

FACT-En (Version 4)

Below is a list of statements that other people with your illness have said are important. **Please circle or mark one number per line to indicate your response as it applies to the past 7 days.**

PHYSICAL WELL-BEING

		Not at all	A little bit	Somewhat	Quite a bit	Very much
GP1	I have a lack of energy	0	1	2	3	4
GP2	I have nausea.....	0	1	2	3	4
GP3	Because of my physical condition, I have trouble meeting the needs of my family	0	1	2	3	4
GP4	I have pain.....	0	1	2	3	4
GP5	I am bothered by side effects of treatment.....	0	1	2	3	4
GP6	I feel ill.....	0	1	2	3	4
GP7	I am forced to spend time in bed.....	0	1	2	3	4

SOCIAL/FAMILY WELL-BEING

		Not at all	A little bit	Somewhat	Quite a bit	Very much
GS1	I feel close to my friends.....	0	1	2	3	4
GS2	I get emotional support from my family	0	1	2	3	4
GS3	I get support from my friends	0	1	2	3	4
GS4	My family has accepted my illness	0	1	2	3	4
GS5	I am satisfied with family communication about my illness	0	1	2	3	4
GS6	I feel close to my partner (or the person who is my main support)	0	1	2	3	4
Q1	<i>Regardless of your current level of sexual activity, please answer the following question. If you prefer not to answer it, please mark this box and go to the next section.</i>	<input type="checkbox"/>				
GS7	I am satisfied with my sex life	0	1	2	3	4

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EMOTIONAL WELL-BEING

		Not at all	A little bit	Somewhat	Quite a bit	Very much
GE1	I feel sad.....	0	1	2	3	4
GE2	I am satisfied with how I am coping with my illness.....	0	1	2	3	4
GE3	I am losing hope in the fight against my illness.....	0	1	2	3	4
GE4	I feel nervous.....	0	1	2	3	4
GE5	I worry about dying.....	0	1	2	3	4
GE6	I worry that my condition will get worse.....	0	1	2	3	4

FUNCTIONAL WELL-BEING

		Not at all	A little bit	Somewhat	Quite a bit	Very much
GF1	I am able to work (include work at home).....	0	1	2	3	4
GF2	My work (include work at home) is fulfilling.....	0	1	2	3	4
GF3	I am able to enjoy life	0	1	2	3	4
GF4	I have accepted my illness	0	1	2	3	4
GF5	I am sleeping well	0	1	2	3	4
GF6	I am enjoying the things I usually do for fun.....	0	1	2	3	4
GF7	I am content with the quality of my life right now	0	1	2	3	4

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<u>ADDITIONAL CONCERNS</u>		Not at all	A little bit	Somewhat	Quite a bit	Very much
O1	I have swelling in my stomach area	0	1	2	3	4
O3	I have cramps in my stomach area	0	1	2	3	4
Hep8	I have discomfort or pain in my stomach area	0	1	2	3	4
ES6	I have vaginal bleeding or spotting	0	1	2	3	4
ES4	I have vaginal discharge.....	0	1	2	3	4
Hep1	I am unhappy about a change in my appearance	0	1	2	3	4
ES1	I have hot flashes/hot flushes	0	1	2	3	4
ES2	I have cold sweats	0	1	2	3	4
ES3	I have night sweats	0	1	2	3	4
HI7	I feel fatigued	0	1	2	3	4
ES8	I have pain or discomfort with intercourse	0	1	2	3	4
En1	I have trouble digesting food	0	1	2	3	4
B1	I have been short of breath.....	0	1	2	3	4
Cx6	I am bothered by constipation.....	0	1	2	3	4
BL2	I urinate more frequently than usual	0	1	2	3	4
En2	I have discomfort or pain in my pelvic area.....	0	1	2	3	4