**Catquest-9SF 2011 Questionnaire**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The aim of this questionnaire is to establish what difficulties you have in your daily life due to impaired sight.

The questionnaire contains questions about your difficulties due to impaired sight in connection with certain everyday tasks. If you use glasses for distance and/or close-up purposes, the questions are about what it is like when you use your best glasses.

The questions in this questionnaire apply to your situation during the past 4 weeks.

**When you answer the questions** you must try to think only of the difficulties that your sight may be causing you. We appreciate that it may be difficult to decide just what your sight means to you if you also have other problems such as joint pains or dizziness for example. We would still ask you to try to answer how important you think your sight is in your ability to perform the following tasks

1. **Do you find that your sight at present in some way causes you difficulty in your everyday life?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Yes, very  great difficulty | Yes, great difficulty | Yes, some difficulty | No, no difficulty | Cannot decide |
|  |  |  |  |  |

1. **Are you satisfied or dissatisfied with your sight at present?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very dissatisfied | Fairly  dissatisfied | Fairly  satisfied | Very  satisfied | Cannot decide |

1. **Do you have difficulty with the following activities because of your sight?**

**If so, to what extent? In each row place just one tick in the box which you think best corresponds to your situation.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes, very  great difficulty | Yes, great difficulty | Yes, some difficulty | No, no difficulty | Cannot decide |
| Reading print in newspapers |  |  |  |  |  |
| Recognising the faces of people you meet |  |  |  |  |  |
| Seeing the prices of goods when  shopping |  |  |  |  |  |
| Seeing to walk  on uneven surfaces,  e.g. paving |  |  |  |  |  |
| Seeing to do  handicrafts,  woodwork etc. |  |  |  |  |  |
| Reading subtitles on  TV |  |  |  |  |  |
| Seeing to engage  in an activity/hobby  that you are  interested in |  |  |  |  |  |
| During at night/ glare |  |  |  |  |  |