MIST2 Form IMPA, BPH Impact Scale (version November 9, 2006)

Participant ID (3 digits)
Visit ID = S02, W12, M12 (one record per visit)

1. Over the past month, how much physical discomfort did any urinary problems cause you?		Visit ID = 602, W12, W12 (One record per visit)	VISITID
2. Over the past month, how much did you worry about your health because of any urinary problems? □₀ none □₁ only a little □₂ some □₃ a lot 3. Overall, how bothersome has any trouble with urination been during the past month? □₀ not at all bothersome □₁ bothers me a little □₂ bothers me some □₃ bothers me a lot 4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? □₀ none of the time □₁ a little of the time □₂ some of the time □₃ most of the time	1.		IMDISCOM
urinary problems?		\square_0 none \square_1 only a little \square_2 some \square_3 a lot	
3. Overall, how bothersome has any trouble with urination been during the past month? □₀ not at all bothersome □₁ bothers me a little □₂ bothers me some □₃ bothers me a lot 4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? □₀ none of the time □₁ a little of the time □₂ some of the time □₃ most of the time	2.		IMHEALTH
month?		\square_0 none \square_1 only a little \square_2 some \square_3 a lot	
□ bothers me a little □ bothers me some □ bothers me a lot 4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? □ none of the time □ a little of the time □ some of the time □ most of the time □ most of the time	3.	· · · · · · · · · · · · · · · · · · ·	IMBOTHE
 □₂ bothers me some □₃ bothers me a lot 4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? □₀ none of the time □₁ a little of the time □₂ some of the time □₃ most of the time 		\square_0 not at all bothersome	
 □3 bothers me a lot 4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? □0 none of the time □1 a little of the time □2 some of the time □3 most of the time 		□ ₁ bothers me a little	
4. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do? none of the time a little of the time some of the time most of the time		\square_2 bothers me some	
doing the kinds of things you would usually do?		\square_3 bothers me a lot	
☐₁ a little of the time ☐₂ some of the time ☐₃ most of the time	4.		IMPREV
\square_2 some of the time \square_3 most of the time		\square_0 none of the time	
☐₃ most of the time		\square_1 a little of the time	
		\square_2 some of the time	
☐ ₄ all of the time		\square_3 most of the time	
		☐ ₄ all of the time	

RELEASEID