

## Vaizey Incontinence Score

Please answer the following questions by **placing a mark in the box** that best applies to you.

	Never	Rarely	Sometimes	Weekly	Daily
How often do you have incontinence (accidents) with solid stool?					
How often do you have incontinence (accidents) with liquid stool?					
How often do you lose control of gas/wind?					
How often do your bowel symptoms affect your lifestyle?					
				No	Yes
Do you use a Pad or anal plug?					
Do you take medications that make you constipated?					
Do you have to rush to the toilet as soon as you have an urge to go?					