

# VISUAL ANALOG TESTING SCALE (VATS)

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**1. How would you rate your strength in the NON-FLEXTEND® hand?**

WEAK  STRONG

**2. How would you rate your strength in the FLEXTEND® hand?**

WEAK  STRONG

**3. How would you rate your endurance levels in the NON-FLEXTEND® hand?**

*(The ability to work without hand fatigue)*

NO ENDURANCE  HIGH ENDURANCE

**4. How would you rate your endurance levels in the FLEXTEND® hand?**

*(The ability to work without hand fatigue)*

NO ENDURANCE  HIGH ENDURANCE

**5. How would you rate your flexibility levels in the NON-FLEXTEND® hand?**

NO FLEXIBILITY  GREAT FLEXIBILITY

**6. How would you rate your flexibility levels in the FLEXTEND® hand?**

NO FLEXIBILITY  GREAT FLEXIBILITY

**7. How would you rate your overall function and performance in the NON-FLEXTEND® hand?**

LOW PERFORMANCE  HIGH PERFORMANCE

**8. How would you rate your overall function and performance in the FLEXTEND® hand?**

LOW PERFORMANCE  HIGH PERFORMANCE