

For each problem below, please rate how 'bad' it has been over the last 2 weeks by circling the number on the scale →	No Problem	Very Mild Problem	Mild / Slight Problem	Moderate Problem	Severe Problem	Problem As Bad As It Can Be
Need to blow nose	0	1	2	3	4	5
Sneezing	0	1	2	3	4	5
<i>Runny nose</i>	0	1	2	3	4	5
Cough	0	1	2	3	4	5
Post-nasal discharge	0	1	2	3	4	5
Thick nasal discharge	0	1	2	3	4	5
<i>Facial pain/pressure</i>	0	1	2	3	4	5
Nasal obstruction	0	1	2	3	4	5
Loss of smell or taste	0	1	2	3	4	5
Difficulty falling asleep	0	1	2	3	4	5
Wake up at night	0	1	2	3	4	5
Lack of a good night's sleep	0	1	2	3	4	5
Wake up tired	0	1	2	3	4	5
Fatigue	0	1	2	3	4	5
Reduced productivity	0	1	2	3	4	5
Reduced concentration	0	1	2	3	4	5
Frustrated/restless/irritable	0	1	2	3	4	5
Ear fullness	0	1	2	3	4	5
Dizziness	0	1	2	3	4	5
<i>Ear pain</i>	0	1	2	3	4	5
Sad	0	1	2	3	4	5
Embarrassed	0	1	2	3	4	5

On the scale below, please circle a number to rate your overall nasal function:

-6	-5	-4	-3	-2	-1	0	+1	+2	+3	+4	+5	+6
Terrible		Bad		Poor		Neither good nor bad		Fair		Good		Excellent

On the scale below, please circle a number to rate the external appearance of your nose:

-6	-5	-4	-3	-2	-1	0	+1	+2	+3	+4	+5	+6
Terrible		Bad		Poor		Neither good nor bad		Fair		Good		Excellent