



Dear Patient

Please would you be kind enough to print out and complete the following scar assessment scales prior to your appointment? They provide us with some basic information about your scar. This helps us to establish the nature of your problems and track improvement. If there is more than one scar, we would greatly appreciate you rating each one separately.

If you do not wish to provide this information, it will not affect your care in any way. The information will be kept confidential and stored securely.

Please can you complete the following information:

Your name .....

Date of birth .....

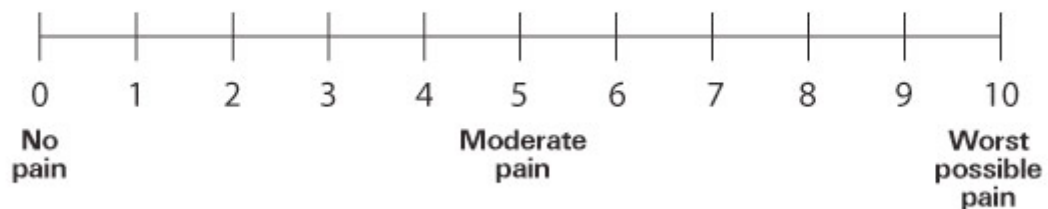
Date of completed .....

Site of scar on your body .....

**1. Pain assessment**

Please mark on the line how severe the pain is from your scar.

**0-10 Numeric Pain Intensity Scale \***



## 2. Itch assessment

Please mark on the line how severe the itch is from your scar, both in the day (top line) and at night (bottom line).

### Visual Analogue Scale (VAS)

#### VAS for itch intensity

No itch <sup>0</sup> \_\_\_\_\_ <sup>10</sup> Worst imaginable itch

#### VAS for sleep disturbance (nocturnal itch)

No sleep loss <sup>0</sup> \_\_\_\_\_ <sup>10</sup> I cannot sleep at all

## 3. POSAS scar assessment scale

The POSAS questions below are a rigorous means of assessing scars that are used internationally. *Please tick the circle that best indicates the symptoms that you get from your scar.*

	<i>No, no complaints</i>	1	2	3	4	5	6	7	8	9	10	<i>Yes, worst imaginable</i>
Is the scar painful?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is the scar itching?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	<i>No, as normal skin</i>	1	2	3	4	5	6	7	8	9	10	<i>Yes, very different</i>
Is the color of the scar different?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is the scar more stiff?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is the thickness of the scar different?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is the scar irregular?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Thank you for your help in completing this questionnaire. If you have any questions, please feel to ask at your appointment or email Jon Pleat on [jon@scarteam.co.uk](mailto:jon@scarteam.co.uk)