



Name: \_\_\_\_\_ DOB: \_\_\_\_\_

**Penn Shoulder Score – Part 1: Pain and Satisfaction Subscales**

Please circle the number closest to your level of pain or satisfaction.	Office Use Only
Pain at rest with your arm by your side: 0    1    2    3    4    5    6    7    8    9    10 <i>No Pain</i> <span style="float: right;"><i>Worst Pain Possible</i></span>	_____ 10 - # circled
Pain with normal activities (eating, dressing, bathing): 0    1    2    3    4    5    6    7    8    9    10 <i>No Pain</i> <span style="float: right;"><i>Worst Pain Possible</i></span>	_____ 10 - # circled Score 0 if not applicable
Pain with strenuous activities (reaching, lifting, pushing, pulling, throwing): 0    1    2    3    4    5    6    7    8    9    10 <i>No Pain</i> <span style="float: right;"><i>Worst Pain Possible</i></span>	_____ 10 - # circled Score 0 if not applicable
<b>Pain Score:</b> = _____ / 30	
How satisfied are you with the current level of function of your shoulder? 0    1    2    3    4    5    6    7    8    9    10 <i>Very Satisfied</i> <span style="float: right;"><i>Not Satisfied</i></span>	_____ 10 - # circled



Name: \_\_\_\_\_ DOB: \_\_\_\_\_

### Penn Shoulder Score: Functional Subscale

<i>Please circle the number that best describes the level of difficulty you might have performing each activity</i>		No Difficulty	Some Difficulty	Much Difficulty	Can't do at all	<i>Did not do before injury</i>
1.	Reach the small of your back to tuck in your shirt with your hand	3	2	1	0	X
2.	Wash the middle of your back/hook bra	3	2	1	0	X
3.	Perform necessary toileting activities	3	2	1	0	X
4.	Wash the back of opposite shoulder	3	2	1	0	X
5.	Comb hair	3	2	1	0	X
6.	Place hand behind head with elbow held straight out to the side	3	2	1	0	X
7.	Dress self (including put on coat and pull shirt off overhead)	3	2	1	0	X
8.	Sleep on affected side	3	2	1	0	X
9.	Open a door with affected arm	3	2	1	0	X
10.	Carry a bag of groceries with affected arm	3	2	1	0	X
11.	Carry a briefcase/small suitcase with affected arm	3	2	1	0	X
12.	Place a soup can (1-2 lb) on a shelf at shoulder level without bending elbow	3	2	1	0	X
13.	Place a one gallon container (8-10 lb) on a shelf at shoulder level without bending elbow	3	2	1	0	X
14.	Reach a shelf above your head without bending your elbow	3	2	1	0	X
15.	Place a soup can (1-2 lb) on a shelf overhead without bending your elbow	3	2	1	0	X
16.	Place a one gallon container (8-10 lb) on a shelf overhead without bending your elbow	3	2	1	0	X
17.	Perform usual sport/hobby	3	2	1	0	X
18.	Perform household chores (cleaning, laundry, cooking)	3	2	1	0	X
19.	Throw overhand/swim/overhead racquet sports (circle all that apply to you)	3	2	1	0	X
20.	Work full-time at your regular job	3	2	1	0	X

<b>Scoring</b>					
Total of columns = ____ (a) Number of X's x 3 = ____ (b), 60 - ____ (b) = ____ (c) (if no X's are circled, function score = total of columns) Function Score = ____ (a) ÷ ____ (c) = ____ x 60 = ____ / 60 = ____					