

## FATIGUE QUESTIONNAIRE

### INSTRUCTIONS:

Below are a series of statements regarding your Fatigue. By Fatigue we mean a sense of tiredness, lack of energy or total body give-out. Please read each statement and choose a number from 1 to 7, where #1 indicates you completely disagree with the statement and #7 indicates you completely agree. Please answer the questions as they apply to the past TWO WEEKS.

Circle the appropriate number on the answer sheet!

### Questions:

	Completely disagree				Completely agree			
	1	2	3	4	5	6	7	
1. I feel drowsy when I am fatigued.	1	2	3	4	5	6	7	
2. When I am fatigued, I lose my patience.	1	2	3	4	5	6	7	
3. My motivation is lower when I am fatigued.	1	2	3	4	5	6	7	
4. When I am fatigued, I have difficulty concentrating.	1	2	3	4	5	6	7	
5. Exercise brings on my fatigue.	1	2	3	4	5	6	7	
6. Heat brings on my fatigue.	1	2	3	4	5	6	7	
7. Long periods of inactivity bring on my fatigue.	1	2	3	4	5	6	7	
8. Stress brings on my fatigue.	1	2	3	4	5	6	7	
9. Depression brings on my fatigue.	1	2	3	4	5	6	7	
10. Work brings on my fatigue.	1	2	3	4	5	6	7	
11. My fatigue is worse in the afternoon.	1	2	3	4	5	6	7	
12. My fatigue is worse in the morning.	1	2	3	4	5	6	7	
13. Performance of routine daily activities increases my fatigue.	1	2	3	4	5	6	7	
14. Resting lessens my fatigue.	1	2	3	4	5	6	7	
15. Sleeping lessens my fatigue.	1	2	3	4	5	6	7	
16. Cool temperatures lessen my fatigue.	1	2	3	4	5	6	7	
17. Positive experiences lessen my fatigue.	1	2	3	4	5	6	7	
18. I am easily fatigued.	1	2	3	4	5	6	7	
19. Fatigue interferes with my physical functioning.	1	2	3	4	5	6	7	
20. Fatigue causes frequent problems for me.	1	2	3	4	5	6	7	
21. My fatigue prevents sustained physical functioning.	1	2	3	4	5	6	7	
22. Fatigue interferes with carrying out certain duties and responsibilities.	1	2	3	4	5	6	7	
23. Fatigue predated other symptoms of my condition.	1	2	3	4	5	6	7	
24. Fatigue is my most disabling symptom.	1	2	3	4	5	6	7	
25. Fatigue is among my 3 most disabling symptoms.	1	2	3	4	5	6	7	
26. Fatigue interferes with my work, family, or social life.	1	2	3	4	5	6	7	
27. Fatigue makes other symptoms worse.	1	2	3	4	5	6	7	
28. The fatigue that I now experience is different in quality or severity than the fatigue I experience before I developed this condition.	1	2	3	4	5	6	7	
29. I experienced prolonged fatigue after exercise.	1	2	3	4	5	6	7	