

Patient completed forms:

- EQ-5D-3L
- Satisfaction with care (Likert scale)
- PDQ-8
- SMiLE

Identification number
Assessment Date



Health Questionnaire

English version for the UK

(Validated for Ireland)

Participant ID:

Date: .

By placing a tick in one box in each group below, please indicate which statements best describe your own health state today.

Mobility

I have no problems in walking about ☐

I have some problems in walking about ☐

I am confined to bed ☐

Self-Care

I have no problems with self-care ☐

I have some problems washing or dressing myself ☐

I am unable to wash or dress myself ☐

Usual Activities (e.g. work, study, housework, family or leisure activities)

I have no problems with performing my usual activities ☐

I have some problems with performing my usual activities ☐

I am unable to perform my usual activities ☐

Pain / Discomfort

I have no pain or discomfort ☐

I have moderate pain or discomfort ☐

I have extreme pain or discomfort ☐

Anxiety / Depression

I am not anxious or depressed ☐

I am moderately anxious or depressed ☐

I am extremely anxious or depressed ☐

Participant ID:

Date: .

To help people say how good or bad a health state is, we have drawn a scale (rather like a thermometer) on which the best state you can imagine is marked 100 and the worst state you can imagine is marked 0.

We would like you to indicate on this scale how good or bad your own health is today, in your opinion. Please do this by drawing a line from the box below to whichever point on the scale indicates how good or bad your health state is today.

**Your own health
state today**

Best imaginable
health state

100

90

80

70

60

50

40

30

20

10

0

Worst imaginable
health state

Satisfaction with Care

How satisfied are you with your overall care?

1 = Very satisfied

2 = satisfied

3 = neutral

4 = dissatisfied

5 = very dissatisfied

Participant ID:

Date:

Parkinson's Disease Quality of Life Questionnaire (PDQ-8)

Due to having Parkinson's disease,
how often during the last month have you...

Please **tick one box** for each question

	Never	Occasionally	Sometimes	Often	Always or cannot do at all
1. Had difficulty getting around in public?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Had difficulty dressing yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Felt depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Had problems with your close personal relationships?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Had problems with your concentration, e.g. when reading or watching TV?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Felt unable to communicate with people properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Had painful muscle cramps or spasms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Felt embarrassed in public due to having Parkinson's disease?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please check that you have **ticked one box for each question**.

Thank you for completing the questionnaire.

The search for **meaning in life** is important for most people. This question comes up in different phases of life, including both happy and unhappy situations.

In the following section we would ask you to nominate those areas of life which in your opinion **give meaning to your life**. These areas can be characterised as those which give you “grounding” in life, and give importance to your life. In short, things “worth living for”.

These **areas** obviously differ from person to person. Therefore, there are no “correct” or “wrong” answers to this question. The best way to answer is to be as truthful as possible and to think exactly about your individual areas. Refer to your present situation.

Please first nominate areas which give meaning to your life, regardless of how satisfied or unsatisfied you are with these areas at the moment. The number and order of your answers is not important.

Area 1:

Area 2:

Area 3:

Area 4:

Area 5:

Area 6:

Area 7:

Please make sure that the order of the areas in the following is identical with the numbers on the previous page. Please rate every nominated area. Refer to your present situation.

Please rate how **satisfied or unsatisfied** you are with each nominated area. That is, how much - positively or negatively - the area affects your total meaning in life.

How satisfied are you with ...	Very unsatisfied	In between	Very satisfied
Area 1	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 2	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 3	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 4	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 5	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 6	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	
Area 7	(-3)	(-2) (-1) (0) (+1) (+2) (+3)	

Please rate how **important** each area is for your total meaning in life. Try to distinguish between the areas as best possible by considering all numbers.

How important is ...	Not important			Important			Very important			Extremely important		
Area 1	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 2	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 3	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 4	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 5	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 6	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				
Area 7	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)				