

The New Fibromyalgia: Beyond "Tender Points"

Diagnostic criteria from The American College of Rheumatology, 2010-2012
References: <http://1.usa.gov/bbCF7d>, <http://1.usa.gov/gJzSHR>, <http://bit.ly/15aMr5R>



PART 1 : Pain Symptoms: Check ALL the areas where you experienced pain in the last WEEK:

- | | | |
|-------------------------------------|------------------------------------|------------------------------------|
| Trunk: | Left: | Right: |
| <input type="checkbox"/> Chest | <input type="checkbox"/> Jaw | <input type="checkbox"/> Jaw |
| <input type="checkbox"/> Neck | <input type="checkbox"/> Shoulder | <input type="checkbox"/> Shoulder |
| <input type="checkbox"/> Abdomen | <input type="checkbox"/> Upper arm | <input type="checkbox"/> Upper arm |
| <input type="checkbox"/> Upper back | <input type="checkbox"/> Lower arm | <input type="checkbox"/> Lower arm |
| <input type="checkbox"/> Lower back | <input type="checkbox"/> Hip | <input type="checkbox"/> Hip |
| | <input type="checkbox"/> Upper leg | <input type="checkbox"/> Upper leg |
| | <input type="checkbox"/> Lower leg | <input type="checkbox"/> Lower leg |

Pain Symptom Score = Total number of boxes you checked: _____



PART 2 : Energy & Other Symptoms

Energy Symptoms: How severe were these, in the past WEEK?

Problem:	Score 0 = no problem in past week	Score 1= mild, or on-and-off problem	Score 2 = moderately or often problematic	Score 3 = severe, continuous problem
<i>Fatigue – tiring easily, no energy</i>				
<i>Waking unrefreshed</i>				
<i>“Brain fog” or trouble thinking, focusing</i>				

Other Symptoms: CIRCLE any of these 3 that you have experienced in the last 6 MONTHS:

Headache

Lower abdomen pain or cramps

Depression

_____ Energy Symptom Score, total
 + _____ Other Symptom Score: how many did you circle?
 = _____ Total: add up Energy + Other Symptom Scores



PART 3 : Adding it all up

- **IF** you have had the same symptoms, at about the same level, for 3 months or more,
- and **IF** the symptoms cannot be explained by another health condition (like low thyroid, lupus, HIV, etc.), or by drugs (like sedating medications, or chemotherapy) or alcohol addiction,
- and **IF** your Pain Symptom Score is 7 or more, **AND** your Energy & Other Symptom Score is 5 or more...
- OR **IF** your Pain Symptom Score is 3-6, **AND** your Energy & Other Symptom Score is 9 or more...

...You may have Fibromyalgia. **IF NOT...** please ask your doctor to rule out other causes!