

FACT-P (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.**

<u>PHYSICAL WELL-BEING</u>		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

<u>SOCIAL/FAMILY WELL-BEING</u>		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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ADDITIONAL CONCERNS

		Not at all	A little bit	Somewhat	Quite a bit	Very much
C2	I am losing weight	0	1	2	3	4
C6	I have a good appetite.....	0	1	2	3	4
P1	I have aches and pains that bother me.....	0	1	2	3	4
P2	I have certain parts of my body where I experience pain	0	1	2	3	4
P3	My pain keeps me from doing things I want to do.....	0	1	2	3	4
P4	I am satisfied with my present comfort level	0	1	2	3	4
P5	I am able to feel like a man	0	1	2	3	4
P6	I have trouble moving my bowels	0	1	2	3	4
P7	I have difficulty urinating.....	0	1	2	3	4
BL2	I urinate more frequently than usual.....	0	1	2	3	4
P8	My problems with urinating limit my activities.....	0	1	2	3	4
BL5	I am able to have and maintain an erection.....	0	1	2	3	4