

Modification of Quality of Recovery (QoR-24) Questionnaire

*Answered in visual analogue scale: 0 [none of the time] to 10 [all of the time]
'During the last 24 hours, I have been...'

Modified:

1. Able to breathe easily
2. Having normal bowel function
3. Able to enjoy food
4. Speaking normally
5. Able to think clearly
6. Able to remember things
7. Able to make decisions quickly
8. Able to take care of own hygiene
9. Able to write
10. Able to dress easily
11. Having pain in the surgical wound
12. Having nausea
13. Shivering or twitching
14. Feeling dizziness
15. Feeling restless
16. Feeling rested
17. Feeling depressed
18. Feeling lonely
19. Having anxiety
20. Sleeping well
21. Difficulties getting to sleep
22. What time did you fall asleep? What time did you wake up without going back to sleep?
23. How much do you think you have recovered? (0-100%)
24. Open ended question: 'Please describe what you are feeling (good and bad), what bothers you, and what has been helpful to your recovery'