



Chronic Fatigue Syndrome/M.E. Questionnaire

Look at the following symptoms usually associated with Chronic Fatigue Syndrome/M.E. and answer Yes/No

1	Do you feel irritable/hostile?	Yes / No
2	Do you have trouble getting to sleep?	Yes / No
3	Do you have muscular tension/pain?	Yes / No
4	Are you constantly tired/fatigued?	Yes / No
5	Do you have indigestion or abdomen discomfort?	Yes / No
6	Have you withdrawn socially from others?	Yes / No
7	Do you have trouble relaxing?	Yes / No
8	Do you feel nervous?	Yes / No
9	Do you feel depressed?	Yes / No
10	Have you lost your pleasure in living?	Yes / No
11	Do you have a sore throat?	Yes / No
12	Do you have irritable bowel syndrome?	Yes / No
13	Do you have sensitivity to light?	Yes / No
14	Do you have dizziness or light-headedness?	Yes / No
15	Do you have tender lymph nodes?	Yes / No
16	Do you feel exhausted 24 hrs after exertion?	Yes / No
17	Do you have joint pain with no swelling or redness?	Yes / No
18	Do you have poor concentration?	Yes / No
19	Do you have poor short term memory?	Yes / No
20	Do You have poor and/or revitalised sleep?	Yes / No