

PCS-SF

Perceived Consequences Scale-Short-Form

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Instructions:

The following survey is concerned with how your pain has changed your life. You will be presented with a series of statements. For each statement select the one answer that best describes how much you agree or disagree with the statement. For example, if you strongly agree with an item, answer 5, 6, or 7. If you strongly disagree with an item, answer 0, 1, or 2. If you moderately agree or feel neutral about an item, answer 3 or 4.

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

Please read the above instructions before beginning

Name (print clearly): _____

Today's date: _____

Social Security #: _____

	<u>Strongly Disagree</u>							<u>Strongly Agree</u>
1. When your pain increases sharply, how concerned are you that your pain will negatively affect others?	0	1	2	3	4	5	6	7
2. When your pain increases sharply, how concerned are you that you will not accomplish anything else the rest of the day?	0	1	2	3	4	5	6	7
3. When your pain increases sharply, how concerned are you that you will physically harm yourself?	0	1	2	3	4	5	6	7
4. When your pain increases sharply, how concerned are you that you will cause a set-back in your healing?	0	1	2	3	4	5	6	7
5. When your pain increases sharply, how concerned are you that your pain will cause others to be upset?	0	1	2	3	4	5	6	7
6. When your pain increases sharply, how concerned are you that you will re-injure yourself?	0	1	2	3	4	5	6	7
7. When your pain increases sharply, how concerned are you that you will become angry?	0	1	2	3	4	5	6	7
8. When your pain increases sharply, how concerned are you that your pain will make others suffer?	0	1	2	3	4	5	6	7
9. When your pain increases sharply, how concerned are you that you will make your physical problem worse?	0	1	2	3	4	5	6	7
10. When your pain increases sharply, how concerned are you that you will become irritable?	0	1	2	3	4	5	6	7
11. When your pain increases sharply, how concerned are you that your pain will interfere with the plans or activities of others?	0	1	2	3	4	5	6	7

	<u>Strongly Disagree</u>				<u>Strongly Agree</u>			
12. When your pain increases sharply, how concerned are you that you will “lose your mind?”	0	1	2	3	4	5	6	7
13. When your pain increases sharply, how concerned are you that your pain will interfere with other activities?	0	1	2	3	4	5	6	7
14. When your pain increases sharply, how concerned are you that your pain will bring everyone else down?	0	1	2	3	4	5	6	7
15. When your pain increases sharply, how concerned are you that you will have a nervous breakdown?	0	1	2	3	4	5	6	7
16. When your pain increases sharply, how concerned are you that you will become increasingly dependent on others?	0	1	2	3	4	5	6	7
17. When your pain increases sharply, how concerned are you that your pain will not settle down?	0	1	2	3	4	5	6	7
18. When your pain increases sharply, how concerned are you that you will become depressed?	0	1	2	3	4	5	6	7
19. When your pain increases sharply, how concerned are you that your pain will get even worse?	0	1	2	3	4	5	6	7
20. When your pain increases sharply, how concerned are you that your pain will take a long time to calm down?	0	1	2	3	4	5	6	7
21. When your pain increases sharply, how concerned are you that you will lose self-respect?	0	1	2	3	4	5	6	7
22. When your pain increases sharply, how concerned are you that the rest of the day will be shot?	0	1	2	3	4	5	6	7
23. When your pain increases sharply, how concerned are you that you will become permanently disabled?	0	1	2	3	4	5	6	7
24. When your pain increases sharply, how concerned are you that you will not get anything done?	0	1	2	3	4	5	6	7