<u>Iowa Fatigue Scale (IFS)</u>

Please circle the number of the response that <u>best</u> indicates how you have felt in the *past month*.

	Not at all	A Little	Moderately	Quite a bit	Extremely
1. I feel worn out	1	2	3	4	5
2. I feel energetic	1	2	3	4	5
3. I feel slowed down in my thinking	1	2	3	4	5
4. I do quite a lot within a day	1	2	3	4	5
5. I have trouble concentrating	1	2	3	4	5
6. I feel drowsy	1	2	3	4	5
7. Physically I feel in good shape	1	2	3	4	5
8. I have low output	1	2	3	4	5
9. I have trouble with my memory	1	2	3	4	5
10. I feel rested	1	2	3	4	5
11. I can concentrate well.	1	2	3	4	5

 $\frac{Scoring}{Total} = Q1 + (6-Q2) + Q3 + (6-Q4) + Q5 + Q6 + (6-Q7) + Q8 + Q9 + (6-Q10) + (6-Q11)$

Fatigue Cut-offs for Total Score

Fatigue = 30 – 39

Severe fatigue = 40 - 55

Subscales

Cognitive = Q3 + Q5 + Q9 + (6-Q11)

Fatigue = Q1 + Q6

Energy = (6-Q2) + (6-Q7) + (6-Q10)

Productivity = (6-Q4) + Q8

Hartz AH, Bentler SE, Watson D. Measuring Fatigue Severity in Primary Care Patients. Journal of Psychosomatic Research. In press.