

## DEQ 5

### 1. Questions about **EYE DISCOMFORT**:

a. During a typical day in the past month, **how often** did your eyes feel discomfort?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Frequently
- 4 Constantly

b. When your eyes felt discomfort, **how intense was this feeling of discomfort** at the end of the day, within two hours of going to bed?

<u>Never</u> <u>have it</u>	<u>Not at All</u> <u>Intense</u>				<u>Very</u> <u>Intense</u>
0	1	2	3	4	5

### 2. Questions about **EYE DRYNESS**:

a. During a typical day in the past month, **how often** did your eyes feel dry?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Frequently
- 4 Constantly

b. When your eyes felt dry, **how intense was this feeling of dryness** at the end of the day, within two hours of going to bed?

<u>Never</u> <u>have it</u>	<u>Not at All</u> <u>Intense</u>				<u>Very</u> <u>Intense</u>
0	1	2	3	4	5

### 3. Question about **WATERY EYES**:

During a typical day in the past month, **how often** did your eyes look or feel excessively watery?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Frequently
- 4 Constantly

Score:  $1a + 1b + 2a + 2b + 3 = \text{Total}$   
\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_