

Morisky 8-item Medication adherence scale

Items	Yes	No
1. Do you sometimes forget to take your TB pills?	<input type="checkbox"/>	<input type="checkbox"/>
2. Over the past two weeks, were there any days when you did not take your TB medicine?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever cut back or stopped taking your medication without telling your doctor because you felt worse when you took it?	<input type="checkbox"/>	<input type="checkbox"/>
4. When you travel or leave home, do you sometimes forget to bring along your medications?	<input type="checkbox"/>	<input type="checkbox"/>
5. Did you take your TB medicine yesterday?	<input type="checkbox"/>	<input type="checkbox"/>
6. When you feel like your TB symptoms are under control, do you sometimes stop taking your medicine?	<input type="checkbox"/>	<input type="checkbox"/>
7. Taking medication every day is a real inconvenience for some people. Do you ever feel hassled about sticking to your TB treatment plan?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are there any additional challenges that you face in trying to complete your TB treatment?	<input type="checkbox"/>	<input type="checkbox"/>

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