**EORTC IL27 – Arabic for Israel Proofreading Report**

| **Ref** | **Source English Questionnaire Wording** | **Arabic for Israel Translation** | **Revised Arabic for Israel Translation** | **Reason why change was necessary** |
| --- | --- | --- | --- | --- |
| 1 | **EORTC IL27** | **EORTC IL27** |  |  |
| 2 | Patients sometimes report that they have the following symptoms or problems. | يقول المرضى في بعض الأحيان أنهم يتعرضون للأعراض أو المشاكل التالية. |  |  |
| 3 | Please indicate the extent to which you have experienced these symptoms or problems during the past week. | الرجاء تحديد إلى أي مدى حدثت لك هذه الأعراض أو المشاكل خلال الأسبوع الماضي. |  |  |
| 4 | Please answer by circling the number that best applies to you. | ترجى الإجابة من خلال وضع دائرة على الرقم الذي ينطبق عليك بأفضل شكل. |  |  |
| 5 | **During the past week:** | **خلال الأسبوع الماضي:** |  |  |
| 6 Q31 | Have you had night sweats? | هل كان لديك تعرق أثناء الليل؟ |  |  |
| 7 Q32 | Did you bruise? | هل أصبت برضوض أو كدمات؟ |  |  |
| 8 Q33 | Has your temperature been going up and down? | هل كانت درجة حرارتك ترتفع وتهبط؟ |  |  |
| 9 Q34 | Have you had aches or pains in your muscles or joints? | هل شعرت بأوجاع أو آلام في عضلاتك أو مفاصلك؟ |  |  |
| 10 R1-R6 | **Not at All**  **A Little**  **Quite a Bit**  **Very Much** | **لا أبداً**  **قليلًا**  **كثيرًا**  **كثيرًا جدًا** |  |  |
| 11 ePRO | Please answer by selecting the number that best applies to you. | ترجى الإجابة من خلال اختيار الرقم الذي ينطبق عليك بأفضل شكل. |  | PM: Please proofread this sentence even though it is not in the questionnaire. Also, I would like your opinion here on which option you think is best. |

**Reference column key**

Q1 = Question 1

R1 = Response options for question 1

R3-7 = Response options for questions 3 to 7

\* = Text which is repeated in the questionnaire