**Instructions:** This assessment asks how you feel about your quality of life. If you are unsure about which response to give to a question, please choose the one that appears most appropriate. This can often be your first response. Please keep in mind your standards, hopes, pleasures and concerns. We ask that you think about your life **in the last two weeks.**

1. How would you rate your quality of life?

\_1. Very poor

\_2. Poor

\_3. Neither poor nor good

\_4. Good

\_5. Very good

1. How satisfied are you with your health?

\_1.  Very dissatisfied

\_2. Dissatisfied

\_3. Neither satisfied nor dissatisfied

\_4. Satisfied

\_5. Very satisfied

*Refrain from providing the following information to participants:*

Reference:

Skevington, Suzanne M., M. Lotfy, and KA O'Connell. "The World Health Organization's WHOQOL-BREF quality of life assessment: psychometric properties and results of the international field trial. A report from the WHOQOL group." *Quality of life Research* 13.2 (2004): 299-310.

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