

# T-RSI SCALE

## THROWER'S RETURN TO SPORT AFTER INJURY

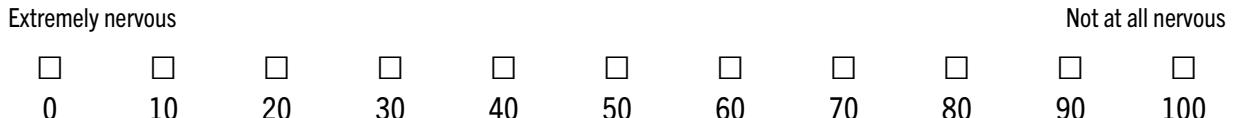
Name: \_\_\_\_\_

Date: \_\_\_\_\_

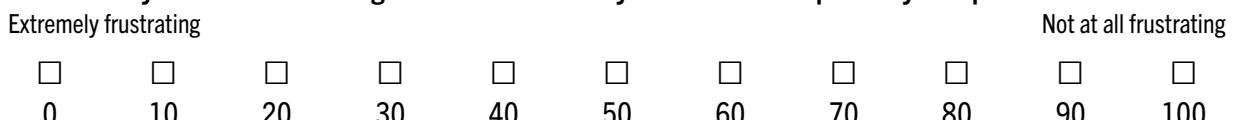
1

*Instructions: Place a mark in the box which best describe you in relation to the descriptors*

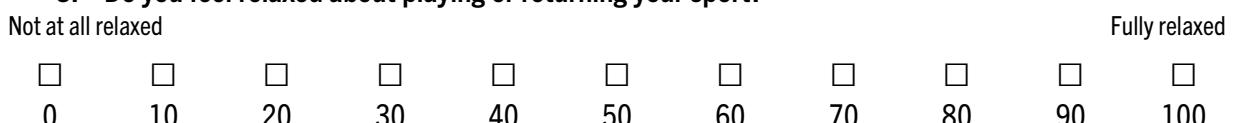
**1. Are you nervous about playing your sport?**



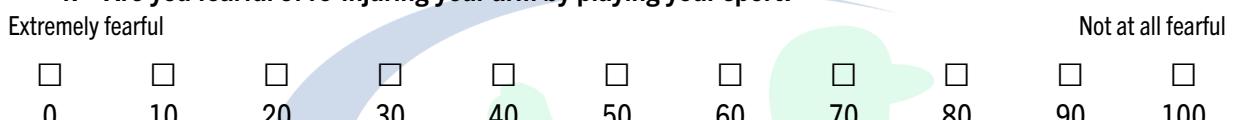
**2. Do you find it frustrating to have to consider your arm with respect to your sport?**



**3. Do you feel relaxed about playing or returning your sport?**



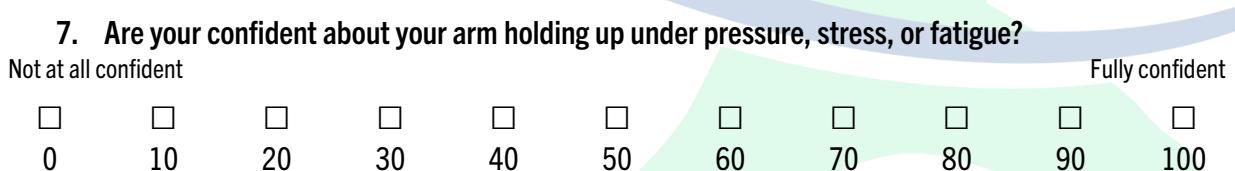
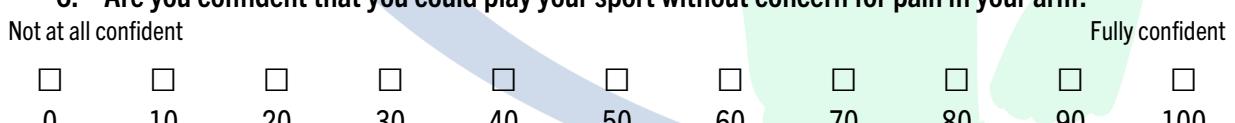
**4. Are you fearful of re-injuring your arm by playing your sport?**



**5. Are you confident that you can throw without pain?**



**6. Are you confident that you could play your sport without concern for pain in your arm?**

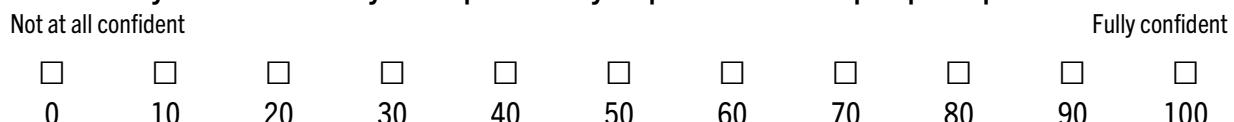


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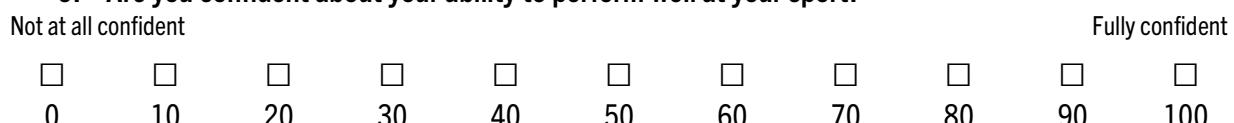
## THROWER'S RETURN TO SPORT AFTER INJURY

2

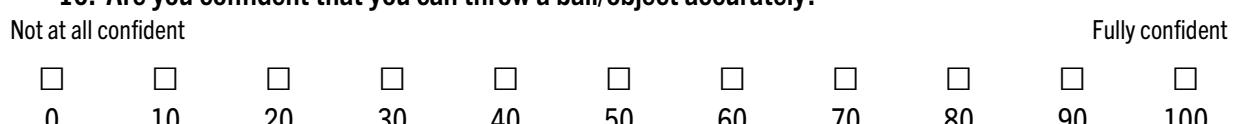
### 8. Are you confident that you can perform at your previous level of sport participation?



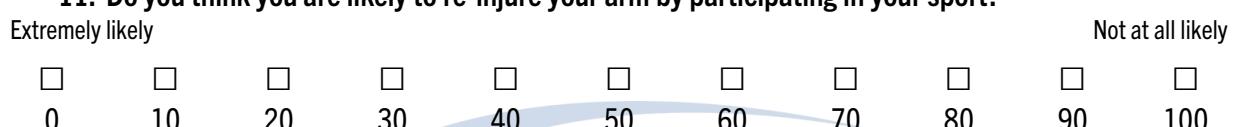
### 9. Are you confident about your ability to perform well at your sport?



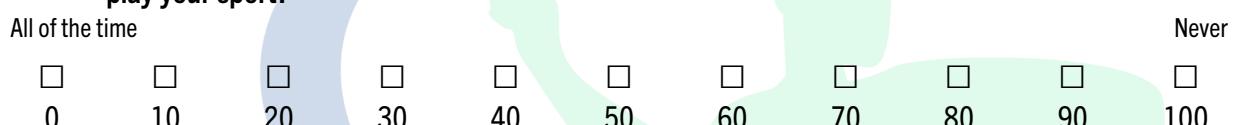
### 10. Are you confident that you can throw a ball/object accurately?



### 11. Do you think you are likely to re-injure your arm by participating in your sport?



### 12. Do thoughts of having to go through surgery and rehabilitation again prevent you from wanting to play your sport?



Total score: \_\_\_\_\_/12 = \_\_\_\_\_%

Optimal score for initiating throwing =>60%

Optimal score for return to competition =>65%

