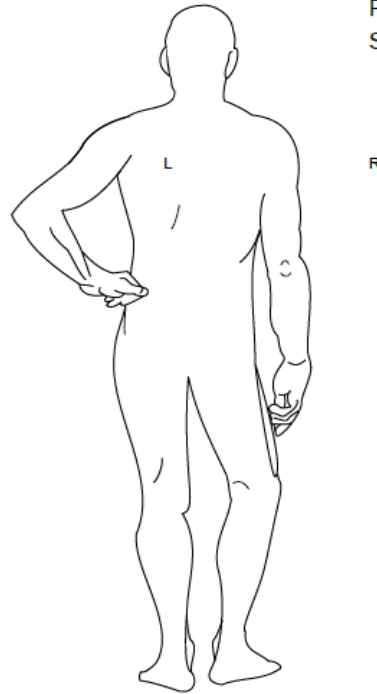
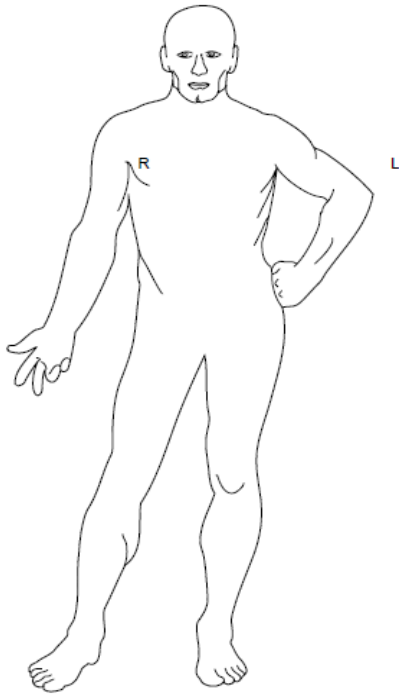


### Health Status Update

#### Client Information

Client Name: \_\_\_\_\_ Date: \_\_\_\_\_ DOB: \_\_\_\_\_

*Depict how you are feeling today by drawing a circle on the figures representing the size and shape of the following symptoms. Place the letter representing the symptoms in or near the circle:*



P = Pain, ache, or tenderness  
S = Stiffness in the joint or muscle

*Rate how you are feeling today by drawing a circle around the number that best represents how you are doing today:*

No pain    0    1    2    3    4    5    6    7    8    9    10    Worst pain imaginable

Able to do everything    0    1    2    3    4    5    6    7    8    9    10    Not able to do anything

#### Comments

Is there anything else I should know about how you are feeling today or about your progress or care to date? \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_