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## **IIEF-5** Erectile Function Questionnaire

name: date:

The following 5 questions assess your ability and confidence in being able to get and maintain erections. To the right of each question, please tick the box that describes your experience over the last six months. .

	1	2	3	4	5
How do you rate your confidence that you could get and keep an erection?	very low	low	moderate	high	very high
When you had erections with sexual stimulation, how often were your erections hard enough for penetration?	almost never or never	much less than half the time	about half the time	much more than half the time	almost always or always
During sexual intercourse, how often were you able to maintain your erection after you had penetrated (entered) your partner?	almost never or never	much less than half the time	about half the time	much more than half the time	almost always or always
During sexual intercourse how difficult was it to maintain your erection to the completion of intercourse?	extremely difficult	very difficult	difficult	slightly difficult	not difficult
When you attempted sexual intercourse, how often was it satisfactory for you?	almost never or never	much less than half the time	about half the time	much more than half the time	almost always or always

Your Total Score (	(minumum is 5, maximum is 25) =	
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