RetDQoL

This questionnaire asks about your quality of life –

in other words, how good or bad you feel your life to be.

Please put an "X" in the box that best indicates your

response for each item.

What we would like to know is how you feel about your life

now.

I) **In general, my present quality of life is:**

- **excellent** .... ☐

- **very good** .... ☐

- **good** .... ☐

- **neither good nor bad** .... ☐

- **bad** .... ☐

- **very bad** .... ☐

- **extremely bad** .... ☐