



Date: _____

Please place a Mark on each line below to indicate your answer to each question, relating to THE PAST WEEK.

SCORE /10

1. How would you describe the overall level of **FATIGUE/TIREDNESS** you have experienced?

NONE |-----| VERY SEVERE

2. How would you describe the overall level of **NECK, BACK or HIP** pain you have had?

NONE |-----| VERY SEVERE

3. How would you describe the overall level of pain/swelling in joints **OTHER THAN** neck, back or hips you have had?

NONE |-----| VERY SEVERE

4. How would you describe the overall level of **DISCOMFORT** you have had from any areas tender to touch or pressure?

NONE |-----| VERY SEVERE

Total of Q1 to Q4 (out of 40) [A]

5. How would you describe the overall **LEVEL** of **MORNING STIFFNESS** you have had from the time you wake up?

NONE |-----| VERY SEVERE

6. **HOW LONG** does your **MORNING STIFFNESS** last from the time you wake up?

0 |-----| 2+ HOURS

0.5 1 1.5

Total of Q5 to Q6 divided by two (out of 10) [B]

Total Score out of 50 [A + B]

1 = 0.2	11 = 2.2	21 = 4.2	31 = 6.2	41 = 8.2
2 = 0.4	12 = 2.4	22 = 4.4	32 = 6.4	42 = 8.4
3 = 0.6	13 = 2.6	23 = 4.6	33 = 6.6	43 = 8.6
4 = 0.8	14 = 2.8	24 = 4.8	34 = 6.8	44 = 8.8
5 = 1.0	15 = 3.0	25 = 5.0	35 = 7.0	45 = 9.0
6 = 1.2	16 = 3.2	26 = 5.2	36 = 7.2	46 = 9.2
7 = 1.4	17 = 3.4	27 = 5.4	37 = 7.4	47 = 9.4
8 = 1.6	18 = 3.6	28 = 5.6	38 = 7.6	48 = 9.6
9 = 1.8	19 = 3.8	29 = 5.8	39 = 7.8	49 = 9.8
10 = 2.0	20 = 4.0	30 = 6.0	40 = 8.0	50 = 10

BASDAI (A + B) divided by five (score out of 10)