		l	ICIQ-LTC	qol 12/12	2				
Initia	al number	C	ONFIDEN	NTIAL		D	_	NTH	YEAF
	Li	iving with	a lon	g term	cath	eter	Today	's date	•
it ne	s form can be filled in by a capeds to be your own opinions person with the catheter the	s about you	ır cathet	er (not	theirs).	. We have	used " <b>yoเ</b>		
Ple	ase could you tell us who	is answeri	ng the c	questio	nnaire	by tickin	g the box	:	
C	Catheter user 1 Car	er 2	Family	memb	er/frier	nd 3	Other [	4	
1.	Is the catheter user (tick one	e):			ŀ	Female	Mal	e	
2.	Please write in the catheter	user's age:	:						
3.	What type of catheter do	you <u>currer</u>	ntly have	? (Tick	one bo	x)			
			ure	•		the legs/intubic (into th	•	· —	1 2
4a.	one box)	in your cat	at all) an			mos a eal) 9 <b>10</b>	g and bag) neveloccasionall sometime of the time	r	4 3 2 1 0
5a.	. How much does this bot	her you?			•	mos a	neve occasionall sometime of the time	y	0 1 2 3 4
	Please ring a number betw	ween 0 (not a	,	d 10 (a g 6 7	great de 8	eal) 9 <b>10</b>			
	not at all	2 3 2	<del>,</del> ວ	υ /	0	-	eat deal		

6a.	Is the possibility of the catheter blocking on your mind? (Tick one box)										
										•	never 0
											occasionally 1
											sometimes 2
											most of the time 3
											all of the time 4
6b.	How much does thi Please ring a numbe		-		ot at a	all) ar	nd 10	(a gi	reat c	leal)	
	0	1	2	3	4	5	6	7	8	9	10
	not at all										a great deal
7.	How problematic is	VOUR	cath	otor'	2 /Ti/	ck on	o hov	<u>ر ا</u>			
/.	now problematic is	youi	Cali	ietei	: (110	JK OII		<b>X</b> )			problem free 0
						sc	ome p	oroble	ems t	out I v	vould rather keep it 1
							so	ome p	oroble	ems b	out I have to keep it 2
											lots of problems 3
8a.	_				ctior	ns' th	at m	ake y	you f	eel u	nwell or require you to
	take antibiotics? (7	ick on	ie bo	x)						sever	al times per month 5
											bout once a month 4
											e every 2-3 months 3
											ple of times a year 2
										les	s than once a year 1
											never 0
8b.	How much does thi Please ring a numbe				nt at a	all) ar	nd 10	) (a a	roat c	laal)	
	Tiease fing a numbe	i DGIV	VCCII	O (IIC	naic	an) ai	iu io	(a gi	icai c	icai)	
	<b>0</b> not at all	1	2	3	4	5	6	7	8	9	<b>10</b> a great deal
	not at an										
9a.	Does your catheter	caus	e vo	u to v	vorry	v abo	ut sı	mell?	? (Tic	k one	box)
	<b>,</b>		,			,			,		never 0
											occasionally1
											sometimes 2
											most of the time 3
		_	_								all of the time 4
9b.	How much does thing Please ring a number				ot at a	all) ar	nd 10	(a g	reat c	leal)	
	0	1	2	3	4	5	6	7	8	9	10
	not at all										a great deal

10a.	Are you embarrasse	d by havi	ing a cath	neter? (7	īck one	box)	
							never 0
							occasionally 1
							sometimes 2
							most of the time 3
							all of the time 4
10b.	How much does this Please ring a number			all) and 1	0 (a gr	eat deal)	
	0	1 2	3 4	5 6	7	8 9	10
	not at all						a great deal
11a.	Do you feel you have	e adapted	d to life w	ith a cat	heter?	(Tick one	
							not at all 4
							not really 3
							somewhat 2
							mostly 1
							completely 0
11b.	How much does this Please ring a number			all) and 1	0 (a gr	eat deal)	
	<b>0</b> not at all	1 2	3 4	5 6	7	8 9	10 a great deal
11c.	Please provide further	details	if you wo	uld like			
	·						
12a.	Overall, how much on Please ring a number catheter is bad)						y life? I) and 10 (overall having a
	<b>0</b> overall good	1 2	3 4	5 6	7	8 9	<b>10</b> overall bad
		Catheter	function	and con	cern so	ore: sum	scores 4a-12a

## **Lifestyle impact**

13.	Does your catheter affect your ability to travel? (Tick one box)  I don't travel but for other reasons  5
	I don't travel because of my catheter 4
	the catheter limits my ability to travel 3
	the catheter has helped my ability to travel 1
14.	Does your catheter affect your social activities (for example, going out for a meal)? (Tick
	one box)  I don't take part in social activities but for other reasons 5
	I don't take part in social activities because of my catheter 4
	the catheter limits my ability to take part in social activities 3
	the catheter has no effect on my social activities 2
	the catheter has helped my ability to take part in social activities 1
	<u> </u>
15.	Does your catheter affect your ability to go out of the house? (Tick one box)
	I don't go out but for other reasons 5
	I don't go out because of my catheter 4
	the catheter limits my ability to go out 3
	the catheter has no effect on my ability to go out 2
	the catheter has helped me to go out1
	Lifestyle impact score: sum scores 13-15
<u>Uns</u>	scored items
16a.	Do you use pads as well as your catheter because of your bladder? (Tick one box)
	never 0
	occasionally 1
	sometimes 2
	most of the time 3
16b.	all of the time 4 <b>How much does using pads because of leaks bother you?</b> Please ring a number between 0 (not at all) and 10 (a great deal)
	<b>0</b> 1 2 3 4 5 6 7 8 9 <b>10</b>
	not at all a great deal

17a.	Does your catheter	caus	se yo	u any	y pai	n, dis	scom	fort	or so	rene	ss? (Tick all that apply)
											never 0
											occasionally 1
											sometimes 2
											most of the time 3
											always 4
17b.	How much does the Please ring a number			-		all) ai	nd 10	) (a a	reat d	leal)	
	Thouse Ting a Hambe	), DOI	.,,,	·	or ar	,		, (a g		,	
	<b>0</b> not at all	1	2	3	4	5	6	7	8	9	<b>10</b> a great deal
	not at all										a great deal
18a.	Do you experience	any	blado	der sp	pasm	ı (tigi	hteni	ng o	f the	blado	der when you don't want it
	to)? (Tick one box)										novor
											never 0
											occasionally 1
											sometimes 2
											most of the time 3
											always 4
18b.	How much does th	is bo	ther	you?							·
18b.	How much does the Please ring a number					all) ai	nd 10	) (a g	reat d	leal)	, <u>—</u>
18b.						all) aı 5	nd 10 6	) (a g 7	reat d	leal) 9	10
18b.	Please ring a numbe	er bet	weer	0 (no	ot at	,		. •		•	10 a great deal
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	_
18b.	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	_
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	a great deal
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	a great deal  never 0
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	a great deal  never 0  occasionally 1
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	never 0 occasionally 1 sometimes 2
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9	never 0 occasionally 1 sometimes 2 most of the time 3
	Please ring a numbe	er bet 1	ween 2	3	ot at	5	6	7	8	9 box)	never 0 occasionally 1 sometimes 2 most of the time 3 all of the time 4
	Please ring a number of not at all  Does having a cath	1 eter	2 preven	3 ent se	4 exua	5 I acti	6 vity?	7	8 cone	9 box)	never 0 occasionally 1 sometimes 2 most of the time 3 all of the time 4 not applicable 8
19a.	Please ring a number 0 not at all	1 eter	2 preven	3 ent se	4 exua	5 I acti	6 vity?	7	8 cone	9 box)	never 0 occasionally 1 sometimes 2 most of the time 3 all of the time 4 not applicable 8
19a.	Please ring a number of not at all  Does having a cath	1 eter	2 preven	3 ent se	4 exua	5 I acti	6 vity?	7	8 cone	9 box)	never 0 occasionally 1 sometimes 2 most of the time 3 all of the time 4 not applicable 8

20. How does the cost of the following in relation to your catheter impact on your quality of life: a. Nursing services
b. Consumables for catheter care (garbage bags, cleaning products, odour products)
c. Associated factors for catheter management (food, cranberry juice, catheter friendly clothing, antibiotics, medications in general, vitamins and minerals).
21. What impact has your catheter on your psychological well-being?
22. Has your catheter changed your perception of your body image?
Thank you very much for answering these questions.