

PEI	
	Number
DOMAIN	Peds QL
Physical Functioning	8
It is hard for [me/my child] to walking/walk more than one block	1
It is hard for [me/my child] to run	1
It is hard for [me/my child] to do sports activity, play or exercise	1
It is hard for [me/my child] to lift something heavy	1
It is hard for [me/my child] to take a bath of shower by myself	1
It is hard for [me/my child] to do chores around the house/help pick up toys	1
[I/my child] hurt or ache	1
[I/my child] have low energy	1
Emotional Functioning	5
[I/my child] feel afraid or scared	1
[I/my child] feel sad or blue	1
[I/my child] feel angry	1
[I/my child] have trouble sleeping	1
[I/my child] worry about what will happen to [me/him/her]	1
Social Functioning	5
I have trouble getting along with other [peers]/[adults]	1
Other [peers]/[adults] do not want to be [my/my child's] friend	1
Other [peers]/[adults] tease me	1
I cannot do things that others my age can do	1
It is hard to keep up with my peers	1
School Functioning	5
It is hard to pay attention at work or school	1
[I/my child] forget things	1
[I/my child] have trouble keeping up with my work or studies	1
[I/my child] miss work or school because of not feeling well	1
[I/my child] miss work or school to go to the doctor or hospital	1
My child has trouble doing the same school activities as peers	0

ALL Peds QL 4.0 instruments at a glance

Teen by Parent	Child	Child by Parent	Young Child	Young Child by Parent	Toddler by Parent
5	5	5	5	5	5
1	1	1	1	1	1
1	1	1	1	1	1
1	1	1	1	1	1
1	1	1	1	1	1
0	0	0	0	0	0
1	1	1	1	1	1
0	0	0	0	0	0
0	0	0	0	0	0
4	4	4	4	4	4
1	1	1	1	1	1
1	1	1	1	1	1
1	1	1	1	1	1
0	0	0	0	0	0
1	1	1	1	1	1
3	3	3	3	3	3
1	1	1	1	1	1
1	1	1	1	1	1
1	1	1	1	1	1
0	0	0	0	0	0
0	0	0	0	0	0
3	3	3	3	3	3
1	1	1	1	1	0
1	1	1	1	1	0
1	1	1	1	1	0
0	0	0	0	0	1
0	0	0	0	0	1
0	0	0	0	0	1

DOMAIN**Overall Health**

In general, would you say your health is

Compared to one year ago, how would you rate your health in general

Overall, how would you rate your health during the past 4 weeks?

How TRUE or FALSE is each of the following statements for you?

I seem to get sick a little easier than other people

I am as healthy as anybody I know

I expect my health to get worse

My health is excellent

Physical

During the past 4 weeks, how much did your physical health problems limit your usual physical activities (such as walking or climbing stairs)?

During the past 4 weeks, how much difficulty did you have doing your daily work, both at home and away from home, because of your physical health?

The following questions are about activities you might do during a typical day. Does your health now limit you in these how much?

Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports

Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf

Lifting or carrying groceries

Climbing several flights of stairs

Climbing one flight of stairs

Bending, kneeling or stooping

Walking more than a mile

Walking several hundred yards

Walking one hundred yards

Bathing or dressing yourself

During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular activities as a result of your physical health?

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

Accomplished less than you would like

Were limited in the kind of work or other activities

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

Emotional

During the past 4 weeks, how much have you been bothered by emotional problems (such as feeling anxious, depressed or irritable)?

During the past 4 weeks, how much did personal or emotional problems keep you from doing your usual work, school or other daily activities?

During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular activities as a result of any emotional problems (such as feeling depressed or anxious)?

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

Accomplished less than you would like

Did work or other activities less carefully than usual

These questions are about how you feel and how things have been with you during the past 4 weeks. For each question answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...

Did you feel full of life?

Have you been very nervous?

Have you felt so down in the dumps that nothing could cheer you up?

Have you felt calm and peaceful?

Did you have a lot of energy?

Have you felt downhearted and depressed?

Did you feel worn out?

Have you been happy?

Did you feel tired?

During the past 4 weeks, how much energy did you have?

Social

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?

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

Pain

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

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

Number of Indicators	
SF36	SF8
6	1
1	0
1	0
0	1

1	0
1	0
1	0
1	0
14	2

0	1
0	1

activities? If so,

1	0
1	0
1	0
1	0
1	0
1	0
1	0
1	0
1	0
1	0

ular daily activities

1	0
1	0
1	0
1	0
12	3

0	1
0	1

ular daily activities

1	0
1	0
1	0

on, please give the

1	0
1	0
1	0
1	0
1	0
1	0
1	0
1	0
1	0
0	1
2	1
1	1
1	0
2	1
1	1
1	0