

Provider: Marissa Fourie

Today's date: _____

Instructions

Your upper limb (arm) may make it difficult to do some things you normally do. This list contains sentences people use to describe themselves when they have such problems. Think of yourself over the last few days. If an item describes you, select the Box 'Partly' or 'Yes'. If an item does not describe you, Select the Box 'NO'. © CP Gabel 2002-15

1. DUE TO MY ARM: I avoid heavy jobs eg. cleaning, lifting more than 5kg or 10lbs, gardening etc.

No Partly Yes

2. DUE TO MY ARM: I have the pain / problem almost all the time.

No Partly Yes

3. DUE TO MY ARM: I have difficulty with normal home or family duties and chores.

No Partly Yes

4. DUE TO MY ARM: I sleep less well.

No Partly Yes

5. DUE TO MY ARM: I need assistance with personal care eg. washing and hygiene.

No Partly Yes

6. DUE TO MY ARM: My regular daily activities (work, social contact) are affected.

No Partly Yes

7. DUE TO MY ARM: I have difficulty putting my arm into a shirt sleeves or need assistance dressing.

No Partly Yes

8. DUE TO MY ARM: I have difficulty eating and /or using utensils (eg knife, fork, spoon, chop sticks).

No Partly Yes

9. DUE TO MY ARM: I use the other arm more often.

No Partly Yes

10. DUE TO MY ARM: I have difficulty with buttons, keys, coins, taps/faucets, containers or screw-top lids.

No Partly Yes