

Minnesota Living with Heart Failure Questionnaire

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During the past month, did your heart failure prevent you from living as you wanted by causing swelling in your ankles or legs?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you sit or lie down to rest during the day?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your walking about or climbing stairs difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your working around the house or yard difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your going places away from home difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your sleeping well at night difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your relating to or doing things with your friends or family difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your working to earn a living difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your recreational pastimes, sports or hobbies difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making your sexual activities difficult?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you eat less of the foods you like?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you short of breath?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you tired, fatigued, or low on energy?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you stay in a hospital?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by costing you money for medical care?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by giving you side effects from treatments?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you feel you are a burden to your family or friends?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you feel a loss of self-control in your life?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you worry?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making it difficult for you to concentrate or remember things?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

During the past month, did your heart failure prevent you from living as you wanted by making you feel depressed?

- 0 - No or N/A
- 1 - Very Little
- 2
- 3
- 4
- 5 - Very Much

