

Self-Evaluation of Breathing Questionnaire

Using the buttons below, please indicate how often these may be an issue for you.

A score greater than 11 may indicate problems with your breathing.

(0) never/not true at all; (1) occasionally/a bit true; (2) frequently-mostly true; and, (3) very frequently/very true

	0	1	2	3
I get easily breathless out of proportion to my fitness				
I notice myself breathing shallowly				
I get short of breath reading and talking				
I notice myself sighing				
My breathing requires work				
I feel I cannot get a deep or satisfying breath				
I notice that I am breathing irregularly				
My breathing feels stuck or restricted				
My ribcage feels tight and cannot expand				
I notice myself breathing quickly				
I get breathless when I'm anxious				
I find myself holding my breath				
I feel breathless in association with other physical symptoms				
I have trouble coordinating my breathing when I am speaking				
I can't catch my breath				
I feel that the air is stuffy, as if not enough air in the room				
I get breathless even when I am resting				
My breath feels like it does not go in all the way				
My breath feels like it does not go out all the way				
My breathing is heavy				
I feel that I am breathing more				
I noticing myself yawning				
My breathing requires effort				
I find myself breathing through my mouth during the day				
I breathe through my mouth at night while I sleep				
Total Score				