The Brief Illness Perception Questionnaire (Thermometer v2) © AJMitchell 2008

How much does your illness affect your life?

No effect

Severely

How much are you worried your illness will progress

Not at all worried

Extremely worried

How much control do you feel you have over your illness?

Absolutely no control

Totally in control

How much do you think your treatment can help your illness?

Not at all

Extremely helpful

How much do you experience symptoms from your illness?

No symptoms at all

Many severe symptoms

How concerned are you about your illness?

Not at all concerned

Extremely concerned

How well do you feel you understand your illness?

Don’t understand at all

Understand very clearly

How much does your illness affect you emotionally? (e.g. angry, scared, upset or depressed?)

No emotional effects

Extremely affected emotionally

Please list in rank-order the three most important factors that you believe caused your illness:

1______________ 2______________ 3______________