

Patient's Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

ID#: \_\_\_\_\_

Test#: 1 2 3 4

### MODIFIED FATIGUE IMPACT SCALE (MFIS)

Following is a list of statements that describe how fatigue may affect a person. Fatigue is a feeling of physical tiredness and lack of energy that many people experience from time to time. In medical conditions like MS, feelings of fatigue can occur more often and have a greater impact than usual. Please read each statement carefully, and then **circle the one number** that best indicates how often fatigue has affected you in this way during the **past 4 weeks**. (If you need help in marking your responses, **tell the interviewer the number** of the best response.) **Please answer every question**. If you are not sure which answer to select, please choose the one answer that comes closest to describing you. The interviewer can explain any words or phrases that you do not understand.

Because of my fatigue during the **past 4 weeks**...

	<u>Never</u>	<u>Rarely</u>	<u>Sometimes</u>	<u>Often</u>	<u>Almost always</u>
1. I have been less alert	0	1	2	3	4
2. I have had difficulty paying attention for long periods of time.	0	1	2	3	4
3. I have been unable to think clearly.	0	1	2	3	4
4. I have been clumsy and uncoordinated.	0	1	2	3	4
5. I have been forgetful.	0	1	2	3	4
6. I have had to pace myself in my physical activities.	0	1	2	3	4
7. I have been less motivated to do anything that requires physical effort.	0	1	2	3	4

Because of my fatigue during the past 4 weeks...

	<u>Never</u>	<u>Rarely</u>	<u>Sometimes</u>	<u>Often</u>	<u>Almost always</u>
8. I have been less motivated to participate in social activities.	0	1	2	3	4
9. I have been limited in my ability to do things away from home.	0	1	2	3	4
10. I have had trouble maintaining physical effort for long periods.	0	1	2	3	4
11. I have had difficulty making decisions.	0	1	2	3	4
12. I have been less motivated to do anything that requires thinking.	0	1	2	3	4
13. My muscles have felt weak.	0	1	2	3	4
14. I have been physically uncomfortable.	0	1	2	3	4
15. I have had trouble finishing tasks that require thinking.	0	1	2	3	4
16. I have had difficulty organizing my thoughts when doing things at home or at work.	0	1	2	3	4
17. I have been less able to complete tasks that require physical effort.	0	1	2	3	4

Because of my fatigue during the past 4 weeks...

	<u>Never</u>	<u>Rarely</u>	<u>Sometimes</u>	<u>Often</u>	<u>Almost always</u>
18. My thinking has been slowed down.	0	1	2	3	4
19. I have had trouble concentrating.	0	1	2	3	4
20. I have limited my physical activities.	0	1	2	3	4
21. I have needed to rest more often or for longer periods.	0	1	2	3	4