

Patient Incontinence Impact Questionnaire

Some people find that accidental urine loss may affect their activities, relationships, and feelings. The questions below refer to areas in your life that may have been influenced or changed by your problem. For each question, circle the response that best describes how much your activities, relationships, and feelings are being affected by urine leakage.

How much has urine leakage affected your:

Ability to do household chores (cooking, housecleaning, laundry)?

Not at All **Slightly** **Moderately** **Greatly**

Physical recreation such as walking, swimming, or other exercise?

Not at All **Slightly** **Moderately** **Greatly**

Entertainment activities (movies, concerts, etc.)?

Not at All **Slightly** **Moderately** **Greatly**

Ability to travel by car or bus more than 30 minutes from home?

Not at All **Slightly** **Moderately** **Greatly**

Participation in social activities outside your home?

Not at All **Slightly** **Moderately** **Greatly**

Emotional health (nervousness, depression, etc.)?

Not at All **Slightly** **Moderately** **Greatly**

Does leakage have you feeling frustrated?

Not at All **Slightly** **Moderately** **Greatly**

SOURCE: The questions in PPE's Patient Incontinence Impact Questionnaire are based on those in the incontinence impact questionnaire and the urogenital distress inventory. See Uebersax, J.S., Wyman, J. F., Shumaker, S. A., McClish, D. K., Fantl, J. A., & the Continence Program for Women Research Group. (1995). Short forms to assess life quality and symptom distress for urinary incontinence in women: *Neurourology and Urodynamics*, 14, 131-139.