

WHAT IS YOUR

Benign Prostatic Hyperplasia (BPH) Symptom Score?

Use this scorecard of symptoms. Circle one number in each line. Add the 7 circled numbers to get a total score, then talk to your doctor.

Over the past month...	Not at all	Less than 1 time in 5	Less than half the time	About half the time	More than half the time	Almost always
how often have you had a sensation of not emptying your bladder completely after you finished urinating?	0	1	2	3	4	5
how often have you had to urinate again less than 2 hours after you finished urinating?	0	1	2	3	4	5
how often have you found you stopped and started again several times when you urinated?	0	1	2	3	4	5
how difficult have you found it to postpone urination?	0	1	2	3	4	5
how often have you had a weak urinary stream?	0	1	2	3	4	5
how often have you had to push or strain to begin urination?	0	1	2	3	4	5
	None	1 Time	2 Times	3 Times	4 Times	5 or more times
Over the past month, how many times did you typically get up to urinate from the time you went to bed until the time you got up in the morning?	0	1	2	3	4	5

Your total symptom score:

Symptom Score: 1-7 Mild 8-19 Moderate 20-35 Severe

Name _____ DOB _____ Date _____