

Simple Shoulder Test

Instructions to Patients: Please answer each question below by placing an "X" in the box that corresponds to your answer. In all cases, please rate your shoulder comfort and function as they have affected your lifestyle and abilities over the past week. Please answer all questions to the best of your ability.

Dominant Hand (fill in only one square): Right Left Ambidextrous

Shoulder Evaluated (fill in only one square): Right Left

1. Is your shoulder comfortable with your arm at rest by your side? Yes No

2. Does your shoulder allow you to sleep comfortably? Yes No

3. Can you reach the small of your back to tuck in your shirt with your hand? Yes No

4. Can you place your hand behind your head with the elbow straight out to the side? Yes No

5. Can you place a coin on a shelf at the level of your shoulder bending your elbow? Yes No

6. Can you lift one pound (a full pint container) to the level of your shoulder without bending your elbow? Yes No

7. Can you lift eight pounds (a full gallon container) to the level of your shoulder without bending your elbow? Yes No

8. Can you carry twenty pounds at your side with the affected arm? Yes No

9. Do you think you can toss a softball under-hand twenty yards with the affected arm? Yes No

10. Do you think you can toss a softball over-hand twenty yards with the affected extremity? Yes No

11. Can you wash the back of your opposite shoulder with the affected extremity? Yes No

12. Would your shoulder allow you to work full-time at your regular job? Yes No
