

Bath Ankylosing Spondylitis Functional Index*

BASFI

*Calin et al. *J Rheumatol* 1994 21; 2281-85

Date _____

Patient Name _____

Please draw a mark on each line below to indicate your ability with each of the following activities, during the past week:

1. Putting on your socks or tights without help or aids (e.g. sock aids)?

EASY _____ **IMPOSSIBLE**
0 10

2. Bending forward from the waist to pick up a pen from the floor without an aid?

EASY _____ **IMPOSSIBLE**
0 10

3. Reaching up to a high shelf without help or aids (e.g. helping hand)?

EASY _____ **IMPOSSIBLE**
0 10

4. Getting up out of an armless dining room chair without using your hands or any other help?

EASY _____ **IMPOSSIBLE**
0 10

5. Getting up off the floor without any help from lying on your back?

EASY _____ **IMPOSSIBLE**
0 10

6. Standing unsupported for 10 minutes without discomfort?

EASY _____ **IMPOSSIBLE**
0 10

7. Climbing 12-15 steps without using a handrail or walking aid (one foot on each step)?

EASY _____ **IMPOSSIBLE**
0 10

8. Looking over your shoulder without turning your body?

EASY _____ **IMPOSSIBLE**
0 10

9. Doing physically demanding activities (e.g. physiotherapy exercises, gardening or sports)?

EASY _____ **IMPOSSIBLE**
0 10

10. Doing a full day activities whether it be at home or work?

EASY _____ **IMPOSSIBLE**
0 10