

Patient Questionnaire Breakdown- Catquest-9SF

Patient Feedback Questions (Consultants)	Answer options
Do you find that your sight at present in some way causes you difficulty in your everyday life?	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
Are you satisfied or dissatisfied with your sight at present?	Very dissatisfied
	Fairly dissatisfied
	Fairly satisfied
	Very satisfied
	Cannot decide
Do you have difficulty with reading text in newspapers because of your sight?	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
Do you have difficulty with recognising the faces of people you meet because of your sight?	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
Do you have difficulty with seeing the prices of goods when shopping because of your sight?	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide

<p>Do you have difficulty with seeing to walk on uneven surfaces, e.g. cobblestones, because of your sight?</p>	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
<p>Do you have difficulty with seeing to do handicrafts, woodwork etc. because of your sight?</p>	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
<p>Do you have difficulty with reading subtitles on TV because of your sight?</p>	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide
<p>Do you have difficulty with seeing to engage in an activity/hobby that you are interested in because of your sight?</p>	Yes, very great difficulty
	Yes, great difficulty
	Yes, some difficulty
	No, no difficulty
	Cannot decide