Weill Cornell Medicine

NewYork-Presbyterian Hospital
Weill Cornell Medical Center

GERD-Health Related Quality of Life Questionnaire (GERD-HRQL)

Institution: Patient ID:____________ Date__/__/

□ On PPIs □ Off PPIs If off, for how long? ____________________days / months

Scale:

0 = No symptom

1 = Symptoms noticeable but not bothersome

2 = Symptoms noticeable and bothersome but not every day

3 = Symptoms bothersome every day

4 = Symptoms affect daily activity

5 = Symptoms are incapacitating to do daily activities

Please check the box to the right of each question which best describes your experience over the past ***2 weeks***

1.	How bad is the heartburn?	□0 □1 □2 □ 3 □4 □5
2.	Heartburn when lying down?	□0 □1 □2 □ 3 □4 □5
3.	Heartburn when standing up?	□0 □1 □2 □ 3 □4 □5
4.	Heartburn after meals?	□0 □1 □2 □ 3 □4 □5
5.	Does heartburn change your diet?	□0 □1 □2 □ 3 □4 □5
6.	Does heartburn wake you from sleep?	□0 □1 □2 □ 3 □4 □5
7.	Do you have difficulty swallowing?	□0 □1 □2 □ 3 □4 □5
8.	Do you have pain with swallowing?	□0 □1 □2 □ 3 □4 □5
9.	If you take medication, does this affect your daily life?	□0 □1 □2 □ 3 □4 □5

10. How bad is the regurgitation? □0 □1 □2 □ 3 □4 □5

11. Regurgitation when lying down? □0 □1 □2 □ 3 □4 □5

12. Regurgitation when standing up? □0 □1 □2 □ 3 □4 □5

13. Regurgitation after meals? □0 □1 □2 □ 3 □4 □5

14. Does regurgitation change your diet? □0 □1 □2 □ 3 □4 □5

15. Does regurgitation wake you from sleep? □0 □1 □2 □ 3 □4 □5

16. How satisfied are you with your present condition?
□ Satisfied □ Neutral □ Dissatisfied

______________________	______________________
Administered by	Monitored by
Date (mm/dd/yy)	Date (mm/dd/yy)