

Name: _____ DOB: _____ Date: _____

Instructions: Please answer each section by circling ONLY ONE CHOICE that most closely describes how you are feeling right now.

Section 1: Pain Intensity

- 0 Little to no pain at the moment.
- 1 Pain is very mild at the moment.
- 2 Pain is moderate at the moment.
- 3 Pain is moderate to severe at the moment.
- 4 Pain is very severe at the moment.
- 5 Pain is the worst imaginable at the moment.

Section 2: Personal Care

- 0 Can look after self normally without extra pain.
- 1 Can look after self normally but causes extra pain.
- 2 Painful to care for self - am slow and careful.
- 3 Need some help but manage most personal care.
- 4 Need help every day with most personal care.
- 5 Do not get dressed, wash with difficulty, stay in bed.

Section 3: Lifting

- 0 Can lift heavy weights without extra pain.
- 1 Can lift heavy weights but it causes extra pain.
- 2 Pain prevents lifting heavy weights off the floor.
- 3 Pain prevents lifting heavy weights.
- 4 Can lift only very light weights.
- 5 Cannot lift or carry anything at all.

Section 4: Walking

- 0 Can walk as far as needed.
- 1 Pain keeps me from walking more than 1 mile.
- 2 Pain keeps me from walking more than ½ mile.
- 3 Pain keeps pt from walking more than ¼ mile.
- 4 Can walk using cane or crutches.
- 5 In bed or chair most of every day.

Section 5: Sitting

- 0 Can sit in any chair as long as I like.
- 1 Can only sit in my favorite chair (e.g., recliner) as long as I like.
- 2 Pain prevents sitting more than 1 hour.
- 3 Pain prevents sitting more than 30 minutes.
- 4 Pain prevents sitting more than 10 minutes.
- 5 Pain prevents sitting at all.

Section 6: Standing (Standing is not walking)

- 0 Can stand as long as needed without extra pain.
- 1 Can stand as long as needed but it gives me extra pain.
- 2 Pain prevents standing more than 1 hour.
- 3 Pain prevents standing more than 30 minutes.
- 4 Pain prevents standing more than 10 minutes.
- 5 Pain prevents standing at all.

Section 7: Sleeping

- 0 No trouble sleeping.
- 1 Sleep is slightly disturbed (less than 1 hr).
- 2 Sleep is mildly disturbed (1-2 hours).
- 3 Sleep is moderately disturbed (2-3 hours).
- 4 Sleep is greatly disturbed (3-5 hours).
- 5 Pain prevents me from sleeping at all (5-7 hours).

Section 8: Sex Life

- 0 Sex life is normal and causes no extra pain.
- 1 Sex life is normal but causes some extra pain.
- 2 Sex life is nearly normal but is very painful.
- 3 Sex life is severely restricted by pain.
- 4 Sex life is nearly absent because of pain.
- 5 Pain prevents any sex life at all.

Section 9: Social Life

- 0 Social life is normal and causes no extra pain.
- 1 Social life is normal but increases pain.
- 2 Pain affects social life for energetic interests.
- 3 Pain restricts my social life – do not go out as often.
- 4 Pain restricts social life to home.
- 5 No social life due to pain.

Section 10: Traveling

- 0 Can travel anywhere without extra pain.
- 1 Can travel anywhere with extra pain.
- 2 Pain is bad but can travel over 2 hours.
- 3 Pain restricts travel to less than 1 hour.
- 4 Pain restricts travel to less than 30 minutes.
- 5 Pain prevents travel except to doctor/hospital.