

# LITTLETON RADIATION ONCOLOGY

*5 West Dry Creek Circle  
Littleton, CO 80120*

Patient Name \_\_\_\_\_ Date \_\_\_\_\_

## AMERICAN UROLOGICAL ASSOCIATION (AUA) SYMPTOM INDEX

<b>AUA Symptom Score (Circle one number on each line)</b>						
<b>Questions to be answered</b>	<b>Not at all</b>	<b>Less than 1 time in 5</b>	<b>Less than half the time</b>	<b>About half the time</b>	<b>More than half the time</b>	<b>Almost Always</b>
Over the past month, how often have you had a sensation of not emptying your bladder completely after you finished urinating?	0	1	2	3	4	5
Over the past month, how often have you had to urinate again less than 2 hours after your finished urinating?	0	1	2	3	4	5
Over the past month, how often have you found you stopped and started again several times when you urinate?	0	1	2	3	4	5
Over the past month, how often have you found it difficult to postpone urination?	0	1	2	3	4	5
Over the past month, how often have you had a weak urinary stream?	0	1	2	3	4	5
Over the past month, how often have you had to push or strain to begin urination?	0	1	2	3	4	5
Over the past month, how many times did you most typically get up to urinate from the time you went to bed at night until the time you got up in the morning?	0	1	2	3	4	5
Sum of seven circled numbers ( AUA Symptom Score): _____ Scoring: Mild: 0-7 Moderate: 8-19 Severe: 20-35						

Adapted from Barry, et.al Used with permission

- References:
1. Barry MJ, Fowler FJ, O'Leary MP, et al. The American Urological Association symptom index for benign Prostatic hyperplasia. J Urol 1992;148:1549-1557
  2. Data on file. Pfizer Inc, New York, NY