General Functioning

In general, would you say your health BEFORE the onset of COVID was: *

☐ Excellent
☐ Very good
☐ Good
☐ Fair
☐ Poor

In general, would you say your health CURRENTLY is: *

☐ Excellent
☐ Very good
☐ Good
☐ Fair
☐ Poor

Does your health currently limit your ability to climb several flights of stairs? *

☐ Yes, limited a lot
☐ Yes, limited a little
☐ No, not limited at all
Does your health currently limit your ability to walk one block? *

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

Does your health currently limit your ability to bathe or dress yourself? *

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

During the last 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? (check all that apply) *

- Accomplished less than you would like
- Were limited in the kind of work or other activities
- Not limited

During the last 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your emotional health? (check all that apply) *

- Accomplished less than you would like
- Were limited in the kind of work or other activities
- Not limited