Pediatric Pain Interference – Short Form 8a

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

	In the past 7 days…	**Never**	**Almost Never**	**Sometimes**	**Often**	**Almost Always**
1698bR1r	I felt angry when I had pain	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2035R1r	I had trouble doing schoolwork when I had pain	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
3793R1r	I had trouble sleeping when I had pain.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
9004r	It was hard for me to pay attention when I had pain.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2045R1r	It was hard for me to run when I had pain .	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2049R1r	It was hard for me to walk one block when I had pain	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
1703R1r	It was hard to have fun when I had pain.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2180R1r	It was hard to stay standing when I had pain	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Last Updated: 28 July 2016
© 2010-2016 PROMIS Health Organization and PROMIS Cooperative Group