

Date: _____

Qualifying Assessment

ID

PIPER FATIGUE SCALE (PFS)

Directions: Many individuals can experience a sense of unusual or excessive tiredness whenever they become ill, receive treatment, or recover from their illness/treatment. This unusual sense of tiredness is not usually relieved by either a good night's sleep or by rest. Some call this symptom "fatigue" to distinguish it from the usual sense of tiredness.

For each of the following questions, please fill in the space provided for that response that best describes the fatigue you are experiencing now or for today. Please make every effort to answer each question to the best of your ability. If you are not experiencing fatigue now or for today, fill in the circle indicating "0" for your response. Thank you very much!

1. How long have you been feeling fatigue? (Check one response only).

- 1. not feeling fatigue
- 2. minutes
- 3. hours
- 4. days
- 5. weeks
- 6. months
- 7. other (Please describe) _____

2. To what degree is the fatigue you are feeling now causing you distress?

No Distress A Great Deal

1 2 3 4 5 6 7 8 9 10

3. To what degree is the fatigue you are feeling now interfering with your ability to complete your work or school activities?

None A Great Deal

1 2 3 4 5 6 7 8 9 10

4. To what degree is the fatigue you are feeling now interfering with your ability to socialize with your friends?

None A Great Deal

1 2 3 4 5 6 7 8 9 10

5. To what degree is the fatigue you are feeling now interfering with your ability to engage in sexual activity?

None									A Great Deal
1	2	3	4	5	6	7	8	9	10

6. Overall, how much is the fatigue which you are now experiencing interfering with your ability to engage in the kind of activities you enjoy doing?

None									A Great Deal
1	2	3	4	5	6	7	8	9	10

7. How would you describe the degree of intensity or severity of the fatigue which you are experiencing now?

Mild									Severe
1	2	3	4	5	6	7	8	9	10

8. To what degree would you describe the fatigue which you are experiencing now as being?

Pleasant									Unpleasant
1	2	3	4	5	6	7	8	9	10

9. To what degree would you describe the fatigue which you are experiencing now as being?

Agreeable									Disagreeable
1	2	3	4	5	6	7	8	9	10

10. To what degree would you describe the fatigue which you are experiencing now as being?

Protective									Destructive
1	2	3	4	5	6	7	8	9	10

11. To what degree would you describe the fatigue which you are experiencing now as being?

Positive									Negative
1	2	3	4	5	6	7	8	9	10

12. To what degree would you describe the fatigue which you are experiencing now as being:

Normal

Abnormal

1 2 3 4 5 6 7 8 9 10

13. To what degree are you now feeling:

Strong

Weak

1 2 3 4 5 6 7 8 9 10

14. To what degree are you now feeling:

Awake

Sleepy

1 2 3 4 5 6 7 8 9 10

15. To what degree are you now feeling:

Lively

Listless

1 2 3 4 5 6 7 8 9 10

16. To what degree are you now feeling:

Refreshed

Tired

1 2 3 4 5 6 7 8 9 10

17. To what degree are you now feeling:

Energetic

Unenergetic

1 2 3 4 5 6 7 8 9 10

18. To what degree are you now feeling:

Patient

Impatient

1 2 3 4 5 6 7 8 9 10

19. To what degree are you now feeling:

Relaxed

A Great Deal

1 2 3 4 5 6 7 8 9 10

20. To what degree are you now feeling:

Exhilarated

Depressed

1 2 3 4 5 6 7 8 9 10

21. To what degree are you now feeling:

Able to Concentrate

Unable to Concentrate

1 2 3 4 5 6 7 8 9 10

22. To what degree are you now feeling:

Able to Remember

Unable to Remember

1 2 3 4 5 6 7 8 9 10

23. To what degree are you now feeling:

Able to Think Clearly

Unable to Think Clearly

1 2 3 4 5 6 7 8 9 10

24. Overall, what do you believe is most directly contributing to or causing your fatigue?

25. Overall, the best thing you have found to relieve your fatigue is: _____

26. Is there anything else you would like to add that would describe your fatigue better to us?

27. Are you experiencing any other symptoms right now? _____
