Trouble with Skin

The aim of the questionnaire is to measure how much your skin problem has affected you OVER THE LAST WEEK. Please tick ✓ one box for each question.

OVER THE LAST WEEK

1. How itchy, 'scratchy', sore or painful has your skin been?

2. How upset or embarrassed, self conscious or sad have you been because of your skin?

3. How much has your skin affected your friendships?

4. How much have you changed or worn different or special clothes/shoes because of your skin?

5. How much has your skin trouble affected going out, playing or doing hobbies?

6. How much have you avoided swimming or other sports because of your skin trouble?

Children’s Dermatology Life Quality Index

[Image of cartoon dogs]
If school time: How much did your skin affect your school work?

If holiday time: How has your skin problem interfered with your holiday plans?

How much trouble have you had because of your skin with other people calling you names, teasing, bullying, asking questions or avoiding you?

How much has your sleep been affected by your skin problem?

How much of a problem has the treatment for your skin been?

Hospital No.: 
Name: 
Age: 
Address: 

Diagnosis: 
Date: 

CDLQI SCORE: 

Illustrations © Media Resources Centre, UWC. Dec 1995

Please check that you have answered EVERY question. Thank you.