

RHEUMATOID ARTHRITIS FLARE QUESTIONNAIRE (RA-FQ)

ID: _____

DATE: _____

1. Circle the number that best describes the PAIN you felt due to your rheumatoid arthritis during the last week:

No Pain 0—1—2—3—4—5—6—7—8—9—10 Extreme Pain

2. Circle the number that best describes the DIFFICULTY YOU HAD IN DOING PHYSICAL ACTIVITIES (such as using your hands, walking or running, dressing, preparing meals, etc.) due to your rheumatoid arthritis during the last week:

No Difficulty 0—1—2—3—4—5—6—7—8—9—10 Extreme Difficulty

3. Circle the number that best describes how much FATIGUE you felt due to your rheumatoid arthritis during the last week:

No Fatigue 0—1—2—3—4—5—6—7—8—9—10 Extreme Fatigue

4. Circle the number that best describes the STIFFNESS (all over or in your joints) you felt due to your rheumatoid arthritis during the last week:

No Stiffness 0—1—2—3—4—5—6—7—8—9—10 Extreme Stiffness

5. Considering how active your rheumatoid arthritis has been, please circle the number that best describes the difficulty you had when TAKING PART IN ACTIVITIES SUCH AS WORK, FAMILY LIFE, SOCIAL EVENTS that are typical for you during the last week:

No Difficulty 0—1—2—3—4—5—6—7—8—9—10 Extreme Difficulty

6. Have you had this level of the above symptoms for more than one week? Yes No

7. Are you having a flare (flare-up) of rheumatoid arthritis at this time? Yes No

The RA-FQ Score is calculated as the sum of responses for items 1-5 (maximum 50)