

Name _____ Visit # _____ Date _____

Please rate the severity of your pain over the last week by circling a number below

No Pain

0	1	2	3	4	5	6	7	8	9	10
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 Unbearable Pain

The Disability of the arm, shoulder and hand (DASH) is a questionnaire to ask you about your symptoms as well as your ability to perform certain activities. Please answer **every question**, based on your condition in the last week, by circling the appropriate number. If you did not have the opportunity to perform an activity in the past week, please make your *best estimate* of which response would be the most accurate. It does not matter which hand you use to perform the activity; please answer based on your ability regardless of how you perform the task.

Please rate your ability to do the following activities by circling the number

	No Difficulty	Mild Difficulty	Moderate Difficulty	Severe Difficulty	Unable
1 Open a tight jar	1	2	3	4	5
2 Do heavy household chores (e.g., wash walls, floors)	1	2	3	4	5
3 Carry a shopping bag or briefcase	1	2	3	4	5
4 Wash your back	1	2	3	4	5
5 Use a knife to cut food	1	2	3	4	5
6 Recreational activities which you take some force or impact through your arm, shoulder, or hand (golf, hammering, tennis, etc.)	1	2	3	4	5
	Not at All	Slightly	Moderately	Quite a Bit	Extremely
7 During the past week, <i>to what extent</i> has your arm, shoulder, or hand problem interfered with your normal social activities with family, friends, neighbors or groups?	1	2	3	4	5
	Not Limited at All	Slightly Limited	Moderately Limited	Very Limited	Unable
8 During the past week, were you limited in your work or other regular daily activities as a result of your arm, shoulder or hand problem? <i>Please rate the severity of the following symptoms in the last week.</i>	1	2	3	4	5
	None	Mild	Moderate	Severe	Extreme
9 Arm, shoulder, or hand pain	1	2	3	4	5
# Tingling (pins & needles) in your arm, shoulder or hand.	1	2	3	4	5
	No Difficulty	Mild Difficulty	Moderate Difficulty	Severe Difficulty	So Much I Can't Sleep
# During the past week, how much difficulty have you had sleeping because of the pain in your arm, shoulder or hand?	1	2	3	4	5