THE

QuickDASH OUTCOME MEASURE

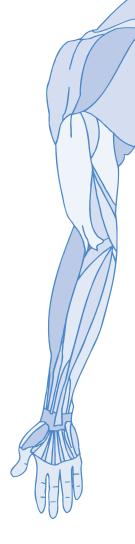
INSTRUCTIONS

This questionnaire asks 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 and circle the appropriate number.

If you did not have the opportunity to perform an activity in the past week, please make your best estimate.

It doesn't matter which hand or arm you use to perform the activity. Answer based on your ability regardless of how you perform the task.



*Quick***DASH**

Please rate your ability to do the following activities in the last week by circling the number below the appropriate response.

		NO	MILD	MODERATE	SEVERE	UNABLE
		DIFFICULTY	DIFFICULTY	DIFFICULTY	DIFFICULTY	
1.	Open a tight or new 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
5.	Recreational activities in which you take some force or impact through your arm, shoulder or hand (e.g., golf, hammering, tennis, etc.).	1	2	3	4	5
		NOT AT ALL	SLIGHTLY	MODERATELY	QUITE A BIT	EXTREMEL
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, neighbours or groups?	1	2	3	4	5
		NOT LIMITED AT ALL	SLIGHTLY LIMITED	MODERATELY LIMITED	VERY LIMITED	UNABLE
3.	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
	use rate the severity of the following symptoms he last week. (circle number)	NONE	MILD	MODERATE	SEVERE	EXTREME
		4	2	2	4	5
).	Arm, shoulder or hand pain.	1	2	3	4	2
). 10.	Arm, shoulder or hand pain. Tingling (pins and needles) in your arm, shoulder or hand.	1	2	3	4	5
	Tingling (pins and needles) in your arm,		_		4 SEVERE DIFFICULTY	5 SO MUCH DIFFICULT

A ${\it Quick} DASH$ score may \underline{not} be calculated if there is greater than 1 missing item.

QuickDASH

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 wo	rk? 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.



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

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