

PCS-C

Perceived Consequences Scale Comprehensive

Instructions:

The following survey is concerned with your chronic pain. Many of the questions are common to patients experiencing persistent pain and cover a wide range of topics.

Most of the questions you will be asked require you to choose True or False, indicating if you agree or disagree with the question. Circle T for True or F for False. Do not skip any questions. For example:

I like watching sports programs on TV T F

If you agree that you like watching sports on TV, you would circle the T for True. If you disagree, you would circle the F for False.

Remember to answer all questions and be as accurate as you can

Please read the above instructions before beginning

Name (print clearly): _____

Age: _____

Date of Birth (mm/dd/yyyy): _____

Gender: (a) male (b) female

Today's Date: _____

Important: Answer each question exactly as it is written:

1. My pain is more than I can handle. T F	10. I spend a good part of my day trying to keep my pain under control. T F
2. I should have gotten better by now. T F	11. My doctors should have cured me by now. T F
3. I worry much more about my health since developing pain. T F	12. I don't think I can go on like this anymore. T F
4. My family has been largely unaffected by the problems my pain has caused. T F	13. I worry my pain will cause others to be upset. T F
5. I worry if I do not get rid of my pain, I will lose self-respect. T F	14. I am concerned if I don't get my pain under control, I will not be able to take care of my day-to-day responsibilities. T F
6. I worry I will never be the person I was before developing pain. T F	15. Ever since developing pain, I fear my health is deteriorating. T F
7. I worry my pain will negatively affect others. T F	16. I am concerned my pain is causing others to suffer. T F
8. I am concerned if I am physically active, it could cause a setback in my healing. T F	17. I worry if I don't get my pain under control, I will become depressed. T F
9. I'm concerned I'll fall apart psychologically if I don't get rid of my pain. T F	18. I worry about re-injuring myself. T F

19. I worry I won't be able to do my chores if my pain gets out of control.	T F	33. My health has been deteriorating ever since the onset of my pain.	T F
20. I might not be able to provide for others if I don't control my pain.	T F	34. My family is suffering because of my pain problem.	T F
21. I worry that everything will come to an end if I don't get rid of my pain.	T F	35. I am concerned if I exert myself physically, I am only asking for trouble since I could re-injure myself.	T F
22. I worry my pain will never settle down.	T F	36. I would do almost anything to get my pain under control.	T F
23. I worry I could lose all I've worked for if I don't get rid of my pain.	T F	37. I fear there's nothing that can be done to help me overcome my pain.	T F
24. I will never enjoy life again as long as I have pain.	T F	38. I worry when my pain increases, the rest of the day will be shot.	T F
25. My health is good even though I have pain.	T F	39. I'm worried nothing seems to be helping me.	T F
26. I worry if I don't get my pain under control, I will become irritable.	T F	40. My pain is destroying who I used to be.	T F
27. I am concerned that I might re-injure myself when I do things that increase my pain.	T F	41. My family doesn't deserve all the problems my pain has caused.	T F
28. I worry when my pain increases, it will take a long time to calm down.	T F	42. I will never be happy as long as I have pain.	T F
29. The medical treatments for my pain have been thorough and comprehensive.	T F	43. I am concerned my pain will cause me to become increasingly dependent on others.	T F
30. I fear my pain will cause me to have a nervous breakdown.	T F	44. I need to return to my former self if I ever hope to be happy again.	T F
31. I can get on with the business of living despite my pain.	T F	45. I sometimes think, "What if my pain never gets better, and I have to live like an invalid for the rest of my life?"	T F
32. I might not be able to take care of myself if I don't get my pain under control.	T F	46. I fear if I don't get rid of my pain, I will be unable to do much of anything.	T F

47. My health has been unraveling ever since the onset of my pain.	T F	63. I'm uncertain about the things I need to do to reduce my pain.	T F
48. I worry about doing something that could worsen my physical condition.	T F	64. I fear I will never get better.	T F
49. I sometimes think if the pain gets any worse, I will lose my mind.	T F	65. My future looks bright even though I have pain.	T F
50. I worry my pain will interfere with the plans or activities of others.	T F	66. I worry if I don't get my pain under control, I will become anxious.	T F
51. If I don't control my pain, I fear I might lose everything financially.	T F	67. I fear I have lost a part of me since developing pain.	T F
52. My pain problem is more than my family should have to deal with.	T F	68. I am careful not to do anything that stirs my pain up.	T F
53. I can't live with the idea I may have pain for the rest of my life.	T F	69. I am concerned that my pain will worsen.	T F
54. I believe my pain has not been adequately treated.	T F	70. I have accepted that nothing further can be done to eliminate my pain.	T F
55. I am concerned my life will never be fulfilled as long as I have pain.	T F	71. I have accepted my pain will never go away.	T F
56. I am concerned my pain will bring everyone else down.	T F	72. My doctors have tried everything possible to treat my pain problem.	T F
57. I'm concerned I'll fall apart psychologically if I do not get rid of my pain.	T F		
58. Because of pain, I'm not the person I used to be.	T F		
59. My future looks bleak if I can't get rid of my pain.	T F		
60. My doctors have left no stone unturned in their attempts to treat my pain.	T F		
61. I am in control of my life even though I have pain.	T F		
62. I do not feel that everything possible has been done medically to treat my pain.	T F		