



Patient Name: _____ DOB: _____ Date: _____

UROGENITAL DISTRESS INVENTORY SHORT FORM (UDI-6)

Please answer each question by circling the best response. While answering these questions, please consider your symptoms over the last 3 months. We realize that you may not be having problems in some of these areas, but please fill out this form as completely as possible.

| Do you experience, and if so, how much are you bothered by... | Not at all | Slightly | Moderately | Greatly |
|---|------------|----------|------------|---------|
| Frequent urination | 0 | 1 | 2 | 3 |
| Leakage related to feeling of urgency | 0 | 1 | 2 | 3 |
| Leakage related to physical activity, coughing, or sneezing | 0 | 1 | 2 | 3 |
| Small amounts of leakage (drops) | 0 | 1 | 2 | 3 |
| Difficulty emptying bladder | 0 | 1 | 2 | 3 |
| Pain or discomfort in lower abdominal or genital area | 0 | 1 | 2 | 3 |

INCONTINENCE IMPACT QUESTIONNAIRE – SHORT FORM (IIQ-7)

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.

| Has urine leakage affected your... | Not at all | Slightly | Moderately | Greatly |
|--|------------|----------|------------|---------|
| 1. Ability to do household chores (cooking, housecleaning, laundry)? | 0 | 1 | 2 | 3 |
| 2. Physical recreation such as walking, swimming, or other exercise? | 0 | 1 | 2 | 3 |
| 3. Entertainment activities (movies, concerts, etc.)? | 0 | 1 | 2 | 3 |
| 4. Ability to travel by car or bus more than 30 minutes from home? | 0 | 1 | 2 | 3 |
| 5. Participation in social activities outside your home? | 0 | 1 | 2 | 3 |
| 6. Emotional health (nervousness, depression, etc.)? | 0 | 1 | 2 | 3 |
| 7. Feeling frustrated? | 0 | 1 | 2 | 3 |

Items 1 and 2 = physical activity; items 3 and 4 = travel

Item 5 = social/relationships; Items 6 and 7 = emotional health

Scoring: Item responses are assigned values of 0 for “not at all”, 1 for “slightly”, 2 for “moderately”, and 3 for “greatly”. The average score of items responded to is calculated. The average, which is multiplied by 33 1/3 to put scores on a scale of 0 to 100.

Reference: Uebersax, John S., et al. "Short forms to assess life quality and symptom distress for urinary incontinence in women: the Incontinence Impact Questionnaire and the Urogenital Distress Inventory." *Neurourology and urodynamics* 14.2 (1995): 131-139.