DePaul Symptom Questionnaire Post-Exertional Malaise 2 (DSQ-PEM-2)

1. Over the past 6 months, have you experienced post-exertional malaise, which is defined as an abnormal response to minimal amounts of physical and/or cognitive exertion, with symptom severity and duration or of proportion to the initial trigger?	ut
Yes No	
2. What were some of your triggers for post-exertional malaise? (select all that apply below)	
Minimal amounts of physical and/or cognitive exertion	
Basic activities of daily living like going to the toilet, bathing, dressing, communicating, and/or reading	ng
Positional changes (e.g., your body <i>position</i> is shifted from the lying down to standing)	
Emotional stress (good or bad)	
Chemicals	
Foods Light	
Light	
Heat	
Cold	
Noise	
Visual overload	
Watching movement (such as a video)	
Sensory overload	
Mold	
3. How long does your post-exertional malaise symptoms typically last? (select one choice below)	
I do not experience post-exertional malaise	
< 1 hour	
1–12 hours	
13–24 hours	
25–48 hours	
2 days–1 week	
1 week–1 month	
Greater than 1 month	
4. Are your typical post-exertional malaise symptoms delayed in onset? (select one choice below)	
I do not experience post-exertional malaise	
No delay in symptom onset	
1 hour or less delay	
2–23-hour delay	
1–2 days delay	
3 days or longer delay	
5. Some individuals are able to reduce or avoid post-exertional malaise by pacing, identifying warning signs decreasing, breaking up, and rescheduling activities based on available energy levels. How effective are strategies like these in avoiding or reducing post-exertional malaise? (select one choice below) Because of these types of strategies, I no longer experience post-exertional malaise	, 01
These types of strategies are moderately effective	
These types of strategies are mildly effective	
These types of strategies are barely effective	
These types of strategies are not effective	
I do not need to use these strategies as I do not have post-exertional malaise	

6. Over the <u>past 6 months</u>, indicate the frequency and severity of the following symptoms you might have experienced due to post-exertional malaise.

Symptoms	Frequency: How often do you have this symptom? For each symptom listed below, circle a number from: 0 = none of the time 1 = a little of the time 2 = about half the time 3 = most of the time 4 = all of the time					Severity: When a symptom is present, how severe is it? For each symptom listed below, circle a number from: 0 = symptom not present 1 = mild 2 = moderate 3 = severe 4 = very severe				
Reduced stamina and/or functional capacity	0	1	2	3	4	0	1	2	3	4
Physically fatigued while mentally wired	0	1	2	3	4	0	1	2	3	4
Cognitive exhaustion	0	1	2	3	4	0	1	2	3	4
Problems thinking	0	1	2	3	4	0	1	2	3	4
Unrefreshing sleep	0	1	2	3	4	0	1	2	3	4
Insomnia	0	1	2	3	4	0	1	2	3	4
Muscle pain	0	1	2	3	4	0	1	2	3	4
Muscle weakness/instability	0	1	2	3	4	0	1	2	3	4
Aches all over your body	0	1	2	3	4	0	1	2	3	4
Dizziness	0	1	2	3	4	0	1	2	3	4
Flu-like symptoms	0	1	2	3	4	0	1	2	3	4
Temperature dysregulation	0	1	2	3	4	0	1	2	3	4
Physical fatigue	0	1	2	3	4	0	1	2	3	4
Next day soreness or fatigue after non-strenuous, everyday activities	0	1	2	3	4	0	1	2	3	4
Mentally tired after the slightest effort	0	1	2	3	4	0	1	2	3	4
Physically drained or sick after mild activity	0	1	2	3	4	0	1	2	3	4
Dead, heavy feeling after starting to exercise*	0	1	2	3	4	0	1	2	3	4
Minimum exercise* makes you physically tired	0	1	2	3	4	0	1	2	3	4

^{*} You can interpret the word exercise as any daily activity you do such as even walking around in your house.