

This is a **Sample** version of the  
**Fatigue Symptom Inventory (FSI)**

The **full version** of the FSI comes without 'sample' watermark.

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- FSI Overview information
- FSI Scoring/ Administration instructions
- FSI Complete Questionnaire/ Assessment
- FSI Clinical Validity x 2

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# Measurement of fatigue in cancer patients: development and validation of the Fatigue Symptom Inventory

D. M. Hann,\* P. B. Jacobsen, L. M. Azzarello, S. C. Martin, S. L. Curran, K. K. Fields, H. Greenberg and G. Lyman

Psychosocial Oncology Program, (D. M. Hann, P. B. Jackson, L. M. Azzarello, S. C. Martin), Bone Marrow Transplantation Program (K. K. Fields), Radiation Oncology Program (H. Greenberg) and Medical Oncology Program (G. Lyman), H. Lee Moffit Cancer Center and Research Institute, Tampa, FL, USA; University of Kentucky Medical Center, Lexington, KY, USA (S. L. Curran)

Although fatigue is one of the most common and debilitating symptoms experienced by cancer patients, it has received little systematic attention. This situation is due in large part to the lack of adequate instruments to measure fatigue. The primary aim of this study was to validate a newly developed measure of fatigue for use with cancer patients: the Fatigue Symptom Inventory (FSI). This 13 item self-report measure was designed to measure the intensity and duration of fatigue and its impact on quality of life. The psychometric properties of the FSI were assessed in women undergoing treatment for breast cancer, women who had completed treatment for breast cancer and women with no history of cancer. A seven-item interference subscale was found to have good internal consistency, with  $\alpha$  coefficients above 0.90 in all three groups. The complete FSI was found to have rather weak to moderate test-retest reliability among patients in active treatment and healthy comparison subjects assessed on three separate occasions. Convergent validity was demonstrated using comparisons with existing measures of fatigue. Construct validity was demonstrated using comparisons between and within groups as well as comparisons with measures of anxiety and depression. Overall, the FSI was established as a valid and reliable measure of fatigue in cancer patients and healthy individuals. Suggestions are made for the potential application of the measure in clinical research.

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**Key words:** Fatigue; neoplasms.

## Introduction

Fatigue is the most frequently reported side-effect of cancer treatment.<sup>1</sup> Studies indicate that, during the course of chemotherapy, 75–100% of patients experience significant fatigue.<sup>1,2</sup> Similar prevalence rates (68–100%) have been reported in studies of patients undergoing radiotherapy.<sup>3–5</sup> The presence of fatigue in patients undergoing cancer therapy can pose several clinical problems. It can limit the doses of cancer therapies administered<sup>1</sup> and lead to problems with patient adherence to treatment regimens.<sup>6</sup> Fatigue during cancer therapy can also have significant adverse effects on patients' quality of life through its effects on mood,<sup>7–9</sup> capacities for attention and concentration,<sup>10,11</sup> and abilities to carry on usual activities.<sup>12</sup> In addition, fatigue is a prevalent and disruptive symptom following the completion of cancer treatment, interfering with patients' physical and psychosocial functioning.<sup>1,13</sup> Despite its high prevalence and clinical significance, fatigue in cancer patients is still poorly understood. The mechanisms by which cancer therapies produce fatigue remain largely unknown and effective methods of preventing or reducing fatigue have yet to be identified.<sup>5,14</sup>

A major factor that has hindered research into fatigue in cancer patients is the lack of a standardized measurement approach.<sup>15</sup> Like pain, fatigue is a complex, subjective phenomenon that can be measured only by self-report methods. Although several self-report instruments have been developed, there is general recognition that these measures have considerable methodological limitations.<sup>5,6</sup>

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# Identifying Clinically Meaningful Fatigue with the Fatigue Symptom Inventory

**Kristine A. Donovan, PhD, Paul B. Jacobsen, PhD, Brent J. Small, PhD, Pamela N. Munster, MD, and Michael A. Andrykowski, PhD**

*Health Outcomes and Behavior Program (K.A.D., P.B.J., B.J.S) and Breast Cancer Program (P.N.M.), Moffitt Cancer Center & Research Institute, Tampa, Florida; Department of Psychology (P.B.J.) and School of Aging Studies (B.J.S.), University of South Florida, Tampa, Florida; and Department of Behavioral Science (M.A.A.), University of Kentucky College of Medicine, Lexington, Kentucky, USA*

## Abstract

The Fatigue Symptom Inventory (FSI) has been used extensively to assess and measure fatigue in a number of clinical populations. The purpose of the present study was to further establish its utility by examining its operating characteristics and determining the optimal cutoff score for identifying clinically meaningful fatigue. The SF-36 Vitality scale, a measure widely used to identify individuals with significant fatigue-related disability, was used to determine the sensitivity and specificity of the FSI. Results indicate that a score of 3 or greater on those items assessing fatigue in the past week is the optimal cutoff score for identifying clinically meaningful fatigue. Individuals who scored at or above the cutoff also reported significantly greater fatigue interference, more days of fatigue on average, and fatigue a greater proportion of each day in the past week. Findings suggest that the FSI can be used to discriminate effectively between individuals with and without clinically meaningful fatigue.

## Keywords

Fatigue; Fatigue Symptom Inventory

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## Introduction

Fatigue is generally defined as a sense of persistent tiredness or exhaustion that is often distressing to the individual. It is a common symptom of many diseases, including cancer [1], neurological disorders such as multiple sclerosis [2], and psychiatric disorders such as depression [3]. Among adult cancer patients, fatigue is often the most common symptom reported [4-6]. Fatigue also is common in the general population [7,8]. One epidemiological study of working adults found that 98% reported some degree of fatigue and one in five reported substantial fatigue [9].

Fatigue is a subjective phenomenon and is thus assessed most accurately by individual self-report. To this end, researchers have published a plethora of self-report instruments designed

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# The Fatigue Symptom Inventory (FSI)

## Scoring and Administration

The Fatigue Symptom Inventory (FSI), is a 14-item self-report measure designed to assess the severity, frequency, and daily pattern of fatigue as well as its perceived interference with quality of life.

The FSI includes three items specific to **fatigue severity** in the past week. Respondents rate on 11-point scales (0 = not at all fatigued, 10 = as fatigued as I could be) their level of fatigue: 1) on average in the past week (*FSI average*), 2) on the day they felt most fatigued in the past week (FSI most), and 3) on the day they felt least fatigued in the past week (FSI least). A composite fatigue score (*FSI composite*) can be derived by calculating the average across the three severity items.

**Perceived interference** (FSI interference); is measured on separate 11-point scales (0=no...

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# FSI

For each of the following, circle the one number that best indicates how that item applies to you.

1. Rate your level of fatigue on the day you felt **most** fatigued during the past week:

0 1 2 3 4 5 6 7 8 9 10  
Not at all As fatigued  
fatigued as I could be

2. Rate your level of fatigue on the day you felt **least** fatigued during the past week:

0 1 2 3 4 5 6 7 8 9 10  
Not at all As fatigued  
fatigued as I could be

3. Rate your level of fatigue on the **average** during the past week:

0 1 2 3 4 5 6 7 8 9 10  
Not at all As fatigued  
fatigued as I could be

4. Rate your level of fatigue **right now**:

0 1 2 3 4 5 6 7 8 9 10  
Not at all As fatigued  
fatigued as I could be

**This is the end of the SAMPLE FSI questionnaire.  
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