

Illawarra Institute of Obesity Surgery

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RAND 36-ITEM HEALTH SERVEY 1.0

Name				Date:	/
INSTF			all questions by circling ON luestions blank or circle more		· •
01	In general	, would you	ı say about your health	is:	(Circle one number)
	Excellent		1		
	Very good		2		
	Good		3		
	Fair		4		
	Poor		5		
02		d to one yea general now	ar ago, how would you /?	rate your	(Circle one number)
	Much bette	r	1		
	Somewhat	better	2		
	The same		3		
	Somewhat	worse	4		
	Much worse	e	5		

The following questions are about activities you might do during a typical day.

Does your health now limit you in these following activities, if so how much?

	(Circle one number each line)	Yes limited a lot	Yes limited a little	No,not limited at all
	Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports.	1	2	3
	Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf.	1	2	3
05	_ifting or carrying groceries	1	2	3
06	Climbing several flights of stairs	1	2	3
07	Climbing one flight of stairs	1	2	3
08	Bending, kneeling, or stooping	1	2	3
09	Walking more than one kilometer	1	2	3
10	Walking half a kilometer	1	2	3
	Walking 100 meters	1	2	3
12	Bathing or dressing yourself	1	2	3

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your **PHYSICAL** health?

	(Circle one number on each line)	Yes	No
13	Cut down the amount of time you spent on work or other activities.	1	2
14	Accomplished less than you would like.	1	2
15	Were limited in the kind of work or other activities.	1	2
16	Had difficulty performing work or other activities, for example (It took extra effort).	1	2

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

	(Circle one number on each line)	Yes	No
17	Cut down the amount of time you spent on work or other activities.	1	2
18	Accomplished less than you like.	1	2
19	Didn't do work or other activities as carefully as usual.	1	2

(Circle one number)

- During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbours or group.
- 1 Not at all
- 2 Slightly
- 3 Moderately
- 4 Quite a bit
- 5 Extremely
- How much bodily pain have you had during the past 4 weeks.
- None
- 2 Very Mild
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 very severe
- During the past 4 weeks, how much did pain interfere with your normal work (Including both work outside the home and housework).
- 1 Not at all
- 2 A little
- 3 Moderately
- 4 Quite a bit
- 5 Extremely

The following questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of the time during the last 4 weeks....

	All The Time	Most of the Time	A good bit of Time	Some of the Time	A little of the Time	None of the Time
Did you feel full of life?	1	2	3	4	5	6
How you been a very nervous person.	1	2	3	4	5	6
Have you felt so down in the dumps that nothing could cheer you up.	1	2	3	4	5	6
Have you felt calm and peaceful.	1	2	3	4	5	6
Did you have a lot of energy?	1	2	3	4	5	6
28 Have you felt down.	1	2	3	4	5	6
Did you feel worn out?	1	2	3	4	5	6
Have you been a happy person.	1	2	3	4	5	6
Did you feel tired.	1	2	3	4	5	6

(Circle one number)

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, relative, etc)?

All of the time	1
Most of the time	2
Some of the time	3
A little of the time	4
None of the time	5

How true or false is each of following statements for you?

(Circle one number)	Definitely True	Mostly True	Don't Know	Mostly False	Definitely False
I seem to get sick a little easier than other people	1	2	3	4	5
I am as healthy as anybody I know	1	2	3	4	5
I expect my health to get worse	1	2	3	4	5
My health is excellent	1	2	3	4	5

MULTI-DIMENSIONAL BODY SELF RELATIONS QUESTIONNAIRE

The following section contains a series of statements about how people might think, feel, or behave.

You are asked to indicate the extent to which each statement pertains to you personally .

Read each statement carefully. Circle the most appropriate number on the scale below for each question.

1 = Definitely disagree 2 = Mostly disagree 3 = Neither agree nor disagree

4 = Mostly agree 5 = Definitely agree

1	1	2	3	4	5	Before going out in public, I always notice how I look.
2	1	2	3	4	5	I am careful to buy clothes that will make me look my best.
3	1	2	3	4	5	My body is sexually appealing.
4	1	2	3	4	5	I like my looks just the way they are.
5	1	2	3	4	5	I check my appearance in a mirror whenever I can.
6	1	2	3	4	5	Before going out, I usually spend a lot of time getting ready.
7	1	2	3	4	5	Most people would consider me good-looking.
8	1	2	3	4	5	It is important that I always look good.
9	1	2	3	4	5	I use very few grooming product.
10	1	2	3	4	5	I like the way I look without my clothes.
11	1	2	3	4	5	I am self-conscious if my grooming isn't right.
12	1	2	3	4	5	I usually wear whatever is handy without caring how it looks.
13	1	2	3	4	5	I like the way my clothes fit me.
14	1	2	3	4	5	I don't care what people think about my appearance.
15	1	2	3	4	5	I take special care with my hair grooming.
16	1	2	3	4	5	I am physically unattractive.
17	1	2	3	4	5	I never think about my appearance.
18	1	2	3	4	5	I am always trying to improve my physical appearance.

BECK DEPRESSION QUESTIONNAIRE

01

- (O) I do not feel sad.
- (1) I feel sad.
- (2) I am sad all the time and I can't snap out of it.
- (3) I am so sad or unhappy that I can't stand it.

02

- (0) I am not particularly discouraged about the future.
- (1) I feel discourage about the future.
- (2) I feel have nothing to look forward to.
- (3) I feel the future is hopeless and that things cannot improve.

03

- (0) I do not feel like a failure.
- (1) I feel I have failed more than the average person.
- (2) As I look back on my life, all I can see is a lot of failures.
- (3) I feel I am a complete failure as a person.

04

- (0) I get as much satisfaction out of things as I used to.
- (1) I don't enjoy things the way I used to.
- (2) I don't get real satisfaction out of anything any more.
- (3) I am dissatisfied or bored with everything.

05

- (O) I don't feel particularly guilty
- (1) I feel guilty a good part of the time.
- (2) I feel quite guilty most of the time.
- (3) I feel guilty all of the time.

06

- (0) I don't feel I am being punished.
- (1) I feel i may be punished.
- (2) I expect to be punished.
- (3) I fell I am being punished.

BECK DEPRESSION QUESTIONNAIRE

I don't feel disappointed in myself. 07 am disappointed in myself. am disgusted with myself. hate myself. don't feel I am any worse than anybody else. 80 am critical of myself for my weaknesses or mistakes. blame myself all the time for my faults. blame myself for everything bad that happens. am no more irritated now than I ever am. 09 get annoyed or irritated more easily than I used to. I feel irritated all the time now. don't get irritated at all by the things that used to irritate me. I have not lost interest in other people. am less interested in other people than I used to be. have lost most of my interest in other people. I have lost all of my interest in other people. make decisions about as well as I ever could. 11 put off making decisions more than I used to. have greater difficulty in making decisions than before. I can't make decision at all anymore. don't feel i look any worse than I used to. 12

I feel that there are permanent changes in my appearance that make me look unattractive.

am worried that I am looking old or unattractive.

believe that I look ugly.

BECK DEPRESSION QUESTIONNAIRE

(0) I can work about as well as before.

- (1) It takes an extra effort to get started at doing something.
- (2) I have to push myself very hard to do anything.
- (3) I can't do any work at all.
- (0) I can sleep as well as usual.
 - (1) I don't sleep as well as I used to.
 - (2) I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.
 - (3) I wake up several hours earlier than I used to and I cannot go back to sleep.
- (0) I don't get more tired than usual.
 - (1) I get tired more easily than I used to.
 - (2) I get tired from doing almost anything
 - (3) I am too tired to do anything.
 - (0) My appetite is no worse than usual.

16

18

- (1) My appetite is not as good as it used to be.
- (2) My appetite is much worse now.
- (3) I have no appetite at all any more.
- (0) I don't have any thoughts of killing myself.
 - (1) I have thought of killing myself but I could not carry them out.
 - (2) I would like to kill myself.
 - (3) I would kill myself if I had the chance.
 - (0) I don't cry any more than usual.
 - (1) I cry more now than I used to.
 - (2) I cry all the time now.
 - (3) I used to be able to cry, but now I can't cry even though I want to.

BECK DEPRESSION QUESTIONNAIRE

19

- (0) I am no more worried about my health than usual.
- (1) I am worried about my physical problems such as aches and pains; or upset stomach; or constipation.
- (2) I am very worried about physical problems and it is hard to think of much else.
- (3) I am so worried about my physical problems that I cannot think about anything else.

20

- (0) I haven't lost much weight, if any, lately.
- (1) I have lost more than 5 pounds.
- (2) I have lost more than 10 pounds.
- (3) I have lost more than 15 pounds.

21

- (0) I have not noticed any recent change in my interest in sex.
- (1) I am less interested in sex than I used to be.
- (2) I am much less interested in sex now.
- (3) I have lost interest in sex completely.