

quickDASH Scale

Name _____
 PT ___ Date _____ Visit # ___
 Rx Dx _____ OC Dx _____
 Pt ID _____ Pt DOB _____

Raw Score _____

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	Unbearable Pain
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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 (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 At All Limited	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?	1	2	3	4	5
	<i>Please rate the severity of symptoms in the last week</i>	None	Mild	Moderate	Severe	Extreme
9	Arm, shoulder, or hand pain	1	2	3	4	5
10	Tingling (pins and 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
11	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

DISABILITIES OF THE ARM, SHOULDER AND HAND

WORK MODULE (OPTIONAL)

The following questions ask about the impact of your arm, shoulder or hand problem on your ability to work (including homemaking if that is your main work role).

Please indicate what your job/work is: _____

I do not work. (You may skip this section.)

Please circle the number that best describes your physical ability in the past week. Did you have any difficulty:

	NO DIFFICULTY	MILD DIFFICULTY	MODERATE DIFFICULTY	SEVERE DIFFICULTY	UNABLE
1. using your usual technique for your work?	1	2	3	4	5
2. doing your usual work because of arm, shoulder or hand pain?	1	2	3	4	5
3. doing your work as well as you would like?	1	2	3	4	5
4. spending your usual amount of time doing your work?	1	2	3	4	5

SPORTS/PERFORMING ARTS MODULE (OPTIONAL)

The following questions relate to the impact of your arm, shoulder or hand problem on *playing your musical instrument or sport or both*.

If you play more than one sport or instrument (or play both), please answer with respect to that activity which is most important to you.

Please indicate the sport or instrument which is most important to you: _____

I do not play a sport or an instrument. (You may skip this section.)

Please circle the number that best describes your physical ability in the past week. Did you have any difficulty:

	NO DIFFICULTY	MILD DIFFICULTY	MODERATE DIFFICULTY	SEVERE DIFFICULTY	UNABLE
1. using your usual technique for playing your instrument or sport?	1	2	3	4	5
2. playing your musical instrument or sport because of arm, shoulder or hand pain?	1	2	3	4	5
3. playing your musical instrument or sport as well as you would like?	1	2	3	4	5
4. spending your usual amount of time practising or playing your instrument or sport?	1	2	3	4	5

SCORING THE OPTIONAL MODULES: Add up assigned values for each response; divide by 4 (number of items); subtract 1; multiply by 25.

An optional module score may not be calculated if there are any missing items.

