

Patient Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Lymphedema Life Impact Scale *version 2***

Physical Concerns							
1. The amount of pain associated with my lymphedema is:	no pain	0	1	2	3	4	severe pain
2. The amount of limb heaviness associated with my lymphedema is:	no heaviness	0	1	2	3	4	extremely heavy
3. The amount of skin tightness associated with my lymphedema is:	no tightness	0	1	2	3	4	extremely tight
4. The size of my swollen limb(s) seems:	normal size	0	1	2	3	4	extremely large
5. Lymphedema affects the movement of my swollen limb(s):	normal movement	0	1	2	3	4	extremely limited
6. The strength in my swollen limb(s) is:	normal strength	0	1	2	3	4	extremely weak

Psychosocial Concerns							
7. Lymphedema affects my body image (i.e., "how I think I look").	not at all	0	1	2	3	4	completely
8. Lymphedema affects my socializing with others.	no interference	0	1	2	3	4	interferes completely
9. Lymphedema affects my intimate relations with spouse or partner (rate 0 if not applicable).	no interference	0	1	2	3	4	interferes completely
10. Lymphedema "gets me down" (i.e., depression, frustration, or anger due to the lymphedema).	never	0	1	2	3	4	constantly
11. I must rely on others for help due to my lymphedema.	not at all	0	1	2	3	4	completely
12. I know what to do to manage my lymphedema.	good understanding	0	1	2	3	4	no understanding

Functional Concerns							
13. Lymphedema affects my ability to perform self-care activities (i.e. eating, dressing, hygiene).	no interference	0	1	2	3	4	interferes completely
14. Lymphedema affects my ability to perform routine home or work-related activities.	no interference	0	1	2	3	4	interferes completely
15. Lymphedema affects my performance of preferred leisure activities.	no interference	0	1	2	3	4	interferes completely
16. Lymphedema affects the proper fit of clothing/shoes.	fits normally	0	1	2	3	4	unable to wear
17. Lymphedema affects my sleep.	no interference	0	1	2	3	4	interferes greatly

Infection Occurrence (For Reference Only- Not included in the LLIS score)						
18. In the past year, I have become ill with an infection in my swollen limb requiring oral antibiotics or hospitalization.	0x	1x	2x	3x	4x	

**LLIS IMPAIRMENT SCORE:**