NVLE

National association for people with
lupus, APS, scleroderma and MCTD

Why you should fill in the questionnaire

How are you? While that's a question you frequently hear when visiting your doctor, you might not always know how to answer it, or even where to begin.
This questionnaire will help you to talk to your doctor about:

- how you are doing
- what you would like to change

What the questionnaire will cover
The questionnaire covers five topics relating to your life:
1. Physical health
2. Sense of meaning
3. Mental health
4. Daily life
5. Quality of life

How to complete the questionnaire
Answer all the questions yourself. Choose the answer that best suits you, and mark it with a cross.
If you would like to talk about it, then also put a cross under 'I would like to talk about this'.
After completing each topic, give it a number rating.

A sample question

	No	Somewhat	Yes	I would like to talk about this
Are you feeling good?	☐	☐	☐	☐

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1. Physical health

	No	Somewhat	Yes	I would like to talk about this
Do you feel healthy?	☐	☐	☐	☐
Are you feeling fit?	☐	☐	☐	☐
Are you in pain?	☐	☐	☐	☐
Are you sleeping well?	☐	☐	☐	☐
Can you move without any problems?	☐	☐	☐	☐
Are you sick often?	☐	☐	☐	☐
Do you have difficulty eating?	☐	☐	☐	☐
Do you have a healthy diet?	☐	☐	☐	☐

After having reflected on your physical health, how would you rate it?

1 2 3 4 5 6 7 8 9 10

2. Sense of meaning

	No	Somewhat	Yes	I would like to talk about this
Do you find your life meaningful?	☐	☐	☐	☐
Are you worried about your future?	☐	☐	☐	☐
Do you accept your life the way it is?	☐	☐	☐	☐

After having reflected on your sense of meaning in your life, how would you rate it?

1 2 3 4 5 6 7 8 9 10

3. Mental health

	No	Somewhat	Yes	I would like to talk about this
Are you good at remembering things?	☐	☐	☐	☐
Can you think clearly?	☐	☐	☐	☐
Are you cheerful?	☐	☐	☐	☐
Are you satisfied with who you are?	☐	☐	☐	☐
Do you know what to do when you don't feel good?	☐	☐	☐	☐
Do you make your own decisions about important matters?	☐	☐	☐	☐
Can you talk to people about your illness?	☐	☐	☐	☐
Can you cope with changes such as your appearance?	☐	☐	☐	☐

After having reflected on your mental health, how would you rate it?

1 2 3 4 5 6 7 8 9 10

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4. Daily life

	No	Somewhat	Yes	I would like to talk about this
Can you take good care of yourself?	☐	☐	☐	☐
Are you aware of what you can and cannot do?	☐	☐	☐	☐
Do you know how to live in a healthy way?	☐	☐	☐	☐
Do you use any aids?	☐	☐	☐	☐
Can you ask for help when necessary?	☐	☐	☐	☐

After having reflected on how things are going in your daily life, how would you rate it?

1 2 3 4 5 6 7 8 9 10

5. Quality of life

	No	Somewhat	Yes	I would like to talk about this
Are you enjoying life?	☐	☐	☐	☐
Are you happy?	☐	☐	☐	☐
Can you manage your life?	☐	☐	☐	☐
Do you experience balance in life?	☐	☐	☐	☐

After having reflected on your quality of life, how would you rate it?

1 2 3 4 5 6 7 8 9 10

End

What would you like to change in order to feel better?

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You have completed the questions.

Now go onto the 'spider's web' diagram.

Put a circle around the rating you gave. Do this for each topic.

We will now draw a figure.

Draw lines between the circles you put in the spider's web.