

Pediatric Global Health 7

Please respond to each question or statement by marking one box per row.

		Excellent	Very Good	Good	Fair	Poor
Global01R1	In general, would you say your health is:	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Global02R1	In general, would you say your quality of life is:	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Global03R1	In general, how would you rate your physical health?.....	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Global04R1	In general, how would you rate your mental health, including your mood and your ability to think?.....	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
		Never	Rarely	Sometimes	Often	Always
PedGlobal2R1	How often do you feel really sad?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
		Always	Often	Sometimes	Rarely	Never
PedGlobal5R1	How often do you have fun with friends?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
PedGlobal6R1	How often do your parents listen to your ideas?.....	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1