## • Questionnaire for Hemodialysis Patients

Below are statements for you to describe your feelings right now, in the moment as you complete the questionnaire. Six numbers are provided for each question. Please circle the number you think most closely matches your feelings. Below is an example:

Strongly Agree Disagree 6

I am glad I can fill out this questionnaire. 6 5 4 3 2 1

- 1. My body is relaxed right now. 6 5 4 3 2 1
- 2. I feel useful because I'm working hard. 6 5 4 3 2 1
- 3. I have enough privacy. 6 5 4 3 2 1
- 4. There are those I can depend on when I need help 6 5 4 3 2 1
- 5. I don't want to exercise. 6 5 4 3 2 1
- 6. My condition gets me down. 6 5 4 3 2 1
- 7. I feel confident. 6 5 4 3 2 1
- 8. I feel dependent on others. 6 5 4 3 2 1
- 9. I feel my life is worthwhile right now. 6 5 4 3 2 1
- 10. I am inspired by knowing that I am loved. 6 5 4 3 2 1
- 11. These surroundings are pleasant. 6 5 4 3 2 1
- 12. The sounds keep me from resting. 6 5 4 3 2 1
- 13. No one understands me. 6 5 4 3 2 1
- 14. My pain is difficult to endure. 6 5 4 3 2 1
- 15. I am inspired to do my best. 6 5 4 3 2 1
- 16. I am unhappy when I am alone. 6 5 4 3 2 1
- 17. My faith helps me to not be afraid. 6 5 4 3 2 1
- 18. I do not like it here. 6 5 4 3 2 1
- 19. I am swollen right now. 6 5 4 3 2 1
- 20. I do not feel healthy right now. 6 5 4 3 2 1
- 21. This room makes me feel scared. 6 5 4 3 2 1
- 22. I am afraid of what is next. 6 5 4 3 2 1
- 23. I have a favorite person(s) who makes me feel cared for 6 5 4 3 2 1
- 24. I have experienced changes which make me feel uneasy. 6 5 4 3 2 1
- 25. I am hungry. 6 5 4 3 2 1
- 26. I would like to see my doctor more often. 6 5 4 3 2 1
- 27. he temperature in this room is fine. 6 5 4 3 2 1
- 28. I feel very tired. 6 5 4 3 2 1
- 29. I can rise above my pain. 6 5 4 3 2 1
- 30. The mood around here uplifts me. 6 5 4 3 2 1
- 31. I am content. 6 5 4 3 2 1
- 32. This chair (bed) makes me hurt. 6 5 4 3 2 1
- 33. The view inspires me. 6 5 4 3 2 1
- 34. I am thirsty 6 5 4 3 2 1
- 35. I feel out of place here. 6 5 4 3 2 1
- 36. I feel good enough to walk. 654321
- 37. My friends remember me with their cards and phone calls. 6 5 4 3 2 1
- 38. My beliefs give me peace of mind. 6 5 4 3 2 1
- 39. I need to be better informed about my health. 6 5 4 3 2 1
- 40. I feel out of control. 6 5 4 3 2 1
- 41. I feel crummy because I am bored. 6 5 4 3 2 1
- 42. This room smells terrible. 6 5 4 3 2 1
- 43. I am alone, but not lonely. 6 5 4 3 2 1
- 44. I feel peaceful. 6 5 4 3 2 1
- 45. I am depressed. 6 5 4 3 2 1
- 46. I have found meaning in my life. 6 5 4 3 2 1
- 47. It is easy to get around here. 6 5 4 3 2 1
- 48. I need to feel good again. 6 5 4 3 2 1

50. What w	ould make the t	reatment plan mo	ore comfortable fo	r you?	



Dr. Karen M. Estridge
Assistant Professor
Assessment Coordinator
College of Nursing and Health Sciences
1020 S. Trimble Road, Mansfield OH 44906
(w) 419.521.6876 | (c) 419.563.4263
kestridg@ashland.edu