

# PROFORMA/QUESTIONNAIRE

## DEMOGRAPHIC DATA:

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

AGE: \_\_\_\_\_

PARITY: \_\_\_\_\_

MODE OF DELIVERY: C-SECTION/ NORMAL

SEX: M/F

OCCUPATION: \_\_\_\_\_

DIASTESIS RECTI ABDOMINIS: \_\_\_\_\_

Split Rectus Abdominis: yes/ no

Finger width palpation (1.5cm per finger width): \_\_\_\_\_

Above Umbilical level: \_\_\_\_\_

At umbilical level: \_\_\_\_\_

Below umbilical level: \_\_\_\_\_

Caliper measurement (in cm): \_\_\_\_\_

Above umbilical level: \_\_\_\_\_

At umbilical level: \_\_\_\_\_

Below umbilical level: \_\_\_\_\_

**Numeric pain rating scale:      low back pain: yes/ no**

### 0-10 NUMERIC PAIN RATING SCALE

