

15

Multi-Site Clinical Assessment of CFS in Children and Adolescents

Pediatric Pain Questionnaire (PPQ)

Subject ID Number: _____

Date: _____ / _____ / _____
Month Day Year

Pediatric Pain Questionnaire

Understanding your pain



This questionnaire is to help us learn about your pain. We want to understand your past pain so we can diagnose and treat you.

This questionnaire and any information given in interviews will remain private. If you do not wish to answer a question, write, "do not wish to answer" in the space provided.

Please print or write clearly.

Today's date: _____

Your name: _____ Age: _____

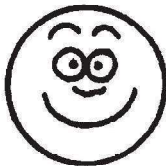
What words would you use to describe your pain or hurt? _____

Circle the words below that best describe your pain, or the way you feel when you are in pain.

cutting	pounding	tingling	tiring	deep
squeezing	throbbing	horrible	stabbing	burning
pulling	sickening	biting	screaming	scraping
aching	uncomfortable	cold	miserable	stretching
pricking	hot	scared	lonely	jumping
pinching	unbearable	sad	itching	grabbing
stinging	sharp	sore	flashing	pins and needles

From the words you wrote or circled, which three words best describe the pain you are feeling right now?

Rate how you feel now. If you have no pain put a mark at the end of the line by the happy face. If you have some pain, put a mark near the middle of the line. If you have a lot of pain, put a mark by the sad face.

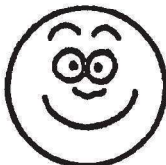


Not hurting
No discomfort
No pain



Hurting a whole lot
Very uncomfortable
Severe pain

Rate the worst pain you had this week. If you had no pain this week, put a mark at the end of the line by the happy face. If the pain you had was some hurting, put a mark by the middle of the line. If the worst pain you had was a whole lot of pain, put a mark by the sad face.



Not hurting
No discomfort
No pain



Hurting a whole lot
Very uncomfortable
Severe pain

Pick colors that mean **no hurt**, **a little hurt**, **more hurt**, and **a lot of hurt** to you and color in the boxes. Now, using those colors, color in the body to show how you feel.

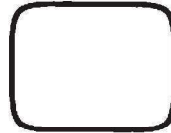
No pain
No hurt



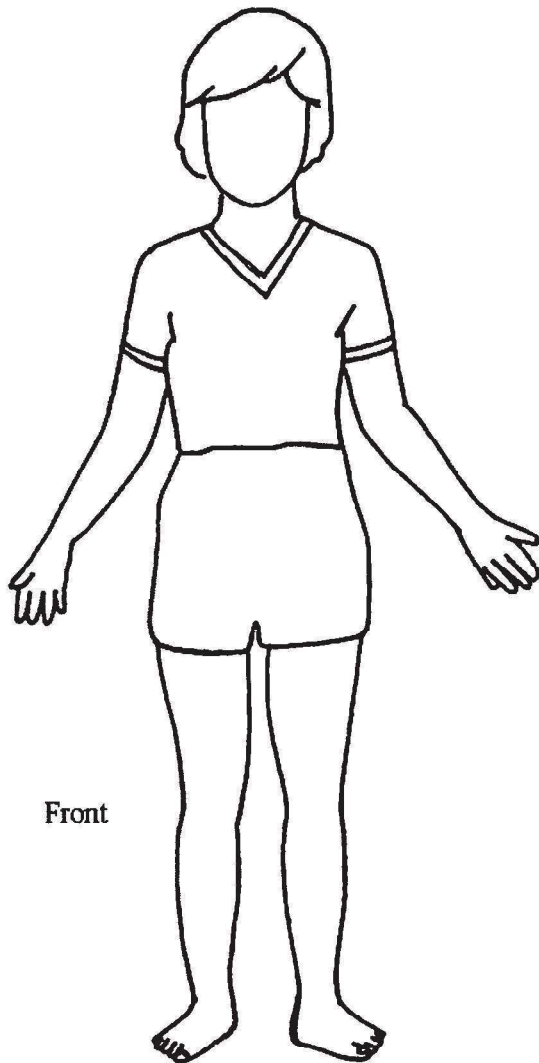
Mild pain
A little hurt



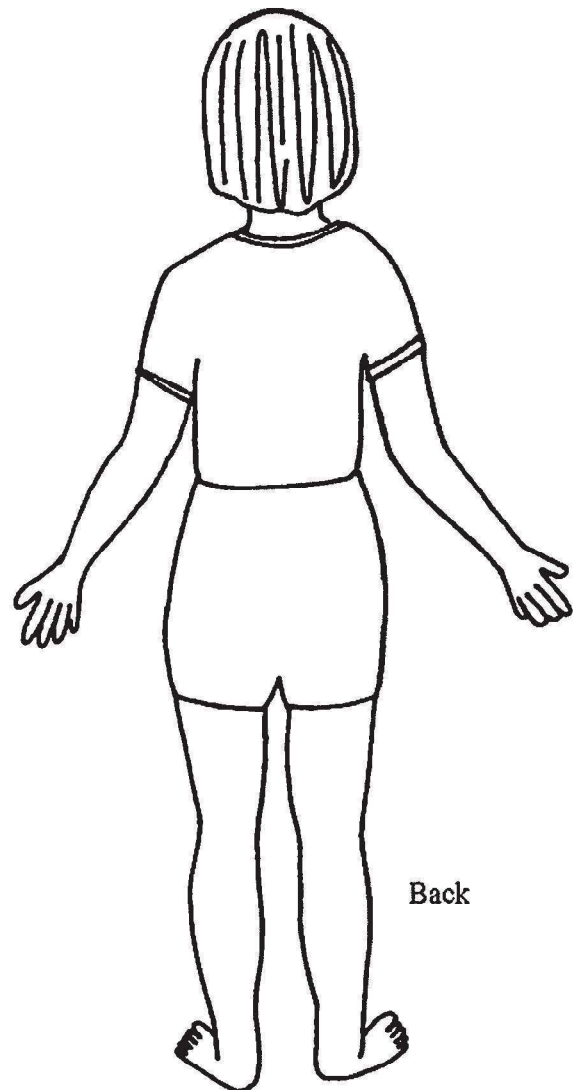
Moderate pain
More hurt



Severe pain
A lot of hurt



Front



Back