Seleccione el número que describe su dolor.

1. Indique su dolor eligiendo el número que mejor describe la intensidad **media** de dolor sentido en la última semana.

\_\_0 \_\_1 \_\_2 \_\_3 \_\_4 \_\_5 \_\_6 \_\_7 \_\_8 \_\_9 \_\_10

Ningún dolor El Peor Dolor Imaginable

2) Indique el número que mejor describe la manera en que el dolor ha interferido, durante la última semana, con su capacidad de diversión

\_\_0 \_\_1 \_\_2 \_\_3 \_\_4 \_\_5 \_\_6 \_\_7 \_\_8 \_\_9 \_\_10

0 = No interfiere 10 = Interfiere por completo

3) Indique del número que mejor describe la manera en que el dolor ha interferido, durante la última semana, con su actividad en general

\_\_0 \_\_1 \_\_2 \_\_3 \_\_4 \_\_5 \_\_6 \_\_7 \_\_8 \_\_9 \_\_10

0 = No interfiere 10 = Interfiere por completo

Notes

1. To compute an overall PEG score, add the three item responses, then divide by 3 to get a final score out of 10 (mean response).
2. The final PEG score can mean very different things to different patients. The PEG score, like most other screening instruments, is most useful in tracking changes over time. The PEG score should decrease over time after therapy has begun.
3. Some studies consider each item individually as a “subscale”.

Reference

Krebs EE, Lorenz KA, Bair MJ, Damush TM, Wu J, Sutherland JM, Asch SM, Kroenke K. Development and initial validation of the PEG, a three-item scale assessing pain intensity and interference. J Gen Intern Med. 2009;24(6):733-738.

This CRF translation is based on a validated translation:

Badia X, Muriel C, Gracia A, et al. Validation of the Spanish version of the Brief Pain Inventory in patients with oncological pain [in Spanish]. Med Clin (Barc) 120 (2): 52-59, 2003.