BreakThrough Physical Therapy, Inc

263 N. Mathilda Ave. Sunnyvale,CA 94086 www.breakthroughpt.com

BreakThrough Physical Therapy, Inc. Brief Pain Inventory

Office Use Only

Date of Analysis:	
Pain Severity:	
Pain Interference:	

Date: _____

ime: _						DOB:					
2.						_		_			
	0 No pain	1	2	3	4	5	6	7 Pain as b	8 ad as you c	9 an imagin	10 e
3.	0	1	2	3	4	5	6	7	8	9	10
	0 No pain	1	۷	3	4	5	0		o ad as you c		
4.	0 No pain	1	2	3	4	5	6	7 Pain as b	8 bad as you c	9 an imagin	10 e
5.											
	0 No pain	1	2	3	4	5	6	7 Pain as b	8 oad as you c	9 an imagin	10 e
6.	What tr	eatments	or medica	tions are y	ou receiv	ing for yo	ur pain?				
7.											
	0% No relief	10%	20%	30%	40%	50%	60%	70%	80%	90% Complet	100% e relief

a. General activity

	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
b.	Mood										
	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
c.	Walking ability										
	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
d.	. Normal work (includes both outside the home and housework)										
	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
e.	Relations with other people										
	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
f.	Sleep										
	0 Does no	1 t interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res
g.	Enjoyment of life										
	0 Does not	1 interfere	2	3	4	5	6	7	8 Comple	9 tely interfe	10 res

Brief Pain Inventory Scoring Instructions

1. Pain Severity Score

This is calculated by adding the scores for questions 2, 3, 4 and 5 and then dividing by 4. This gives a severity score out of 10.

2. Pain Interference Score

This is calculated by adding the scores for questions 8a, b, c, d, e, f and g and then dividing by 7. This gives an interference score out of 10.