

**HUI23S4E.40Q**  
HEALTH UTILITIES INDEX<sup>®</sup> MARK 2 AND MARK 3 (HUI2/3)  
40-ITEM QUESTIONNAIRE FOR  
INTERVIEWER-ADMINISTERED, SELF-ASSESSED  
"FOUR WEEK" HEALTH STATUS ASSESSMENT

The next set of questions ask about various aspects of your health. When answering these questions we would like you to think about your health and your ability to do things on a day-to-day basis, during the past four weeks. To define the 4 week period, please think about what the date was 4 weeks ago and recall the major events that you have experienced during this period. Please focus your answers on your abilities, disabilities and how you have felt during the past 4 weeks.

You may feel that some of these questions do not apply to you, but it is important that we ask the same questions of everyone. Also, a few questions are similar; please excuse the apparent overlap and answer each question independently.

All information you provide is confidential. There are no right or wrong answers; what we want is your opinion about your abilities and feelings.

**Interviewer:**

**For each question, read the entire sentence as written on the left-hand side of the page following the question number, emphasizing the underlined words, if any. Do not read the response options listed down the right-hand margin of the page except if listed as part of the question (e.g., Q26, Q31, etc.). Do not read the "Don't know" and "Refused" options. Encourage respondents to answer each question to the best of their recollection. The answer given by the respondent to each question should be clearly marked beside the one appropriate answer listed in the right side of the question pages.**

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**VISION**

- |   |   |
|---|---|
| 1. During the past 4 weeks, have you been able to see well enough to read ordinary newsprint <u>without</u> glasses or contact lenses?                            | <input type="radio"/> Yes → <b>Go to 4</b><br><input type="radio"/> No<br><input type="radio"/> Don't know<br><input type="radio"/> Refused   |
| 2. Have you been able to see well enough to read ordinary newsprint <u>with</u> glasses or contact lenses?  | <input type="radio"/> Yes → <b>Go to 4</b><br><input type="radio"/> No<br><input type="radio"/> Don't know / Didn't wear glasses or contact lenses<br><input type="radio"/> Refused |
| 3. During the past 4 weeks, have you been able to see at all?   | <input type="radio"/> Yes<br><input type="radio"/> No → <b>Go to 6</b><br><input type="radio"/> Don't know<br><input type="radio"/> Refused   |
| 4. During the past 4 weeks, have you been able to see well enough to recognize a friend on the other side of the street <u>without</u> glasses or contact lenses? | <input type="radio"/> Yes → <b>Go to 6</b><br><input type="radio"/> No<br><input type="radio"/> Don't know<br><input type="radio"/> Refused   |

5. Have you been able to see well enough to recognize a friend on the other side of the street with glasses or contact lenses?
- Yes
  - No
  - Don't know / Didn't wear glasses or contact lenses
  - Refused

### HEARING

6. During the past 4 weeks, have you been able to hear what is said in a group conversation with at least three other people without a hearing aid?
- Yes → Go to 11
  - No
  - Don't know
  - Refused
7. Have you been able to hear what is said in a group conversation with at least three other people with a hearing aid?
- Yes → Go to 9
  - No
  - Don't know / Didn't wear a hearing aid
  - Refused
8. During the past 4 weeks, have you been able to hear at all?
- Yes
  - No → Go to 11
  - Don't know
  - Refused
9. During the past 4 weeks, have you been able to hear what is said in a conversation, with one other person, in a quiet room without a hearing aid?
- Yes → Go to 11
  - No
  - Don't know
  - Refused
10. Have you been able to hear what is said in a conversation with one other person, in a quiet room, with a hearing aid?
- Yes
  - No
  - Don't know / Didn't wear a hearing aid
  - Refused

### SPEECH

11. During the past 4 weeks, have you been able to be understood completely when speaking your own language with people who do not know you?
- Yes → Go to 16
  - No
  - Don't know
  - Refused
12. Have you been able to be understood partially when speaking your own language with people who do not know you?
- Yes
  - No
  - Don't know
  - Refused
13. During the past 4 weeks, have you been able to be understood completely when speaking with people who know you well?
- Yes → Go to 16
  - No
  - Don't know
  - Refused

14. Have you been able to be understood partially when speaking with people who know you well?  Yes → **Go to 16**  
 No  
 Don't know  
 Refused
15. During the past 4 weeks, have you been able to speak at all?  Yes  
 No  
 Don't know  
 Refused

### GETTING AROUND

16. During the past 4 weeks, have you been able to bend, lift, jump and run without difficulty and without help or equipment of any kind?  Yes → **Go to 24**  
 No  
 Don't know  
 Refused
17. Have you been able to walk around the neighbourhood without difficulty and without help or equipment of any kind?  Yes → **Go to 24**  
 No  
 Don't know  
 Refused
18. Have you been able to walk around the neighbourhood with difficulty but without help or equipment of any kind?  Yes → **Go to 24**  
 No  
 Don't know  
 Refused
19. During the past 4 weeks, have you been able to walk at all?  Yes  
 No → **Go to 22**  
 Don't know  
 Refused
20. Have you needed mechanical support, such as braces or a cane or crutches, to be able to walk around the neighbourhood?  Yes  
 No  
 Don't know  
 Refused
21. Have you needed the help of another person to walk?  Yes  
 No  
 Don't know  
 Refused
22. Have you needed a wheelchair to get around the neighbourhood?  Yes  
 No  
 Don't know  
 Refused
23. Have you needed the help of another person to get around in the wheelchair?  Yes  
 No  
 Don't know  
 Refused

## HANDS AND FINGERS

24. During the past 4 weeks, have you had the full use of both hands and ten fingers?  Yes → **Go to 28**  
 No  
 Don't know  
 Refused
25. Have you needed the help of another person because of limitations in the use of your hands or fingers?  Yes  
 No → **Go to 27**  
 Don't know  
 Refused
26. Have you needed the help of another person with some tasks, most tasks, or all tasks?  Some tasks  
 Most tasks  
 All tasks  
 Don't know  
 Refused
27. Have you needed special equipment, for example, special tools to help with dressing or eating, because of limitations in the use of your hands or fingers?  Yes  
 No  
 Don't know  
 Refused

## SELF-CARE

28. During the past 4 weeks, have you been able to eat, bathe, dress and use the toilet without difficulty?  Yes → **Go to 31**  
 No  
 Don't know  
 Refused
29. Have you needed the help of another person to eat, bathe, dress or use the toilet?  Yes  
 No  
 Don't know  
 Refused
30. Have you needed special equipment or tools to eat, bathe, dress or use the toilet?  Yes  
 No  
 Don't know  
 Refused

## FEELINGS

31. During the past 4 weeks, have you been feeling happy or unhappy?  Happy  
 Unhappy → **Go to 33**  
 Don't know  
 Refused
32. Would you describe yourself as having felt:  
a) happy and interested in life, or  
b) somewhat happy?  a) → **Go to 34**  
 b) → **Go to 34**  
 Don't know  
 Refused

33. Would you describe yourself as having felt:
- a) somewhat unhappy,
  - b) very unhappy, or
  - c) so unhappy that life is not worthwhile?
34. During the past 4 weeks, did you ever feel fretful, angry, irritable, anxious or depressed?
35. How often did you feel fretful, angry, irritable, anxious or depressed:  
Rarely, occasionally, often, or almost always?
36. During the past 4 weeks, did you feel extremely fretful, angry, irritable, anxious or depressed; to the point of needing professional help?

- a
  - b
  - c
  - Don't know
  - Refused
- Yes
  - No → **Go to 37**
  - Don't know
  - Refused
- Rarely
  - Occasionally
  - Often
  - Almost always
  - Don't know
  - Refused
- Yes
  - No
  - Don't know
  - Refused

#### MEMORY

37. How would you describe your ability to remember things, during the past 4 weeks:
- a) able to remember most things,
  - b) somewhat forgetful,
  - c) very forgetful,
  - d) unable to remember anything at all?

- a
- b
- c
- d
- Don't know
- Refused

#### THINKING

38. How would you describe your ability to think and solve day to day problems, during the past 4 weeks:
- a) able to think clearly and solve problems,
  - b) had a little difficulty,
  - c) had some difficulty,
  - d) had a great deal of difficulty,
  - e) unable to think or solve problems?

- a
- b
- c
- d
- e
- Don't know
- Refused

#### PAIN AND DISCOMFORT

39. Have you had any trouble with pain or discomfort, during the past 4 weeks?

- Yes
- No → **Go to 41**
- Don't know
- Refused

40. How many of your activities, during the past 4 weeks, were limited by pain or discomfort: none, a few, some, most, all?
- None
  - A few
  - Some
  - Most
  - All
  - Don't know
  - Refused
41. Overall, how would you rate your health during the past 4 weeks:
- a) excellent,
  - b) very good,
  - c) good,
  - d) fair,
  - e) poor?
- a
  - b
  - c
  - d
  - e
  - Don't know
  - Refused

**Thank you. That ends this set of questions.**