

Lower Urinary Tract Symptoms Questionnaire

NAME:

DATE: September 12, 2018

Instructions: Please mark only one answer for each question and do not handwrite any answers. Most symptoms vary from day to day. We understand that if you check off more than one you feel that you will be providing more information about your condition. Please do not do this. Just check the box that best describes you. You will have the opportunity to discuss your symptoms in more detail with your doctor.

1. How many times do you usually urinate during the day?

- 8 or less times 9 – 10 times 11 – 12 times
 13 – 14 times 15 or more times

2. How many times do you usually urinate at night (from the time you go to bed until the time you wake up for the day)?

- 0-1 times 2 times 3 times
 4 times 5 or more times

3. What is the reason that you usually urinate?

- out of convenience (no urge or desire)
 because I have a mild urge or desire (but can delay urination for over an hour if I have to)
 because I have a moderate urge or desire (but can delay urination for more than 10 but less than 60 minutes if I have to)
 because I have a severe urge or desire (but can delay urination for less than 10 minutes)
 because I have desperate urge or desire (must stop what I am doing and go immediately)

4. Once you get the urge or desire to urinate, how long can you usually postpone it comfortably?

- More than 60 minutes About 30 – 60 minutes
 About 10 – 30 minutes A few minutes (less than 10 minutes)
 Must go immediately

5. How often do you get a sudden urge or desire to urinate that makes you want to stop what you are doing and rush to the bathroom?

- Never Rarely A few times a month
 A few times a week At least once a day

6. How often do you get a sudden urge or desire to urinate that makes you want to stop what you are doing and rush to the bathroom, but you don't get there in time (i.e. you leak urine or wet pads)?

Never Rarely A few times a month
 A few times a week At least once a day

7. How often do you experience urine leakage related to physical activity (lifting, bending, changing positions, coughing or sneezing)?

Never Rarely A few times a month
 A few times a week At least once a day

8. How often do you wet yourself, your pads or your clothes without any awareness of how or when it happened?

Never Rarely A few times a month
 A few times a week At least once a day

9. In your opinion how good is your bladder control?

Perfect control Very good Good
 Poor No control at all

10. How often do you have a sensation of not emptying your bladder completely after you finish urinating?

Never Rarely A few times a month
 A few times a week At least once a day

11. How often do you stop and start during urination?

Never Rarely A few times a month
 A few times a week At least once a day

12. How often do you have a weak urinary stream?

___ Never ___ Rarely ___ A few times a month
___ A few times a week ___ At least once a day

13. How often do you push or strain to begin urination?

___ Never ___ Rarely ___ A few times a month
___ A few times a week ___ At least once a day

14. How bothered are you by your bladder symptoms?

___ Not at all ___ A little bit ___ Somewhat bothersome
___ A lot ___ I find it intolerable

Lower Urinary Tract Symptom Score (LUTSS) – Summary

The LUTSS is a self-administered, validated, 14 Likert item questionnaire that quantitates lower urinary tract symptoms (LUTS). Each question has 5 possible answers, scored 0 to 4. The highest possible score (worst symptoms) is 56. The cutoff for normal is 14. The higher the score, the worse the symptoms.

There are two main sub-scores – the voiding symptom score and the storage symptom score.

The voiding sub-score is comprised of 4 questions, combining scores from questions 10-13. These questions refer to incomplete emptying (10), intermittency (11), slow stream (12), and straining (13). The highest possible score is 16. There is no cutoff for normal (yet).

The storage sub-score is comprised of 9 questions for a total of 36 points relating to daytime frequency (1), nighttime frequency (2), urgency (3-5), urge incontinence (6), stress urinary incontinence (7), unaware incontinence (8), and bladder control (9). It is further subdivided into an overactive bladder symptoms score (OABSS) and an incontinence score.

The OABSS is a previously validated questionnaire and measures urgency, frequency, urge incontinence, and bladder control. It is calculated based on answers to questions 1-6, and 9. An OABSS of 8 or more is indicative of overactive bladder.

The incontinence sub-score measures urge, stress, and unaware incontinence. It is calculated based on answers to questions 6-8. An incontinence score of 1 or more is indicative of incontinence.

Stress

The stress urinary incontinence (SUI) sub-score measures the severity of SUI. SUI is a type of urinary incontinence occurring during physical activity. Examples include: lifting, bending, changing positions, coughing or sneezing.

It is calculated based on the answer to question 7. A score of 1 or more is indicative of SUI and is considered abnormal.

Urge

The urge urinary incontinence (UUI) sub-score measures the severity of UUI. UUI is a type of urinary incontinence occurring when an individual has a sudden urge to urinate, but does not reach the bathroom before they lose control of their urination.

It is calculated based on the answer to question 6. A score of 1 or more is indicative of UUI and is considered abnormal.

Unaware

The unaware incontinence sub-score measures the severity of unaware incontinence. Unaware incontinence is a type of urinary incontinence occurring when an individual wets themselves without awareness of how or when it happened.

It is calculated based on the answer to question 8. A score of 1 or more is indicative of unaware incontinence and should be considered abnormal.

Nocturia

The nocturia sub-score measures the severity of nocturia. Nocturia is defined as waking up at night to urinate.

It is calculated based on the answer to question 2. A score of 2 or more is indicative of nocturia and should be considered abnormal.

Bother

The bother sub-score measures how bothered a patient is by their urinary symptoms. If a patient answers this question with a score of 2 (somewhat bothered) or more, they are considered to be significantly bothered by their urinary symptoms.

Even if the rest of the LUTSS sub-scores are normal, the source of a patient's significant bother should be determined through consultation in order to develop an appropriate treatment plan to their improve quality of life.