Comprehensive Sickle Cell Centers	Pediatric Quality of Life Inventory Parent Report for Toddlers (2-4)	
Collaborative Data Project	Date Form Completed: QPT2:FORMDA / QPT2:FORMMO / QPT2:FORMYR DD MMM YYYY	CSCC ID: {subject.name} Center code: {center.name} Hospital code: {center.hospital.name}

In the past ONE month, how much of a problem has your child had with...

Physical Functioning *(problems with...)*	Never	Almost Never	Some-times	Often	Almost Always
1. Walking	☐ (QPT2:PHYF1) 0	☐ (QPT2:PHYF1) 1	☐ (QPT2:PHYF1) 2	☐ (QPT2:PHYF1) 3	☐ (QPT2:PHYF1) 4
2. Running	☐ (QPT2:PHYF2) 0	☐ (QPT2:PHYF2) 1	☐ (QPT2:PHYF2) 2	☐ (QPT2:PHYF2) 3	☐ (QPT2:PHYF2) 4
3. Participating in active play or exercise	☐ (QPT2:PHYF3) 0	☐ (QPT2:PHYF3) 1	☐ (QPT2:PHYF3) 2	☐ (QPT2:PHYF3) 3	☐ (QPT2:PHYF3) 4
4. Lifting something heavy	☐ (QPT2:PHYF4) 0	☐ (QPT2:PHYF4) 1	☐ (QPT2:PHYF4) 2	☐ (QPT2:PHYF4) 3	☐ (QPT2:PHYF4) 4
5. Bathing	☐ (QPT2:PHYF5) 0	☐ (QPT2:PHYF5) 1	☐ (QPT2:PHYF5) 2	☐ (QPT2:PHYF5) 3	☐ (QPT2:PHYF5) 4
6. Helping to pick up his or her toys	☐ (QPT2:PHYF6) 0	☐ (QPT2:PHYF6) 1	☐ (QPT2:PHYF6) 2	☐ (QPT2:PHYF6) 3	☐ (QPT2:PHYF6) 4
7. Having hurts or aches	☐ (QPT2:PHYF7) 0	☐ (QPT2:PHYF7) 1	☐ (QPT2:PHYF7) 2	☐ (QPT2:PHYF7) 3	☐ (QPT2:PHYF7) 4
8. Low energy level	☐ (QPT2:PHYF8) 0	☐ (QPT2:PHYF8) 1	☐ (QPT2:PHYF8) 2	☐ (QPT2:PHYF8) 3	☐ (QPT2:PHYF8) 4

Emotional Functioning *(problems with...)*	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling afraid or scared	☐ (QPT2:EMOF1) 0	☐ (QPT2:EMOF1) 1	☐ (QPT2:EMOF1) 2	☐ (QPT2:EMOF1) 3	☐ (QPT2:EMOF1) 4
2. Feeling sad or blue	☐ (QPT2:EMOF2) 0	☐ (QPT2:EMOF2) 1	☐ (QPT2:EMOF2) 2	☐ (QPT2:EMOF2) 3	☐ (QPT2:EMOF2) 4
3. Feeling angry	☐ (QPT2:EMOF3) 0	☐ (QPT2:EMOF3) 1	☐ (QPT2:EMOF3) 2	☐ (QPT2:EMOF3) 3	☐ (QPT2:EMOF3) 4
4. Trouble sleeping	☐ (QPT2:EMOF4) 0	☐ (QPT2:EMOF4) 1	☐ (QPT2:EMOF4) 2	☐ (QPT2:EMOF4) 3	☐ (QPT2:EMOF4) 4
5. Worrying	☐ (QPT2:EMOF5) 0	☐ (QPT2:EMOF5) 1	☐ (QPT2:EMOF5) 2	☐ (QPT2:EMOF5) 3	☐ (QPT2:EMOF5) 4

Social Functioning *(problems with...)*	Never	Almost Never	Some-times	Often	Almost Always
1. Playing with other children	☐ (QPT2:SOCF1) 0	☐ (QPT2:SOCF1) 1	☐ (QPT2:SOCF1) 2	☐ (QPT2:SOCF1) 3	☐ (QPT2:SOCF1) 4
2. Other kids not wanting to play with him or her	☐ (QPT2:SOCF2) 0	☐ (QPT2:SOCF2) 1	☐ (QPT2:SOCF2) 2	☐ (QPT2:SOCF2) 3	☐ (QPT2:SOCF2) 4
3. Getting teased by other children	☐ (QPT2:SOCF3) 0	☐ (QPT2:SOCF3) 1	☐ (QPT2:SOCF3) 2	☐ (QPT2:SOCF3) 3	☐ (QPT2:SOCF3) 4

4. Not able to do things that other children his or her age can do	☐ (QPT2:SOCF4) 0	☐ (QPT2:SOCF4) 1	☐ (QPT2:SOCF4) 2	☐ (QPT2:SOCF4) 3	☐ (QPT2:SOCF4) 4
5. Keeping up when playing with other children	☐ (QPT2:SOCF5) 0	☐ (QPT2:SOCF5) 1	☐ (QPT2:SOCF5) 2	☐ (QPT2:SOCF5) 3	☐ (QPT2:SOCF5) 4

Please complete this section if your child attends school or daycare

School Functioning ***(problems with...)***	Never	Almost Never	Some-times	Often	Almost Always
1. Doing the same school activities as peers	☐ (QPT2:SFUN1) 0	☐ (QPT2:SFUN1) 1	☐ (QPT2:SFUN1) 2	☐ (QPT2:SFUN1) 3	☐ (QPT2:SFUN1) 4
2. Missing school/daycare because of not feeling well	☐ (QPT2:SFUN2) 0	☐ (QPT2:SFUN2) 1	☐ (QPT2:SFUN2) 2	☐ (QPT2:SFUN2) 3	☐ (QPT2:SFUN2) 4
3. Missing school/daycare to go to the doctor or hospital	☐ (QPT2:SFUN3) 0	☐ (QPT2:SFUN3) 1	☐ (QPT2:SFUN3) 2	☐ (QPT2:SFUN3) 3	☐ (QPT2:SFUN3) 4

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