check box ⌧

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| --- |
| **Do you ever have occasions when you cannot control your flatus (wind)?** |
| [ ]  | No, never (score 0) |  |
| [ ]  | Yes, less than once per week (score 4) |
| [ ]  | Yes, at least once per week (score 7) |
|  |
| **Do you ever have any accidental leakage of liquid stool?** |
| [ ]  | No, never (score 0) |  |
| [ ]  | Yes, less than once per week (score 3) |
| [ ]  | Yes, at least once per week (score 3) |
|  |
| **How often do you open your bowels?** |
| [ ]  | More than 7 times per day/24 hours (score 4) |  |
| [ ]  | 4-7 times per day/24 hours (score 2) |
| [ ]  | 1-3 times per day/24 hours (score 0) |
| [ ]  | Less than once per day/24 hours (score 5) |
|  |
| **Do you ever have to open your bowels again within one hour of the last bowel opening?** |
| [ ]  | No, never (score 0) |  |
| [ ]  | Yes, less than once per week (score 9) |
| [ ]  | Yes, at least once per week (score 11) |
|  |
| **Do you ever have such a strong urge to open your bowels that you have to rush to the toilet?** |
| [ ]  | No, never (score 0) |  |
| [ ]  | Yes, less than once per week (score 11) |
| [ ]  | Yes, at least once per week (score 16) |
| **TOTAL SCORE** |  |

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| **Interpretation** |
| **0 – 20: No LARS** | **21-29 Minor LARS** | **30-42 Major LARS** |