INOVA® SPINE INSTITUTE

NECK & ARM PAIN INDEX

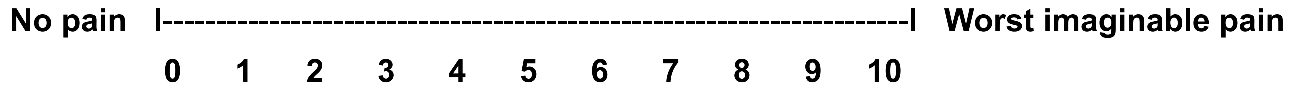
Patient Name:____

Date:_______/_______/_______

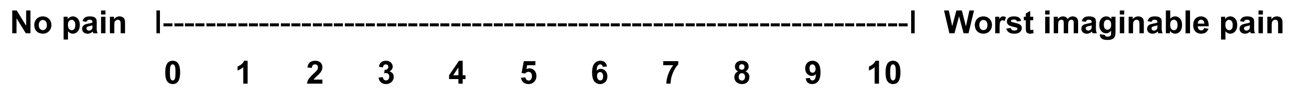
Date of birth:_______/_______/_______

Please select a point on the scale that best reflects your daily pain level with a 0 indicating no pain, and a 10 indicating unbearable pain.

On average, how bad is your NECK pain?



On average, how bad is your RIGHT ARM pain?



On average, how bad is your LEFT ARM pain?

Updated 10/10