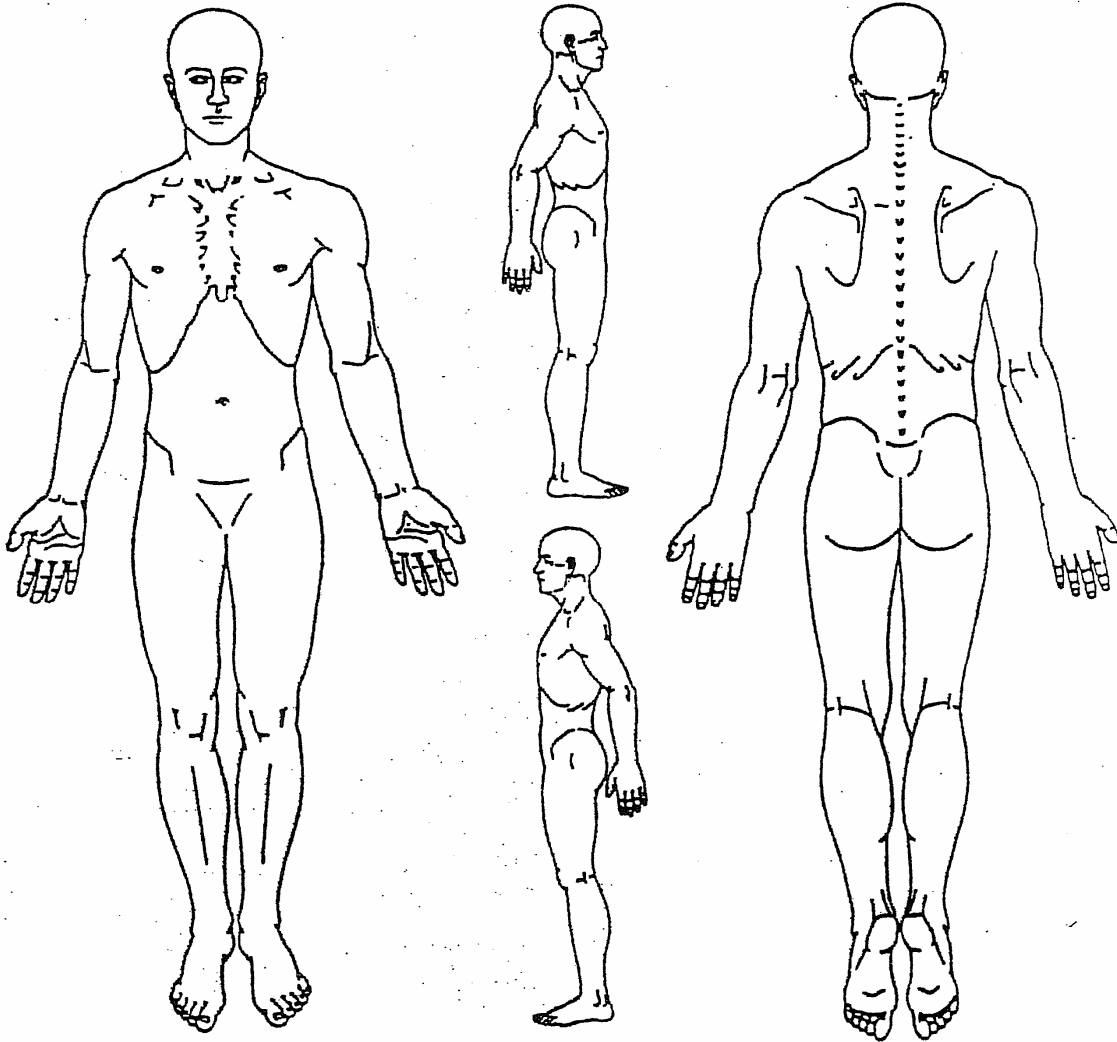


GENERAL PAIN DISABILITY QUESTIONNAIRE

USE THE LETTERS BELOW TO INDICATE THE TYPE AND LOCATION OF YOUR SENSATIONS RIGHT NOW.

KEY A=ACHE B=BURNING N=NUMBNESS
 P=PINS & NEEDLES S=STABBING O=OTHER



Signature _____ Date _____