

Evaluare Postoperatorie Implant Segmentar de Coloana in Diformitati

RAPORTARE OBLIGATORIE PRIN LEGE CONFORM Ordin M.S. nr 10/2005 si Ordin M.S. 86/2006

5. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

- a. *Cut down the amount of time you spent on work or other activities*
 Yes No
- b. *Accomplished less than you would like*
 Yes No
- c. *Didn't do work or other activities as carefully as usual*
 Yes No

6. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?

- Not at all Slightly Moderately Quite a bit Extremely

7. How much bodily pain have you had during the past 4 weeks?

- Not at all Slightly Moderately Quite a bit Extremely

8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

- Not at all Slightly Moderately Quite a bit Extremely

9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks.

- a. did you feel full of pep?
 All of the time Most of the time Some of the the time A little of the time None of the time
- b. have you been a very nervous person?
 All of the time Most of the time Some of the the time A little of the time None of the time
- c. have you felt so down in the dumps nothing could cheer you up?
 All of the time Most of the time Some of the the time A little of the time None of the time
- d. have you felt calm and peaceful?
 All of the time Most of the time Some of the the time A little of the time None of the time
- e. did you have a lot of energy?
 All of the time Most of the time Some of the the time A little of the time None of the time
- f. have you felt downhearted and blue?
 All of the time Most of the time Some of the the time A little of the time None of the time
- g. did you feel worn out?
 All of the time Most of the time Some of the the time A little of the time None of the time
- h. have you been a happy person?
 All of the time Most of the time Some of the the time A little of the time None of the time
- i. did you feel tired?
 All of the time Most of the time Some of the the time A little of the time None of the time

10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

- All of the time Most of the time Some of the the time A little of the time None of the time

11. How TRUE or FALSE is each of the following statements for you?

- a. did you feel full of pep?
 All of the time Most of the time Some of the the time A little of the time None of the time
- b. have you been a very nervous person?
 All of the time Most of the time Some of the the time A little of the time None of the time
- c. have you felt so down in the dumps nothing could cheer you up?
 All of the time Most of the time Some of the the time A little of the time None of the time
- d. have you felt calm and peaceful?
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