Form Approved OMB No. 0920-xxxx ate xx/xx/xxxx

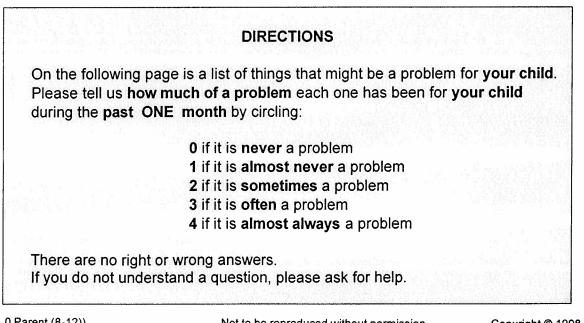


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Number	Site	Sub-site		Sequential ID	



Version 4.0

PARENT REPORT for CHILDREN (ages 8-12)



PedsQL 4.0 Parent (8-12)) Varni, Ph.D. (05/01/02, Version 1, 12:32 PM) Not to be reproduced without permission

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PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Walking more than one block	0	1	2	3	4
2. Running	0	1	2	3	4
3. Participating in sports activity or exercise	0	1	2	3	4
4. Lifting something heavy	0	1	2	3	4
5. Taking a bath or shower by him or herself	0	1	2	3	4
6. Doing chores around the house	0	1	2	3	4
7. Having hurts or aches	0	1	2	3	4
8. Low energy level	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Feeling afraid or scared	0	1	2	3	4
2. Feeling sad or blue	0	1	2	3	4
3. Feeling angry	0	1	2	3	4
4. Trouble sleeping	0	1	2	3	4
5. Worrying about what will happen to him or her	0	1	2	3	4

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Getting along with other children	0	1	2	3	4
2. Other kids not wanting to be his or her friend	0	1	2	3	4
3. Getting teased by other children	0	1	2	3	4
 Not able to do things that other children his or her age can do 	0	1	2	3	4
5. Keeping up when playing with other children	0	1	2	3	4

SCHOOL FUNCTIONING (problems with)		Almost Never	Some- times	Often	Almost Always
1. Paying attention in class	0	1	2	3	4
2. Forgetting things	0	1	2	3	4
3. Keeping up with schoolwork	0	1	2	3	4
4. Missing school because of not feeling well	0	1	2	3	4
5. Missing school to go to the doctor or hospital	0	1	2	3	4

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Date Completed	Month	Day	Year	Completed by			
Date Reviewed	Month	Day	Year	Reviewer Code			
Date Entered	Month	Day	Year	Data Entry Code			