

# IPSS

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**AUA Symptom Score Questionnaire:** The American Urological Association (AUA) has created this symptom index to give you and your physician an understanding of the severity of your enlarged prostate symptoms.

Question	None	Less than 1 time in 5	Less than Half the time	About half the time	More than Half the time	Almost always	Your Score
<b>Incomplete emptying:</b> Over the past month, how often have you had a sensation of not emptying your bladder completely after you finished urinating?	0	1	2	3	4	5	
<b>Frequency:</b> Over the past month, how often have you had to urinate again less than 2 hours after you finished urinating?	0	1	2	3	4	5	
<b>Intermittency:</b> Over the past month, how often have you found that you stopped and started again several times when you urinated?	0	1	2	3	4	5	
<b>Urgency:</b> Over the past month, how often you found it difficult to postpone urination?	0	1	2	3	4	5	
<b>Weak-stream:</b> Over the past month, how often have you had a weak urinary stream?	0	1	2	3	4	5	
<b>Straining:</b> Over the past month, how often have you had to push or strain to begin urination?	0	1	2	3	4	5	
<b>Nocturia:</b> Over the past month, how many times did you most typically get up to urinate from the time you went to bed at night until the time you got up in the morning?	0	1	2	3	4	5	

**Symptom Score** (Add up the points for all questions to determine the severity of your symptoms)

**Symptoms Score (Severity); 0-7(Mild), 8-19 (Moderate), 20-35 (Severe)**

**Total score**

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## Rate Your Current Satisfaction

These questions are intended to help evaluate your satisfaction with your current enlarged prostate therapy. If you are not completely satisfied, ask your doctor about other treatment options.

How much do you agree or disagree with each of the following statements about your enlarged prostate treatment? Check one answer for each.

Question	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I am completely satisfied with the symptom relief I'm getting with my current enlarged prostate symptoms.					
I do not like the idea of taking daily medications indefinitely to relieve my enlarged prostate symptoms?					
I am bothered by one or more of the side effects of enlarged prostate medications (such as lowered sexual drive, erection problems, dizziness, low blood pressure and nasal congestion).					

Are you interested in learning more about non-medication based treatment options that may improve your BPH symptom relief beyond what you are currently getting?

Yes

No

## Low Testosterone

Do you have a decrease in libido (sex drive)?

Do you have lack of energy?

Do you have a decrease in strength and/or endurance?

Have you lost weight?

Have you noticed decreased "enjoyment of life"?

Are you sad and/or grumpy?

Are your erections less strong?

Have you noticed a recent deterioration in your ability to play sports?

Are you falling asleep after dinner?

Has there been a recent decline in your work performance?