PATIENT'S NAME: _____ DATE: _____

Shoulder Pain and Disability Index

Please place a mark on the line that best represents your experience during the last week attributable to your shoulder problem.

Pain Scale

How severe is your pain?

Circle the number that best describes your pain where: **0** = no pain and **10** = the worst pain imaginable.

At its worst?	0	1	2	3	4	5	6	7	8	9	10
When lying on the involved side?	0	1	2	3	4	5	6	7	8	9	10
Reaching for something on a high shelf?	0	1	2	3	4	5	6	7	8	9	10
Touching the back of your neck?	0	1	2	3	4	5	6	7	8	9	10
Pushing with the involved arm?	0	1	2	3	4	5	6	7	8	9	10

Disability Scale

How much difficulty do you have?

Circle the number that best describes your experience where: **0** = no difficulty and **10** = so difficult it requires help.

Washing you hair?	0	1	2	3	4	5	6	7	8	9	10
Washing your back?	0	1	2	3	4	5	6	7	8	9	10
Putting on an undershirt or jumper?	0	1	2	3	4	5	6	7	8	9	10
Putting on a shirt that buttons down the front?	0	1	2	3	4	5	6	7	8	9	10
Putting on your pants?	0	1	2	3	4	5	6	7	8	9	10
Placing an object on a high shelf?	0	1	2	3	4	5	6	7	8	9	10
Carrying a heavy object of 10 pounds (4.5 kilograms)	0	1	2	3	4	5	6	7	8	9	10
Removing something from your back pocket?	0	1	2	3	4	5	6	7	8	9	10

THERAPIST USE ONLY

Shoulder Pain and Disability Index

- **Total pain score _____ / 50 x 100 = _____ %**

(Note: If a person does not answer all questions divide by the total possible score, eg. If 1 question missed divide by 40)

- **Total disability score: _____ / 80 x 100 = _____ %**

(Note: If a person does not answer all questions divide by the total possible score, eg. If 1 missed divide by 70)

- **Total Spadi score: _____ 130 x 100 = _____ %**

(Note: If a person does not answer all questions divide by the total possible score, eg. If 1 question missed divide by 120)

Minimum Detectable Change (90% confidence) = 13 points
(Change less than this may be attributable to measurement error)

Source: Roach et al. (1991). Development of a shoulder pain and disability index