Name: Date of Birth:	Date of Birth: <u>UPENN SHOULDER SCALE</u>			Today's Date:			
<u>UPENN SHOUL</u>							
Please <i>circle the number</i> closest to you level of pain							
Pain at rest with your arm by your side 0 1 2 3 4 5 6	7	8	9	10			
No Pain	7	0	9		t Pain Possible		
Pain with normal activity (eating, dressing, bathing, etc)							
0 1 2 3 4 5 6 No Pain	7	8	9	10 Wors	t Pain Possible		
Pain with strenuous activities (reaching, lifting, pushing, pulling, thro	owing)						
0 1 2 3 4 5 6	7	8	9	10			
No Pain		Worst Pain Possible Clinic Use Only: 30 = / 30					
Please <i>circle the number</i> closest to you level of satisfaction		Cilli	c Use Oil	1y. 30	=/30		
How satisfied are you with the current level of function of your shou	lder?						
0 1 2 3 4 5 6 Not Satisfied		8	9	10 Vory	Satisfied		
NOT Saustied				very	Satisfied		
		Clini	c Use On	ly: Total _	/ 10		
Please <i>circle the number</i> that best applies to your ability to: 3= No difficulty, 2= Some difficulty, 1 = Much Difficulty, 0 = Can'	t do it at all,	x = Didn	't do befo	ore injury)			
Reach the small of your back to tuck in your shirt with hand:	3	2	1	0	X		
Wash middle of back / Hook bra:	3	2	1	0	X		
Perform necessary toileting activities:	3	2	1	0	X		
Wash the back of the opposite shoulder:	3	2	1	0	X		
Comb Hair:	3	2	1	0	X		
Place hand behind head with elbow held straight out to side:	3	2	1	0	X		
Oress self (including put on a coat and pull off shirt overhead:	3	2	1	0	X		
Sleep on affected side:	3	2	1	0	X		
Open a door with affected side:	3	2	1	0	X		
Carry a bag of groceries with affected arm:	3	2	1	0	X		
Carry a briefcase or small suitcase with affected arm:	3	2	1	0	X		
Place a soup can (1-2lbs) on a shelf at shoulder height:	3	2	1	0	X		
Place a gallon container (8-10lbs) on a shelf at shoulder height:	3	2	1	0	X		
Reach a shelf above your head without bending elbow:	3	2	1	0	X		
Place a soup can (1-2lbs) on shelf above head:	3	2	1	0	X		
Place gallon container (8-10lbs) on shelf above head:	3	2	1	0	X		
Perform usual sport / hobby:	3	2	1	0	X		
Perform household chores (cooking, cleaning, laundry):	3	2	1	0	X		
Throw overhand, swim, or overhead racquet sports:	3	2	1	0	X		
Work full-time at regular job:	3	2	1	0	X		
			Clinic Use Only: Total * / 60				
D = 11 points, MDC (90% CI) = 12 points Leggin et al., JOSPT 2006							
* If pt. marked an X * Total points gained = A, # of X's times $3 = B$, $60 - B = C$,							