

Sexual Health in Men Questionnaire

Sexual health is an important part of an individual's overall physical and emotional well-being. Erectile dysfunction(ED) also known as impotence, is a very common medical condition. Fortunately there are many different treatment options for ED. This questionnaire is designed to help you and your doctor identify if you may be experiencing erectile problems.

Each question has several possible responses. Circle the number of the response that best describes your own situation. Please be sure that you select one and only one for each question.

OVER THE PAST 6 MONTHS:

1. How do you rate your **confidence** that you could get and keep an **erection**?

None	Very Low	Low	Low Moderate	High	Very High
0	1	2	3	4	5

2. When you had **erections** with sexual stimulation, **how often** were your **erections** hard enough for penetration (entering your partner)?

No sexual activity	Almost never or never	A few times (much less than 1/2 the time)	Sometimes (about 1/2 the time)	Most times (much more than 1/2 the time)	Almost always or always
0	1	2	3	4	5

3. During sexual intercourse, **how often** were you able to maintain your **erection** after you had penetrated (entered) your partner?

Did not attempt intercourse	Almost never or never	A few times (much less than 1/2 the time)	Sometimes (about 1/2 the time)	Most times (much more than 1/2 the time)	Almost always or always
0	1	2	3	4	5

4. During sexual intercourse, **how difficult** was it to maintain your **erection** to completion of intercourse?

Did not attempt intercourse	Almost never or never	A few times (much less than 1/2 the time)	Sometimes (about 1/2 the time)	Most times (much more than 1/2 the time)	Almost always or always
0	1	2	3	4	5

5. When you attempted sexual intercourse, **how often** was it satisfactory for you?

Did not attempt intercourse	Almost never or never	A few times (much less than 1/2 the time)	Sometimes (about 1/2 the time)	Most times (much more than 1/2 the time)	Almost always or always
0	1	2	3	4	5

KEY

22-25	Normal erectile function
17-21	Mild ED
12-16	Mild to moderate ED
8-11	Moderate ED
<7	Severe ED

Name: _____

Score: _____

If you are concerned about your score please make a consultation to discuss this.