



# IEQ

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Date: \_\_\_\_\_

When injuries happen, they can have profound effects on our lives. This scale was designed to assess how your injury has affected your life.

Listed below are twelve statements describing different thoughts and feelings that you may experience when you think about your injury. Using the following scale, please indicate how frequently you experience these thoughts and feelings when you think about your injury.

**0** – never      **1** – rarely      **2** – sometimes      **3** – often      **4** – all the time

1 ☐ Most people don't understand how severe my condition is.

2 ☐ My life will never be the same.

3 ☐ I am suffering because of someone else's negligence.

4 ☐ No one should have to live this way.

5 ☐ I just want to have my life back.

6 ☐ I feel that this has affected me in a permanent way.

7 ☐ It all seems so unfair.

8 ☐ I worry that my condition is not being taken seriously.

9 ☐ Nothing will ever make up for all that I have gone through.

10 ☐ I feel as if I have been robbed of something very precious.

11 ☐ I am troubled by fears that I may never achieve my dreams.

12 ☐ I can't believe this has happened to me.

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**...Total**