

BRONSTON CHIROPRACTIC

**SHOULDER INJURY
SELF-ASSESSMENT OF FUNCTION**

Please rate your ability to do the following common tasks as they relate to your injured shoulder by placing a “√” mark in the appropriate box.

	0	1	2	3	4	
	Normal	Mild compromise	Difficult	Very difficult (with aid)	Unable	Other/ cannot say
1. Use back pocket						
2. Wipe after bowel movement						
3. Wash opposite underarm						
4. Eat with fork or spoon						
5. Comb hair						
6. Use hand with arm at shoulder level						
7. Carry 10-15 pounds with arm at side						
8. Dress						
9. Sleep on affected side						
10. Pulling						
11. Use hand overhead						
12. Throwing						
13. Lifting						
14. Do usual work						
15. Do usual sport						
16. Reach behind back, Fasten Brassiere						

NAME _____ DATE _____ AGE _____ SCORE _____

RATING SCALE OF THE AMERICAN SHOULDER AND ELBOW SURGEONS

NAME _____ **DATE** _____

AGE _____ **SCORE** _____

PAIN: (5=None; 4= slight; 3=after unusual activity; 2=moderate; 1=marked; 0=complete disability: _____)

FUNCTION: (4 = normal; 3 = mild compromise; 2 = difficulty; 1 = with aid; 0 = unable, NA = not available)

ACTIVITY	SCORE	ACTIVITY	SCORE
1. Use back pocket		7. Carry 10 to 15 lbs with arm at side	
2. Reach behind back, fasten brassiere		8. Dress	
3. Wash opposite under arm		9. Sleep on the affected side	
4. Eat with utensil		10. Pulling	
5. Comb hair		11. Use hand overhead	
6. Use hand with arm at shoulder level		12. Lifting	
		TOTAL	

SPORTS:

POINTS

Same overhead sport, equal performance (normal)	4
Same non-overhead sport, equal performance (mild compromise)	3
Same sport, decreased performance (difficult)	2
Different sport (with aid)	1
Sports not possible (unable)	0