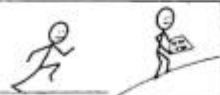






# Dartmouth Coop General Health Questionnaire

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ DOB: \_\_\_\_\_






### PHYSICAL FITNESS

During the past 4 weeks . . .  
What was the hardest physical activity you could do for at least 2 minutes ?

Very heavy, (for example) •Run, fast pace •Carry a heavy load upstairs or uphill (25 lbs/10 kgs)		1
Heavy, (for example) •Jog, slow pace •Climb stairs or a hill moderate pace		2
Moderate, (for example) •Walk, medium pace •Carry a heavy load level ground (25 lbs/10 kgs)		3
Light, (for example) •Walk, medium pace •Carry light load on level ground (10 lbs/5kgs)		4
Very light, (for example) •Walk, slow pace •Wash dishes		5






### FEELINGS

During the past 4 weeks . . .  
How much have you been bothered by emotional problems such as feeling anxious, depressed, irritable or downhearted and blue ?

Not at all		1
Slightly		2
Moderately		3
Quite a bit		4
Extremely		5

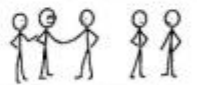




### DAILY ACTIVITIES

During the past 4 weeks . . .  
How much difficulty have you had doing your usual activities or task, both inside and outside the house because of your physical and emotional health ?

No difficulty at all		1
A little bit of difficulty		2
Some difficulty		3
Much difficulty		4
Could not do		5

### SOCIAL ACTIVITIES

During the past 4 weeks . . .  
Has your physical and emotional health limited your social activities with family, friends, neighbors or groups ?

Not at all		1
Slightly		2
Moderately		3
Quite a bit		4
Extremely		5

# Dartmouth Coop General Health Questionnaire

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_






**PAIN**

During the past 4 weeks . . .  
How much bodily pain have you generally had ?

No pain		1
Very mild pain		2
Mild pain		3
Moderate pain		4
Severe pain		5






**CHANGE IN HEALTH**

How would you rate your overall health now compared to 4 weeks ago ?

Much better		1
A little better		2
About the same		3
A little worse		4
Much worse		5

**OVERALL HEALTH**

During the past 4 weeks . . .  
How would you rate your health in general ?

Excellent		1
Very good		2
Good		3
Fair		4
Poor		5

**SOCIAL SUPPORT**

During the past 4 weeks . . .  
Was someone available to help you if you needed and wanted help? For example if you

- felt very nervous, lonely, or blue
- got sick and had to stay in bed
- needed someone to talk to
- needed help with daily chores
- needed help just taking care of yourself

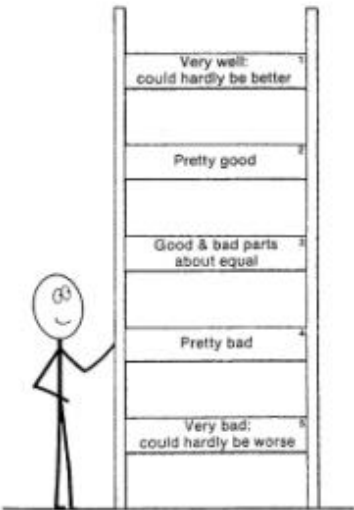
Yes, as much as I wanted		1
Yes, quite a bit		2
Yes, some		3
Yes, a little		4
No, not at all		5

# Dartmouth Coop General Health Questionnaire

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

### QUALITY OF LIFE

How have things been going for you during the past 4 weeks?



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Comments:

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