Gastrointestinal Diarrhea

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

In the past 7 days…

1 GISX38	How many days did you have loose or watery stools?

- ☐ 1 No days → **If No Days, go to #4**
- ☐ 2 1 day
- ☐ 3 2 days
- ☐ 4 3-5 days
- ☐ 5 6-7 days

2 GISX40	How much did having loose or watery stools interfere with your day-to-day activities?

- ☐ 1 Not at all
- ☐ 2 A little bit
- ☐ 3 Somewhat
- ☐ 4 Quite a bit
- ☐ 5 Very much

3 GISX41	How much did having loose or watery stools bother you?

- ☐ 1 Not at all
- ☐ 2 A little bit
- ☐ 3 Somewhat
- ☐ 4 Quite a bit
- ☐ 5 Very much

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In the past 7 days…

4 GISX42	How often did you feel like you needed to empty your bowels right away or else you would have an accident?

- ☐ 1 Never → **If Never, you are finished.**
- ☐ 2 One time during the past 7 days
- ☐ 3 2-6 times during the past 7 days
- ☐ 4 Often once a day
- ☐ 5 More than once a day

5 GISX43	How much did feeling you needed to empty your bowels right away interfere with your day-to-day activities?

- ☐ 1 Not at all
- ☐ 2 A little bit
- ☐ 3 Somewhat
- ☐ 4 Quite a bit
- ☐ 5 Very much

6 GISX44	How much did feeling you needed to empty your bowels right away bother you?

- ☐ 1 Not at all
- ☐ 2 A little bit
- ☐ 3 Somewhat
- ☐ 4 Quite a bit
- ☐ 5 Very much

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