

## Quick-Disabilities of the Arm, Shoulder and Hand (QuickDASH)-Questionnaire

This questionnaire asks about your symptoms as well as your ability to perform certain activities. Please answer **every question**, based on your condition in the last week, by checking the appropriate box. If you did not have the opportunity to perform an activity in the past week, please make your best estimate of which response would be the most accurate. It doesn't matter which hand or arm you use to perform the activity; please answer based on your ability regardless of how you perform the task.

**Important:** A maximum of one answer may be missing in the QuickDASH, and no answer may be missing in the Work Module or in the Sports and Performing Arts Module.

**Please rate your ability to do the following activities in the last week by checking the appropriate box below the appropriate response.**

	no difficulty	mild difficulty	moderate difficulty	severe difficulty	unable
1. Open a tight or new jar.					
2. Do heavy household chores (e.g., wash walls, floors).					
3. Carry a shopping bag or briefcase.					
4. Wash your back.					
5. Use a knife to cut food.					
6. Recreational activities in which you take some force or impact through your arm, shoulder or hand (e.g., golf, hammering, tennis, etc.).					

	not at all	slightly	moderately	quite a bit	extremely
7. During the past week, to what extent has your arm, shoulder or hand problem interfered with your normal social activities with family, friends, neighbours or groups?					

	not limited at all	slightly limited	moderately limited	very limited	unable
8. 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?					

## Quick-Disabilities of the Arm, Shoulder and Hand (QuickDASH)-Questionnaire *Continuation*

Please rate the severity of the following symptoms in the last week.

(Please check the appropriate box.)

	none	mild	moderate	severe	extreme
9. Arm, shoulder or hand pain.					
10. Tingling (pins and needles) in your arm, shoulder or hand.					

	no difficulty	mild difficulty	moderate difficulty	severe difficulty	so much difficulty that I can't sleep
11. During the past week, how much difficulty have you had sleeping because of the pain in your arm, shoulder or hand?					

Total:

### 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 check the box that best describes your physical ability in the past week.

Did you have any difficulty:	no difficulty	mild difficulty	moderate difficulty	severe difficulty	unable
12. using your usual technique for your work?					
13. doing your usual work because of arm, shoulder or hand pain?					
14. doing your work as well as you would like?					
15. spending your usual amount of time doing your work?					

Total:

## Quick-Disabilities of the Arm, Shoulder and Hand (QuickDASH)-Questionnaire *Continuation*

### 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 check the box that best describes your physical ability in the past week.

Did you have any difficulty:	no difficulty	mild difficulty	moderate difficulty	severe difficulty	unable
16. using your usual technique for playing your instrument or sport?					
17. playing your musical instrument or sport because of arm, shoulder or hand pain?					
18. playing your musical instrument or sport as well as you would like?					
19. spending your usual amount of time practising or playing your instrument or sport?					

QuickDASH-Score (0–100):

QuickDASH-Work-Score (0–100):

QuickDASH-Sports/Performing Arts-Score (0–100):