Form Approved
OMB Control No.: 0920-XXXX
Expiration date: 09/30/2023

Appendix 20

Subject ID:	
Subject ID:	

Sociability				
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Date (MM/DD/YY): \_\_\_/\_\_\_

We would like to learn more about your school attendance and participation in different activities <u>over</u> <u>the past 3 months</u>. For each question, please fill in the blank with the answer that fits you best.

During the past 3 months
1) On average, I usually went to school
□ 1 day a week
□2 2-3 days a week
□3 4-5 days a week
$\square$ 9 N/A; I am homebound/homeschooled $\longrightarrow$ (SKIP TO QUESTION 6)
2) When I went to school, I was usually there
□1 The whole day (6-8 hours)
□2 Part of the day (1-5 hours)
□3 Sometimes the whole day and sometimes part of the day
3) How often did you have to stop or skip an <u>in-school activity</u> due to CFS symptoms? In-school activities include class study hall, lunch, and field trips.
□ Never/Rarely
□2 Sometimes
□3 Often/Always
4) How often did you have to stop or skip an <u>after-school activity</u> due to CFS symptoms? After-school activities include sports teams, academic clubs, marching band, and mentoring/tutoring.  □ Never/Rarely
□2 Sometimes
□3 Often/Always
5) How often did you have to skip school social events due to CFS symptoms? School social events include athletic events, school performances, dances, and overnight school trips.  □ Never/Rarely □ Sometimes
□3 Often/Always
6) How often were you not able to attend <b>non-school related activities</b> due to CFS symptoms? Non-school related activities include social events with friends, church activities, family outings, and vacations.
□ Never/Rarely
□2 Sometimes
□3 Often/Always
7) How often did you have to stop or skip hobbies, social activities, or leisure activities in order to keep up with your schoolwork?
□1 Never/Rarely
□2 Sometimes
□3 Often/Always

Now, we would like to learn more about your experiences with friends and others your age <u>during the</u> <u>past week</u>.

## PROMIS Pediatric Peer Relationships - Short Form 8a

Please respond to each item by marking one box per row. In the past 7 days...

•		•			
I felt accepted by other kids my age.	□0 Never	□l Almost Never	☐ Sometimes	☐ Often	☐4 Almost Always
I was able to count on my friends.	□0 Never	□l Almost Never	2 Sometimes	☐ Often	□4 Almost Always
I was able to talk about everything with my friends.	□0 Never	□l Almost Never	☐ Sometimes	☐ Often	☐4 Almost Always
I was good at making friends.	① Never	☐l Almost Never	2 Sometimes	☐ Often	☐4 Almost Always
My friends and I helped each other.	□0 Never	☐ Almost Never	2 Sometimes	☐ Often	☐4 Almost Always
Other kids wanted to be my friend.	□0 Never	□l Almost Never	2 Sometimes	☐ Often	□4 Almost Always
Other kids wanted to be with me.	□ Never	☐ Almost Never	2 Sometimes	☐ Often	☐4 Almost Always
Other kids wanted to talk to me.	□0 Never	□l Almost Never	2 Sometimes	☐ Often	□4 Almost Always

~ End of Questionnaire ~

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