Purpose: The NP is a subjective symptom checklist with the goal of obtaining a more in-depth description of what patients are experiencing when they report the feeling of nausea. The NP evaluates the experience of 3 dimensions which are involved in the complex feeling of nausea: somatic distress; GI distress;

and emotional distress.

Procedure:

The NP can be easily administered before, during and after a session or treatment to evaluate how the experience of nausea differs within a given session/treatment or between different sessions/treatments. The degree to which the patient felt/feels each of the following 17 descriptors during the nauseous

Descriptors: The degree to which the patient felt/feels each of the following 17 des period is rated by the patient on a scale of 0 (not at all) to 9 (severely).

GI Distress	Emotional Distress
sick stomach awareness/discomfort	nervous scared/afraid
as if he/she might vomit	worry
queasy	panic hopeless
	sick stomach awareness/discomfort as if he/she might vomit ill

Scoring the NP: The overall nausea score is obtained by calculating the percent of total points scored:

A. (actual score/153) × 100%

The 3 aforementioned dimension scores are calculated by calculating the percent of total points scored in each dimension:

- B. (somatic distress total/54) × 100%,
- C. (GI distress/45) × 100%, and
- D. (emotional distress total/54) × 100%.

In other words, to score the attached example of the NP: 1) sum the total points scored; 2) sum the points scored for questions 1, 3, 5, 9, 16, 17 (somatic distress); 3) sum the points scored for questions 4, 6, 13, 14, 15 (GI distress); 4) sum the points scored for questions 2, 7, 8, 10, 11, 12 (emotional distress); and 5) calculate A, B, C and D as stated above.

## NAUSEA PROFILE

Directions: Rate the degree to which each of the following statements describes what you experienced while the drum was rotating (CIRCLE 1 NUMBER)

***	was rotating (effects 1 from belt)			
1.	I felt shaky  -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9	10. I felt panicked   -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9		
	not at all severely	not at all severely		
2.	1 felt upset  -+-+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9	11. I felt nervous   -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9		
	not at all severely	not at all severely		
3.	I felt lightheaded  -+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely	12. I felt scared/afraid  -+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely		
4.	I felt sick  -+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely	13. I felt ill  -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely		
5.	I felt sweaty  -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely	14. I felt awareness/discomfort in my stomach   -+-+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9  not at all severely		
6.	I felt queasy  -+-+-+-+-+-	15. I felt as if I might vomit  -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely		
7.	I felt worried  -+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely	16. I felt weak  -+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely		
8.	I felt hopeless  -+-+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely	17. I felt hot/warm   -+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9  not at all severely		
9.	I felt fatigued/tired  -+-+-+-+-+-+-  0 1 2 3 4 5 6 7 8 9 not at all severely			

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