PROactive Questionnaire

Please complete the survey below.

Thank you!

By physical activity we refer to any activities in which you need to move your body. Examples include: household activities, hiking, going to work, or getting dressed. Think of all the activities you do, not only on these examples. We would like to know how you experience your physical activity IN THE PAST 7 DAYS Please choose the answer that best applies to you IN THE PAST 7 DAYS. There are no wrong answers. 1. In the past 7 days, how much walking did you do None at all outside? ○ A little bit (about 10 minutes every day) Some (about 30 minutes every day) ○ A great deal (more than 1 hour every day) 2. In the past 7 days, how many chores did you do ○ None at all outside the house? Some examples are gardening, A few taking the rubbish out, or doing small errands. Some A lot ○ A large amount 3. In the past 7 days, how much difficulty did you O None at all have getting dressed? ○ A little bit Some O A lot A great deal 4. In the past 7 days, how much difficult did you None at all ○ A little bit have getting out and about? Some \bigcirc A lot A great deal ○ None at all 5. In the past 7 days, how often did you avoid doing ○ Rarely activities because of your health problems? ○ Sometimes Frequently All the time ○ None at all 6. In the past 7 days, how breathless were you in ○ A little bit general during your activities?



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ModeratelyVeryExtremely

7. In the past 7 days, how often did you lack physical strength to do things because of your health problems?	None at allRarelySometimesFrequentlyAll the time
8. In the past 7 days, how tired were you in general during your activities?	None at allA little bitModeratelyVeryExtremely
9. In the past 7 days, how often did you need to take breaks during your physical activities?	None at allRarelySometimesFrequentlyAll the time
10. In the past 7 days, how breathless were you when walking on level ground indoors and outdoors?	○ None at all○ A little bit○ Moderately○ Very○ Extremely
11. In the past 7 days, how much time did you need to recover from your physical activities?	○ None at all○ A little bit○ Some○ A lot○ A great deal
12. In the past 7 days, did you need to consider your health problems when you planned your activities? Examples are a trip out, an appointment or expecting visitors.	 No A little bit Sometimes A lot A great deal

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