1. In the past 3 months, **how often** did you have pain?

1. Never 1. Some days 2. Most days 3. Every day

*If response to question 1 is “0. Never” then do not ask the remaining questions.*

2. Over the past 3 months, **how often did pain limit** your life or work activities?

1. Never 1. Some days 2. Most days 3. Every day

Now think about your pain in the last 7 days…

3. What number best describes your pain, on average?

0 1 2 3 4 5 6 7 8 9 10

No pain worst pain imaginable

4. During the last 7 days, what number best describes how pain has interfered with your enjoyment of

life?

0 1 2 3 4 5 6 7 8 9 10

Does not interfere completely interferes

5. During the last 7 days, what number best describes how pain has interfered with your general activity?

0 1 2 3 4 5 6 7 8 9 10

Does not interfere completely interferes

*Optional additional question*

Are you not working or unable to work due to pain or a pain condition?

1. No 1. Yes

Notes:

Questions 3, 4, 5 are the PEG scale

Scoring

Question 1: Never or some days score as grade 0: chronic pain absent

Question 2: Most days or every day score as grade 3: high impact chronic pain

Question 2: Never or some days sum responses to question 3 + Question 4 + Question 5 (PEG score).

If PEGscore 12 or higher: score as grade 2: bothersome chronic pain

If PEG Score less than 12: score as grade 1: Mild Chronic pain

The optional additional question is not counted in grading of chronic pain

Reference:

Von Korff M, DeBar LL; Krebs EE, Kerns RD; Deyo RA, Keefe FJ. Graded chronic pain scale revised: mild, bothersome, and high-impact chronic pain, *PAIN*: March 2020 - Volume 161 - Issue 3 - p 651-661

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