

You Only Younger

7002 Riverbrook Dr #700
Sugar Land, TX 77479
281-937-7537

Hyperhidrosis Disease Severity Scale

“How would you rate the severity of your hyperhidrosis?”

1	My underarm sweating is never noticeable and never interferes with my daily activities
2	My underarm sweating is tolerable but sometimes interferes with my daily activities
3	My underarm sweating is barely tolerable and frequently interferes with my daily activities
4	My underarm sweating is intolerable and always interferes with my daily activities

1. How many wetness outbreaks have you had in the last week? (Choose one)

None 1-2 3-5 More than 5

2. How severe of a problem is your underarm wetness? (Circle one number)

1 2 3 4 5 6 7 8 9 10

1 = Not a problem

10 = Severe problem

Patient Initials:

Date:

For office use only:

Please specify at what point the questionnaire was provided to patient

Baseline – Before procedure

Post Treatment Follow up: Select one: 30 days 60 days 90 days Other:

Treatment 1 Date:

Treatment 2 Date: