Fatigue – Short Form 13a (FACIT-Fatigue)

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

	During the past 7 days…	**Not at all**	**A little bit**	**Somewhat**	**Quite a bit**	**Very much**
HI7	I feel fatigued	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
HI12	I feel weak all over	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN1	I feel listless ("washed out").....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN2	I feel tired	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN3	I have trouble starting things because I am tired.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN4	I have trouble finishing things because I am tired.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN5	I have energy	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
AN7	I am able to do my usual activities.....	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
AN8	I need to sleep during the day.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN12	I am too tired to eat	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN14	I need help doing my usual activities.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN15	I am frustrated by being too tired to do the things I want to do.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
AN16	I have to limit my social activity because I am tired.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

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