Center for Urologic and Pelvic Pain

Pain or Discomfort 1. In the last week, have you experienced any			6. How often have you had to urinate again less than two hours after you finished urinating, over
pain or discomfort in the following areas?			the last week?
pair of discornion in the rollo	Yes	No	o Not at all
a. Area between rectum and	1	0	1 Less than 1 time in 5
vagina (perineum)	r	O	2 Less than half the time
b. Labia	1	0	3 About half the time
c. Clitoris (not related to	1	O	4 More than half the time
urination)	1	0	5 Almost always
d. Below your waist in your	1	O	3 , -
pubic area	1	0	Impact of Symptoms
e. Below your waist in your	-	v	
rectal area	1	0	7. How much have your symptoms kept you from
			doing the kinds of things you would usually do,
2. In the last week, have you			over the last week?
experienced:	Yes	No	o None -
a. Pain or burning during			1 Only a little
urination?	1	0	2 Some
b. Pain or discomfort during o	r		3 A lot
after sexual climax?	1	0	
			8. How much did you think about your
3. How often have you had pain or			symptoms, over the last week?
discomfort in any of these areas over			o None
the last week?			1 Only a little
o Never			2 Some
1 Rarely			3 A lot
2 Sometimes			0
3 Often			Quality of Life
4 Usually			a If you were to spend the rost of your life with
5 Always			If you were to spend the rest of your life with your symptoms just the way they have been
. Which work or bost describ	00 110111		during the last week, how would you feel about
4. Which number best describes your AVERAGE pain or discomfort on the days that			that?
you had it, over the last week?			o Delighted
,		0 10	1 Pleased
0 1 2 3 4 5 6		PAIN AS BAD	2 Mostly satisfied

Urination

NO PAIN

5. How often have you had a sensation of not emptying your bladder completely after you finished urinating, over the last week?

AS YOU CAN

IMAGINE

o Not at all

- 1 Less than 1 time in 5
- 2 Less than half the time
- 3 About half the time
- 4 More than half the time
- 5 Almost always

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- 2 Mostly satisfied
- 3 Mixed (about equally satisfied and dissatisfied)
- 4 Mostly dissatisfied
- 5 Unhappy
- 6 Terrible

Scoring the NIH-Chronic Prostatitis Symptom Index Domains Pain: Total of items 1a, 1b, 1c,1d, 2a, 2b, 3, and 4 Urinary Symptoms: Total of items 5 and 6 Quality of Life & Impact Total of items 7, 8, and 9 -Adapted from Litwin et al. J Urol. 1999;162:369-375.