

Oswestry Back Disability Index

This questionnaire is designed to help us better understand how your back pain **affects your ability to manage everyday life** activities. Please **circle** the number that applies to you. Although you may consider that two of the statements in any one section relate to you, please mark the box that **most closely** describes your present-day situation.

Pain Intensity

- My pain is mild to moderate. I do not need pain killers.
- The pain is bad, but I manage without pain killers.
- Pain killers give complete relief from pain.
- Pain killers give moderate relief from pain.
- Pain killers give very little relief from pain.
- Pain killers have no effect on the pain.

Personal Care

- I can look after myself normally without causing extra pain.
- I can look after myself normally, but it causes extra pain.
- It is painful to look after myself, I am slow and careful.
- I need some help but manage most of my personal care.
- I need help every day in most aspects of self-care.
- I do not get dressed. I wash with difficulty and stay in bed.

Lifting

- I can lift heavy weights without causing extra pain.
- I can lift heavy weights, but it gives me extra pain.
- Pain prevents me from lifting heavy weights off the floor.
- Pain prevents me from lifting heavy weights.
- I can lift only very light weights.
- I cannot lift or carry anything at all.

Walking

- I can walk as far as I wish.
- Pain prevents me from walking more than 1 mile.
- Pain prevents me from walking more than 1/2 mile.
- Pain prevents me from walking more than 1/4 mile.
- I can walk only if I use a cane or crutches.
- I am in bed or in a chair for most of every day.

Sitting

- I can sit in any chair for as long as I like.
- I can sit in my favorite chair only, but for as long as I like.
- Pain prevents me from sitting for more than 1 hour.
- Pain prevents me from sitting for more than 1/2 hour.
- Pain prevents me from sitting for more than 10 minutes.
- Pain prevents me from sitting at all.

Standing

- I can stand as long as I want without extra pain.
- I can stand as long as I want, but it gives me extra pain.
- Pain prevents me from standing for more than 1 hour.
- Pain prevents me from standing more than 1/2 hour.
- Pain prevents me from standing more than 10 minutes.
- Pain prevents me from standing at all.

Sleeping

- Pain does not prevent me from sleeping well.
- I sleep well but only when taking medication.
- Even when I take medication, I sleep less than 6 hours.
- Even when I take medication, I sleep less than 4 hours.
- Even when I take medication, I sleep less than 2 hours.
- Pain prevents me from sleeping at all.

Social Life

- Social life is normal and causes me no extra pain.
- Social life is normal, but increases the degree of pain.
- Pain affects my social life by limiting only my more energetic interests.
- Pain has restricted my social life, and I do not go out as often.
- Pain has restricted my social life to my home.
- I have no social life because of pain.

Changing Degree of Pain

- My pain is rapidly getting better
- My pain fluctuates but overall is definitely getting better.
- My pain is getting better but improvement is slow.
- My pain is neither getting better or worse.
- My pain is gradually worsening.
- My pain is rapidly worsening.

Traveling

- I can travel anywhere without extra pain.
- I can travel anywhere, but it gives me extra pain.
- Pain is bad, but I manage journeys over 2 hours.
- Pain restricts me to journeys of less than 1 hour.
- Pain restricts me to necessary journeys under 1/2 hr.
- Pain prevents traveling except to the doctor or hospital.

Patient signature _____ Date _____

References:

Fairbank, J., Davies, J., et. Al. The Oswestry Low Back Pain Disability Questionnaire. *Physiother.*, 1980, 66 (18), 271-273.
Hudson-Cook, N., Tomes-Nicholson, K. The revised Oswestry disability questionnaire. Thesis, Anglo-European College of Chiro., 1988.
Baker, D. J., Pynsent, P. B. and Fairbank, J. C. T. The Oswestry Disability Index revisited: Its reliability, repeatability and validity.