## The STarT Back Screening Tool

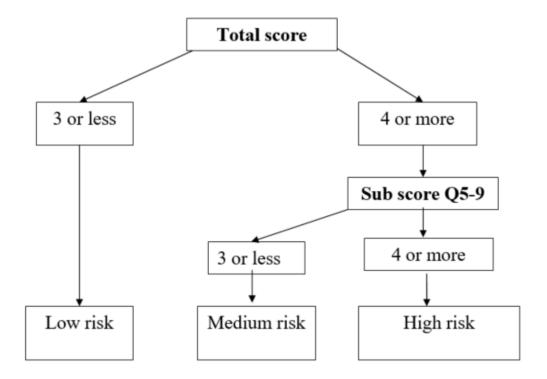
Patient name:\_\_\_\_\_

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

		Disagree	Agree
		0	1
1	My back pain has <b>spread down my leg(s)</b> at some time in the last two (2) weeks		
2	I have had pain in the <b>shoulder</b> or <b>neck</b> at some time in the last two (2) weeks		
3	I have only <b>walked short distances</b> because of my back pain		
4	In the last two (2) weeks, I have <b>dressed more slowly</b> than usual because of back pain		
5	It's not really safe for a person with a condition like mine to be physically active		
6	Worrying thoughts have been going through my mind a lot of the time		
7	I feel that my back pain is terrible and it's never going to get any better		
8	In general, I have <b>not enjoyed</b> all the things I used to enjoy		

Total score (all 9): \_\_\_\_\_\_
Sub Score (Q5-9): \_\_\_\_\_

## **The STarT Back Tool Scoring System**



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