

4 Quite a bit

4 Quite a bit

3 Moderately



movement

0 No - Not present

		Pelvic Floor [Disability Index (PFDI	– 20)			
PATIENT NAME:				DATE OF BIRTH:			
Instructions: Please answer all the questions in the survey below. These questions will ask you if you have certain bowel, bladder, or pelvic symptoms and, if you do, how much do they bother you. While answering these questions, please consider your symptoms over the last three months. The PFDI – 20 has 20 items and 3 scales of your symptoms.							
Pelvic Organ prolapse Distress Inventory 6 (POPDI - 6)							
<u>DO</u> 1.	YOU Usually experience press 0 No - Not present	ure in the lower ab 1 Not at all	odomen 2 Somewhat	3 Moderately	4 Quite a bit		
2	Usually experience heavi 0 No - Not present	ness or dullness in 1 Not at all	the pelvic area 2 Somewhat	3 Moderately	4 Quite a bit		
3	Usually have a bulge or so 0 No – Not present	omething falling ou 1 Not at all		eel in your vaginal are 3 Moderately	ea 4 Quite a bit		
4	Ever need to push on the 0 No - Not present	vagina or around 1 Not at all	the rectum to have or 2 Somewhat	complete a bowel mov 3 Moderately	vement 4 Quite a bit		
5	Usually experience a feel 0 No – Not present	ing of incomplete 1 Not at all	bladder emptying 2 Somewhat	3 Moderately	4 Quite a bit		
6	Ever need to push up on 0 No - Not present		inal area with your finge 2 Somewhat	er to start or complete 3 Moderately	e urination 4 Quite a bit		
Colorectal - Anal distress Inventory 8 (CRAD - 8)							
DC	YOU						
	Feel you need to strain to 0 No - Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit		
8.	Feel you have not comple 0 No - Not present			a bowel movement 3 Moderately	4 Quite a bit		
9.	Usually lose stool beyond 0 No - Not present			3 Moderately	4 Quite a bit		
10.	Usually lose stool beyond			3 Model ately	4 Quite a bit		
	0 No - Not present Usually lose gas from the	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit		
	O No - Not present Usually have pain when y	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit		
	O No - Not present Experience a strong sens	1 Not at all	2 Somewhat	3 Moderately m to have a bowel mo	4 Quite a bit evement		

Be sure to scroll to the 2nd page

2 Somewhat

0 No - Not present 1 Not at all 2 Somewhat 3 Moderately

14. Does part of your bowel ever pass through the rectum & bulge outside during or after a bowel

1 Not at all

Urinary distress Inventory 6 (UDI - 6)

DO YOU								
15. Usually experience frequent urination								
0 No – Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				
16. Usually experience urine leakage associated with a feeling of urgency, that is, a strong sensation of								
needing to go to the bathroom								
0 No – Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				
17. Usually experience urine leakage related to coughing, sneezing or laughing								
0 No - Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				
18. Usually experience small amounts of urine leakage (that is, drops)								
0 No - Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				
19. Usually have trouble emptying your bladder								
0 No - Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				
20. Usually experience pain or discomfort in the lower abdomen or genital area								
0 No – Not present	1 Not at all	2 Somewhat	3 Moderately	4 Quite a bit				