

ASES Shoulder Score

Name Age Date

1. Usual Work

2. Usual Sport/Leisure activity?

3. Do you have shoulder pain at night?
 Yes
 No

4) Do you take pain killers such as paracetamol (acetaminophen), diclofenac,
 Yes
 No

5) Do you take strong pain killers such as codeine, tramadol, or morphine?
 Yes
 No

6) How many pills do you take on an average day?

7) Intensity of pain?
 10 9 8 7 6 5 4 3 2 1
 Pain as bad as it can be

8) Is it difficult for you to put on a coat?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

9) Is it difficult for you to sleep on the affected side?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

10) Is it difficult for you to wash your back/do up bra?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

11) Is it difficult for you manage toileting?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

12) Is it difficult for you to comb your hair?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

13) Is it difficult for you to reach a high shelf?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

14) Is it difficult for you to lift 10lbs. (4.5kg) above your shoulder?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

15) Is it difficult for you to throw a ball overhand?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

16) Is it difficult for you to do your usual work?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

17) Is it difficult for you to do your usual sport/leisure activity?
 Unable to do
 Very difficult to do
 Somewhat difficult
 Not difficult

The Total ASES score is:

Nb: This page cannot be saved due to patient data protection so please print the filled in form before closing the window.