

PedsQL™

Pediatric Quality of Life Inventory

Version 4.0

TEEN REPORT

On the following page is a list of things that might be a problem for you. Please tell us **how much of a problem** each one has been for you during the past ONE month by circling:

- 0 if it is **never** a problem
- 1 if it is **almost never** a problem
- 2 if it is **sometimes** a problem
- 3 if it is **often** a problem
- 4 if it is **almost always** a problem

There are no right or wrong answers.
If you do not understand a question, please ask for help.

In the past **ONE month**, how much of a **problem** has this been for you...

| <i>About My Health and Activities (problems with...)</i> | Never | Almost Never | Some- times | Often | Almost Always |
|--|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. It is hard for me to walk more than one block {walk_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 2. It is hard for me to run {run_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 3. It is hard for me to do sports activity or exercise {sports_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 4. It is hard for me to lift something heavy {lift_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 5. It is hard for me to take a bath or shower by myself {bath_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 6. It is hard for me to do chores around the house {chores_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 7. I hurt or ache {ache_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 8. I have low energy {energy_pqol_child} | 0 | 1 | 2 | 3 | 4 |

| <i>About My Feelings (problems with...)</i> | Never | Almost Never | Some- times | Often | Almost Always |
|--|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. I feel afraid or scared {scared_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 2. I feel sad or blue {sad_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 3. I feel angry {angry_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 4. I have trouble sleeping {sleep_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 5. I worry about what will happen to me {worry_pqol_child} | 0 | 1 | 2 | 3 | 4 |

| <i>How I Get Along with Others (problems with...)</i> | Never | Almost Never | Some- times | Often | Almost Always |
|--|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. I have trouble getting along with other teens {getalong_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 2. Other teens do not want to be my friend {friend_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 3. Other teens tease me {tease_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 4. I cannot do things that other teens my age can do {dothings_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 5. It is hard to keep up with my peers {keepup_pqol_child} | 0 | 1 | 2 | 3 | 4 |

| <i>About My Work/Studies (problems with...)</i> | Never | Almost Never | Some- times | Often | Almost Always |
|---|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. It is hard to pay attention in class {class_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 2. I forget things {forget_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 3. I have trouble keeping up with my schoolwork {homework_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 4. I miss school because of not feeling well {feelwell_pqol_child} | 0 | 1 | 2 | 3 | 4 |
| 5. I miss school to go to the doctor or hospital {godoc_pqol_child} | 0 | 1 | 2 | 3 | 4 |

PedsQL™

Diabetes Module

Version 3.2

TEEN REPORT

Teens with diabetes sometimes have special problems. Please tell us **how much of a problem** each one has been for you during the past ONE month by circling:

- 0 if it is **never** a problem
- 1 if it is **almost never** a problem
- 2 if it is **sometimes** a problem
- 3 if it is **often** a problem
- 4 if it is **almost always** a problem

There are no right or wrong answers.
If you do not understand a question, please ask for help.

In the past **one month**, how much of a **problem** has this been for you ...

| About My Diabetes (problems with...) | | Never | Almost Never | Some- times | Often | Almost Always |
|---|--|-------|-----------------|----------------|-------|------------------|
| 1. | I feel hungry {hungry_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 2. | I feel thirsty {thirsty_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 3. | I have to go to the bathroom too often {bathroom_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 4. | I have stomachaches {stomach_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 5. | I have headaches {headache_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 6. | I feel like I need to throw up {throwup_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 7. | I go "low" {golow_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 8. | I go "high" {gohigh_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 9. | I feel tired {tired_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 10. | I get shaky {shaky_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 11. | I get sweaty {sweaty_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 12. | I feel dizzy {dizzy_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 13. | I feel weak {weak_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 14. | I have trouble sleeping {sleep_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 15. | I get cranky or grumpy {irritabl_pdqd_child} | 0 | 1 | 2 | 3 | 4 |

In the past **one month**, how much of a **problem** has this been for you ...

| Treatment - I (problems with...) | | Never | Almost Never | Some- times | Often | Almost Always |
|---|---|-------|-----------------|----------------|-------|------------------|
| 1. | It hurts to get my finger pricked {prick_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 2. | It hurts to get insulin shots {hurtshot_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 3. | I am embarrassed by my diabetes treatment {embarrass_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 4. | My parents and I argue about my diabetes care {argue_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 5. | It is hard for me to do everything I need to do to care for my diabetes {hardtodo_pdqd_child} | 0 | 1 | 2 | 3 | 4 |

Whether you do these things **on your own or with the help of your parents**, please answer how hard these things were to do in the past **one month**.

| Treatment - II (problems with...) | | Never | Almost Never | Some- times | Often | Almost Always |
|--|--|-------|-----------------|----------------|-------|------------------|
| 1. | It is hard for me to take blood glucose tests {glucose_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 2. | It is hard for me to take insulin shots {insulin_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 3. | It is hard for me to exercise or do sports {exercise_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 4. | It is hard for me to keep track of carbohydrates {carbo_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |
| 5. | It is hard for me to carry a fast-acting carbohydrate {fastact_pdqd_child} | 0 | 1 | 2 | 3 | 4 |
| 6. | It is hard for me to snack when I go "low" {snack_pdqd_s4_child} | 0 | 1 | 2 | 3 | 4 |

In the past **one month**, how much of a **problem** has this been for you ...

| Worry (problems with...) | Never | Almost Never | Some- times | Often | Almost Always |
|--|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. I worry about going "low" <small>{wrgolow_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |
| 2. I worry about going "high" <small>{wrgohigh_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |
| 3. I worry about long-term complications from diabetes <small>{complica_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |

In the past **one month**, how much of a **problem** has this been for you ...

| Communication (problems with...) | Never | Almost Never | Some- times | Often | Almost Always |
|---|--------------|-------------------------|------------------------|--------------|--------------------------|
| 1. It is hard for me to tell the doctors and nurses how I feel <small>{telldoc_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |
| 2. It is hard for me to ask the doctors and nurses questions <small>{kdoc_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |
| 3. It is hard for me to explain my illness to other people <small>{explain_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |
| 4. I am embarrassed about having diabetes <small>{embarras_pdqd_child}</small> | 0 | 1 | 2 | 3 | 4 |