Parent Proxy Upper Extremity – Short Form 8a

Please respond to each question or statement by marking one box per row.

	In the past 7 days…	**With no trouble**	**With a little trouble**	**With some trouble**	**With a lot of trouble**	**Not able to do**
Pf2uprext3r	My child could button his/her shirt or pants	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf4uprext1r	My child could open a jar by himself/herself	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf3uprext11r	My child could open the rings in school binders	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf4uprext10r	My child could pour a drink from a full pitcher	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf3uprext4r	My child could pull a shirt on over his/her head without help	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf3uprext9r	My child could pull open heavy doors	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf2uprext2r	My child could put on his/her shoes without help	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
Pf3uprext7r	My child could use a key to unlock a door	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1

Last Updated: 29 July 2016
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