



PRO-SF1: Patient Respiratory Outcomes Short-Form™ (For content review only)

The Patient Respiratory Outcomes Short-Form™ (PRO-SF1) is comprised of five multi-item scales that capture key concepts for adult and child patients with asthma/allergic rhinitis. These include patient confidence, global impact of asthma/allergic rhinitis symptoms, specific impact of allergic rhinitis symptoms, impact of key asthma symptoms for adults, impact of key asthma symptoms for children. Also included are five questions about managing asthma/allergies and the status of clinical treatment, five economic impact questions, and eight general demographic questions including length of time with the doctor.

Who is answering this survey?

How long has the patient seen this doctor for asthma or allergic rhinitis care?

How confident do you feel about:

- Doing the things needed to keep asthma/allergies under control?
- Knowing what to do if asthma/allergy symptoms become worse?
- Knowing when to seek help for problems related to asthma/allergies?
- Knowing what to do if the asthma/allergy medicine is not working?
- Knowing which doctor to call if problems arise?
- Following the plan given by the doctor?

How strongly do you agree/disagree with the following:

- Asthma/allergies are under control and well-managed.
- Having asthma/allergies has not changed the way the patient lives or the things he/she likes to do.
- Problems with asthma/allergies (coughing, loss of breath, itchy nose, red eyes) can sometimes be embarrassing.
- There are as many good asthma/allergy days as there are bad ones.
- Having asthma/allergies has never really been a big issue.
- Some days, asthma/allergies make it harder to pay attention and learn, do homework, or accomplish what needs to be done at work or home.
- I/we have learned to live with the symptoms.

During the past four weeks, how much was the patient bothered by:

- Runny nose or post nasal drip
- Stuffed/blocked nose
- Itchy nose
- Sinus pressure or pain
- Tiredness or sleepiness
- A lack of energy or feeling worn out
- Feeling of impatience or irritability

(Adult patient only) During the past four weeks, how much has the patient been:

- Troubled by episodes of shortness of breath?
- Troubled by wheezing attacks?
- Unable to breathe?
- Restricted in walking up hills or doing heavy housework because of asthma/allergies?
- Worried about present or future health because of asthma/allergies?
- Sad or depressed because of problems with asthma/allergies?
- Anxious, tense, or stressed because of problems with asthma/allergies?

(Child patient only) During the past four weeks, how often:

- Has the patient coughed during the day or night?
- Has the patient complained of shortness of breath?
- Has exertion (e.g., running) made the patient breathless?
- Have asthma/allergy symptoms interfered with the patient's life?
- Have asthma/allergies limited the patient's physical or social activities?
- Have adjustments been made to the family's life because of asthma/allergies?

Has the doctor talked about a specific plan to help keep asthma/allergy problems under control?

Which of the following statements best describes the patient's current medication status?

- The medicine is taken as the doctor suggested without changes.
- Depending on how things are going, changes are made to how much or when the medicine is taken and the doctor knows this.
- Changes are made to the medicine without the doctor's knowledge.
- The medicine is not taken on a regular basis because of inconvenience or cost.
- This is the first visit with the doctor and/or medicine has not been prescribed.

Managing Asthma/Allergies

- Are the asthma/allergy prescriptions filled regularly and kept up-to-date?
- Are follow-up appointments made on a regular basis with this doctor?
- Have any changes been made at home to help control asthma/allergies?
- Has the patient recently needed to use his/her rescue medicine more often than usual?

Who provides the majority of the asthma/allergy care?

When did the patient last see this doctor?

How many times during the past 12 months did the patient have an overnight stay at the hospital due to issues with asthma (e.g., wheezing, shortness of breath)?

How many times during the past 12 months did the patient visit the emergency room because of issues with asthma (e.g., wheezing, shortness of breath)?

Was the patient instructed by someone to go to the emergency room to seek immediate care?

During the past 12 months, did you miss any time from your paying job due to your/child's asthma/allergies?

During the past 12 months, did the patient miss any time from school due to problems asthma/allergies?