Please respond to each item by marking one box per row.

1. Does your health now limit you in doing vigorous activities, such as running, lifting heavy objects, participating in strenuous sports?  
   Not at all | Very little | Somewhat | Quite a lot | Cannot do
   ✗ | ✓ | ✗ | ✗ | ✗

2. Does your health now limit you in walking more than a mile?  
   Not at all | Very little | Somewhat | Quite a lot | Cannot do
   ✗ | ✓ | ✗ | ✗ | ✗

3. Does your health now limit you in climbing one flight of stairs?  
   Not at all | Very little | Somewhat | Quite a lot | Cannot do
   ✗ | ✓ | ✗ | ✗ | ✗

4. Does your health now limit you in lifting or carrying groceries?  
   Not at all | Very little | Somewhat | Quite a lot | Cannot do
   ✗ | ✓ | ✗ | ✗ | ✗

5. Does your health now limit you in bending, kneeling, or stooping?  
   Not at all | Very little | Somewhat | Quite a lot | Cannot do
   ✗ | ✓ | ✗ | ✗ | ✗
Please respond to each item by marking one box per row.

<table>
<thead>
<tr>
<th>Item</th>
<th>Without any difficulty</th>
<th>With a little difficulty</th>
<th>With some difficulty</th>
<th>With much difficulty</th>
<th>Unable to do</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Are you able to do chores such as vacuuming or yard work?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Are you able to dress yourself, including tying shoelaces and doing buttons?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Are you able to shampoo your hair?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Are you able to wash and dry your body?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Are you able to get on and off the toilet?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>