Attachment 9

Pain Assessment - Ages 13-17

Name of test: Pain Assessment Ages 13-17 Time burden estimate: 3 minutes

On the next screens, we will ask you questions about pain. Answer as well as you can and after you make your choice, the computer will automatically go on to the next question. If you want to change your answer, click on the Go BACK button to return to the earlier question, then choose a different answer.

Click on the CONTINUE button when you are ready to begin.

ID	Context/Stem	Responses
PSSR13-17-01	How would you rate your pain right now?	0 No pain
		1
		2
		3
		4
		5
		6
		7
		8
		9
		10 Worst imaginable pain
PSSR13-17-02	In the past 7 days, how would you rate	0 No pain
	your pain on average?	1
		2
		3
		4
		5
		6
		7
		8
		9
		10 Worst imaginable pain
PSSR13-17-03	In the past 7 days, how intense was your	Had no pain
	lowest level of pain?	Mild
		Moderate
		Severe
		Very severe

Public reporting burden for this collection of information is estimated to average 2 1/2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxx*) EXP: (xx/xxxx). Do not return the completed form to this address.

OMB: 0925-XXXX Expiration Date: XX/XX/XXXX

ID	Context/Stem	Responses
PSSR13-17-04	In the past 7 days, how intense was your	Had no pain
	pain at its worst?	Mild
		Moderate
		Severe
		Very severe
PSSR13-17-05	In the past 7 days, how often did your pain	Had no pain
	feel intolerable?	Never
		Rarely
		Sometimes
		Often
		Always
PSSR13-17-06	In the past 7 days, I felt angry when I had	Never
	pain.	Almost Never
	P	Sometimes
		Often
		Almost Always
PSSR13-17-07	In the past 7 days, I had trouble doing	Never
1 351(15 17 07	schoolwork when I had pain.	Almost Never
	schoolwork when i had pain.	Sometimes
		Often
PSSR13-17-08	In the past 7 days, I had trouble cleaning	Almost Always Never
	In the past 7 days, I had trouble sleeping	
	when I had pain.	Almost Never
		Sometimes
		Often
		Almost Always
PSSR13-17-09	In the past 7 days, it was hard for me to	Never
	pay attention when I had pain.	Almost Never
		Sometimes
		Often
D00D40 47 40		Almost Always
PSSR13-17-10	In the past 7 days, it was hard for me to run when I had pain.	Never
		Almost Never
		Sometimes
		Often
		Almost Always
PSSR13-17-11	In the past 7 days, it was hard for me to	Never
	walk one block when I had pain.	Almost Never
		Sometimes
		Often
		Almost Always
PSSR13-17-12	In the past 7 days, it was hard to have fun	Never
	when I had pain.	Almost Never
		Sometimes
		Often
		Almost Always

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ID	Context/Stem	Responses
PSSR13-17-13	In the past 7 days, it was hard to stay	Never
	standing when I had pain.	Almost Never
		Sometimes
		Often
		Almost Always
PSSR13-17-14	In the past 7 days, how much did pain	Not at all
	interfere with your day to day activities?	A little bit
		Somewhat
		Quite a bit
		Very much
PSSR13-17-15	In the past 7 days, how much did pain	Not at all
	interfere with work around the home?	A little bit
		Somewhat
		Quite a bit
		Very much
PSSR13-17-16	In the past 7 days, how much did pain	Not at all
	interfere with your ability to participate in	A little bit
	social activities?	Somewhat
		Quite a bit
		Very much
PSSR13-17-17	In the past 7 days, how much did pain	Not at all
	interfere with your household chores?	A little bit
		Somewhat
		Quite a bit
		Very much
PSSR13-17-18	In the past 7 days, how much did pain	Not at all
	interfere with the things you usually do for	A little bit
	fun?	Somewhat
		Quite a bit
		Very much
PSSR13-17-19	In the past 7 days, how much did pain	Not at all
-	interfere with your enjoyment of social	A little bit
	activities?	Somewhat
		Quite a bit
		Very much