

NHS number: _____
 Name: _____
 Address: _____

 Date of birth: _____
 CR number: _____

Affix patient label

The Bath Ankylosing Spondylitis Disease Activity Index (BASDAI)

The pain Visual Analogue Scale (VAS)²

1. How would you describe the overall level of pain you have experienced in your spine in the last week?

None Very severe

The Bath Ankylosing Spondylitis Disease Activity Index (BASDAI)

1. How would you describe the overall level of fatigue/tiredness you have experienced?

None Very severe

2. How would you describe the overall level of Ankylosing Spondylitis neck, back or hip pain you have had?

None Very severe

3. How would you describe the overall level of pain/swelling in joints other than neck, back or hips?

None Very severe

4. How would you describe the overall level of discomfort you have had from any areas tender to touch or pressure?

None Very severe

Total of 1 to 4

For professional use only

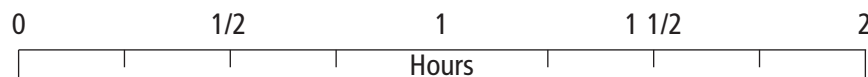
Score out of 10

Score out of 10

5. How would you describe the overall level of morning stiffness you have had from the time you wake up?

None Very severe

6. How long does your morning stiffness last from the time you wake up?



None Very severe

Total of 5 + 6
2

Total of A + B

BASDAI score = $\frac{C}{5}$ =

Assessor's name:

Signature:

Designation:

Date:

Time: