



Covenant HealthCare
1447 North Harrison
Saginaw, MI 48602

**QUESTIONNAIRE / RPE - SCALE
RATING OF PERCEIVED EXERTION**

PF08859 (R 3/13)

Activity Rated by Patient: _____

PATIENT I.D. _____

Rating	Description
6	NO EXERTION AT ALL
7	EXTREMELY LIGHT
8	
9	VERY LIGHT
10	
11	LIGHT
12	
13	SOMEWHAT HARD
14	
15	HARD (HEAVY)
16	
17	VERY HARD
18	
19	EXTREMELY HARD
20	MAXIMAL EXERTION