



**Health Questionnaire**

**English version for the UK**

SAMPLE

## EQ-5D-Y

### Describing your health TODAY

Under each heading, please tick the ONE box that best describes your health TODAY

#### **Mobility** (*walking about*)

I have no problems walking about

I have some problems walking about

I have a lot of problems walking about

#### **Looking after myself**

I have no problems washing or dressing myself

I have some problems washing or dressing myself

I have a lot of problems washing or dressing myself

#### **Doing usual activities** (*for example, going to school, hobbies, sports, playing, doing things with family or friends*)

I have no problems doing my usual activities

I have some problems doing my usual activities

I have a lot of problems doing my usual activities

#### **Having pain or discomfort**

I have no pain or discomfort

I have some pain or discomfort

I have a lot of pain or discomfort

#### **Feeling worried, sad or unhappy**

I am not worried, sad or unhappy

I am a bit worried, sad or unhappy

I am very worried, sad or unhappy

**How good is your health TODAY**

- We would like to know how good or bad your health is TODAY.
- This line is numbered from 0 to 100.
- 100 means the best health you can imagine.  
0 means the worst health you can imagine.
- Please mark an X on the line that shows how good or bad your health is TODAY.

