NAME:	DOB:	TODAY'S DATE:	

Hand Profile

RATE YOUR PAIN

Rate the average amount of pain in your wrist/hand over the past week by circling the number that best describes your pain on a scale from 0-10. A zero (0) means that you did not have any pain and a ten (10) means that the pain is the worst possible (i.e. worst you have ever experienced or that you could not do the activity because of pain).

At Res Best 0	1	2	3	4	5	6	7	8	9	Worst 10
When	When doing a task with a repeated wrist/hand movement									
Best 0	1	2	3	4	5	6	7	8	9	Worst 10
When lifting a heavy object										
Best 0	1	2	3	4	5	6	7	8	9	Worst 10
When it is at its worst										
Best 0	1	2	3	4	5	6	7	8	9	Worst 10
How often do you have pain										
Never 0		2	3	4	5	6	7	8	9	Always 10

SPECIFIC ACTIVITIES

Rate the amount of difficulty you experienced performing each of the items listed below – over the past week, by circling the number that describes your difficulty on a scale of 0-10. A zero (0) means you did not experience any difficulty and a ten (10) means it was so difficult you were unable to do it at all.

Turn a door knob using my affected hand No Difficulty Unable to Do Cut meat using a knife in my affected hand Unable to Do No Difficulty Fasten buttons on my shirt Unable to Do No Difficulty

NAME	NAME:					DOB:			TODAY'S DATE:		
Use my affected hand to push up from a chair No Difficulty Unable to Do											
0	1	2	3	4	5	6	7	8	9	10	
Carry a 10lb object in my affected hand No Difficulty Unable to Do										Lingble to Do	
0	1	2	3	4	5	6	7	8	9	10	
Use bathroom tissue with my affected hand No Difficulty Unable to Do											
0	1	2	3	4	5	6	7	8	9	10	
USUAL ACTIVITIES Rate the amount of difficulty you experienced performing your usual activities in each of the areas listed below, over the past week, by circling the number that best describes your difficulty on a scale of 0-10. By usual activities, we mean the activities you performed before you started having a problem with your wrist/hand. A zero (0) means that you did not experience any difficulty and ten (10) means it was so difficult you were unable to do any of your usual activities.											
Person: No Diff		activitie 2	es (dress	sing, wa	shing) 5	6	7	8	9	Unable to Do	
	old wo			aintena 4		6	7	8	9	Unable to Do	
		b or us	ual ever	yday wo	ork)						
No Diff 0	ficulty 1	2	3	4	5	6	7	8	9	Unable to Do 10	
Recreate No Diff		ectivities 2	3	4	5	6	7	8	9	Unable to Do 10	
APPEARANCE – OPTIONAL											
How important is the appearance of your hand? Very Much Somewhat Not at all											
Rate how dissatisfied you were with the appearance of your wrist/hand during the past week. No Dissatisfaction Complete Dissatisfaction											
0	1	2	3	4	5	6	7	8	9	10	