know | 0 | 0 | 0 | 0 | 0 |
| c) I expect my health to <br> get worse | 0 | 0 | 0 | 0 | 0 |
| d) My health is excellent | 0 | 0 | 0 | 0 | 0 |

