

Date \_\_\_\_\_



Name \_\_\_\_\_ Class Site \_\_\_\_\_

### Asthma Quality of Life Survey

Thank you for filling out this survey. The items listed below are some of the ways asthma affects the lives of parents and children. Please read each item and circle whether the item is **(1) not true**, **(2) somewhat true**, or **(3) very true**, of the way your child's asthma affected you over the last two weeks.

Circle one answer (1, 2, or 3) for each item.

Item	Not True	Somewhat True	Very True
1. I can see warning signs before my child has an asthma attack.	1	2	3
2. My child does not like to take his or her asthma medication.	1	2	3
3. My child can't do without asthma sprays.	1	2	3
4. I worry about my child's asthma.	1	2	3
5. I have felt anxious or stressed from my child's asthma.	1	2	3
6. I am afraid that asthma will stunt my child's growth.	1	2	3
7. I worry that my child will have an asthma attack when I am not around.	1	2	3
8. Sometimes my child's asthma makes me angry.	1	2	3
9. I am embarrassed when other people know my child has asthma.	1	2	3
10. I blame myself for my child's asthma.	1	2	3
11. I feel frustrated with myself when my child has an asthma attack.	1	2	3
12. I know how to take care of my child's asthma.	1	2	3
13. If my child forgot his or her inhaler, it probably would make no difference.	1	2	3

14. I panic every time my child coughs or wheezes.	1	2	3
15. I believe my child's asthma medication is working.	1	2	3
16. I worry that asthma will shorten my child's life.	1	2	3
17. I worry about my child's future health because of asthma.	1	2	3
18. I sometimes feel upset that my child's asthma keeps me from doing certain things.	1	2	3
19. I expect my child will have a happy life despite his or her asthma.	1	2	3
20. My child's asthma has no effect on his or her homework or grades.	1	2	3
21. My child misses too much school because of asthma.	1	2	3
22. My child uses asthma as an excuse to get out of helping around the house.	1	2	3
23. My child uses asthma to get my attention.	1	2	3
24. My family is upset with the restrictions my child's asthma puts on them.	1	2	3
25. Often our family arguments are about my child's asthma.	1	2	3
26. My child is unable to sleep at night because of asthma.	1	2	3
27. My child has many friends to play with even though he/she has asthma.	1	2	3
28. My child can play in any sport he or she likes.	1	2	3
29. My child's asthma limits my social life.	1	2	3
30. My family is limited to going to certain places because we are afraid my child will have an asthma attack.	1	2	3
31. I feel anxious or stressed from my child's asthma.	1	2	3
32. I feel my child's asthma prevents me from getting what I want from life.	1	2	3
33. Talking with my child's doctor helps me take care of my child's asthma.	1	2	3

Thank you