Patient Name :	Date :	
Multi-Dimensional Health A	Assessment Questionnaire (R791-NP2)	
than you. Please try to answer each question		
1. Please check $(\sqrt{\ })$ the ONE best answer for y	your abilities at this time: FOR OFFIC USE ONL	
OVER THE LAST WEEK, were you able to:	Without With With UNABLE ANY SOME MUCH To Do Difficulty Difficulty Difficulty	0)
a. Dress yourself, including tying shoelaces and doing buttons? b. Cat is and out of had?	0123 1=0.3 16=5.3 2=0.7 17=5:7	
b. Get in and out of bed?c. Lift a full cup or glass to your mouth?d. Walk outdoors on flat ground?e. Wash and dry your entire body?	0 1 2 3 3 18-60 0 1 2 3 4±13 19-63 0 1 2 3 6±7 20-67 0 1 2 3 6-20 21-70 0 1 2 3 8-27 23-77	
f. Bend down to pick up clothing from the floor? g. Turn regular faucets on and off? h. Get in and out of a car, bus, train, or airplane? i. Walk two miles or three kilometers, if you wish? j. Participate in recreational activities and sports	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	
as you would like, if you wish? k. Get a good night's sleep? l. Deal with feelings of anxiety or being nervous? m. Deal with feelings of depression or feeling blue?	0123	The state of the s
2. How much pain have you had because of yo Please indicate below how severe your pain)): [
NO O O O O O O O O O O O O O PAIN 0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0 5.5 6	O O O O O O O PAIN AS BAD AS 6.0 6.5 7.0 7.5 8.0 8.5 9.0 9.5 10 IT COULD BE RAPID 3 (0-3	0)
Considering all the ways in which illness an time, please indicate below how you are do	BS0/33	
VERY O O O O O O O O O O O O O O O WELL 0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0 5.5	O O O O O O O O VERY 5 6.0 6.5 7.0 7.5 8.0 8.5 9.0 9.5 10 POORLY	
Please shade all the locations of your pain over the past week on the body figures and hands.	What is your primary concern you wish to discuss with the physician today?	
LEFT	Please circle if you are experiencing any of the following:	
	Fevers Night Sweats	

Unexplained weight loss

Mouth sores/ulcers

Abdominal Pain

Chest pain

Skin rash

Adapted from CLINHAQ, Wolfe F and Pincus T. Current Comment – Listening to the patient – A practical guide to self report questionnaires in clinical care. Arthritis Rheum. 1999;42 (9):1797-808. Used by permission.

Weight gain

Diarrhea

Cough (chronic)

Recent infection

Breathing difficulty