NECK DISABILITY INDEX

| Date Patient's Name | | |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| PLEASE READ: Answer each of the 10 sections by marking the ONE BOX that most applies to your NECK PAIN. | | |
| SECTI | ION 1: Pain Intensity | SECTION 6: Concentration |
| □ Ih | ave no pain at the moment. | □ I can concentrate fully when I want to with no difficulty. |
| ☐ Th | ne pain is very mild at the moment. | □ I can concentrate fully when I want to with slight |
| | ne pain is moderate at the moment. | difficulty. |
| ☐ Th | ne pain is fairly severe at the moment. | I have a fair degree of difficulty in concentrating when I |
| | e pain is very severe at the moment. | want to. |
| | ne pain is the worst imaginable at the moment. | I have a lot of difficulty in concentrating when I want to. I have a great deal of difficulty in concentrating when I |
| | ION 2: Personal Care (Washing, Dressing, etc.) | want to. |
| ex | an look after myself normally without causing tra pain. | ☐ I cannot concentrate at all. |
| | an look after myself normally but it causes extra | SECTION 7: Work |
| | in. | ☐ I can do as much work as I want to. |
| | is painful to look after myself and I am slow and | ☐ I can only do my usual work, but no more. |
| | reful. | ☐ I can do most of my usual work, but no more. |
| | eed some help but manage most of my personal | ☐ I cannot do my usual work. |
| _ ca | | ☐ I can hardly do any work at all. |
| □Id | need help every day in most aspects of self care. I not get dressed, I wash with difficulty and stay | ☐ I cannot do any work at all. |
| in | bed. | SECTION 8: Driving |
| | | ☐ I can drive my car without any neck pain at all. |
| | ION 3: Lifting | ☐ I can drive my car as long as I want with slight pain in |
| | an lift heavy weights without extra neck pain. | my neck. |
| | an lift heavy weights but it gives extra neck pain. | ☐ I can drive my car as long as I want with moderate pain in |
| | eck pain prevents me from lifting heavy weights | my neck. |
| | f the floor, but I can manage if they are | ☐ I cannot drive my car as long as I want because of |
| | nveniently positioned, for example on a table. | moderate pain in my neck. |
| bu | eck pain prevents me from lifting heavy weights, It I can manage light to medium weights if they are Inveniently positioned. | I can hardly drive at all because of severe pain in my nec I cannot drive my car at all because of the pain in my nec |
| | an lift very light weights. | SECTION 9: Sleeping |
| | annot lift or carry anything at all. | ☐ I have no trouble sleeping. |
| | annot int or carry anything at an. | ☐ My sleep is slightly disturbed (less than 1 hr. sleepless). |
| SECTI | ION 4: Reading | ☐ My sleep is mildly disturbed (1-2 hrs. sleepless). |
| | an read as much as I want to with no pain in my | ☐ My sleep is moderately disturbed (2-3 hrs. sleepless). |
| | ck. | ☐ My sleep is greatly disturbed (3-5 hrs. sleepless). |
| _ | an read as much as I want to with slight pain in | ☐ My sleep is completely disturbed (5-7 hrs. sleepless). |
| | y neck. | in in cloop to completely alletander (or mer cloop loce). |
| □ lc | an read as much as I want with moderate pain in my | SECTION 10: Recreation I am able to engage in all my recreational activities with |
| | annot read as much as I want because of moderate | no neck pain at all. |
| | in in my neck. | ☐ I am able to engage in all my recreational activities with |
| □İc | an hardly read at all because of severe pain in my | some pain in my neck. I am able to engage in most but not all of my usual |
| _ | annot read at all because of the pain in my neck. | recreational activities because of pain in my neck. |
| | ION 5: Headaches | I am able to engage in a few of my usual recreational activities because of pain in my neck. |
| | ave no headaches at all. | □ I can hardly engage in any recreational activities because |
| _ | lave no neadaches at an. lave slight headaches which come infrequently. | of pain in my neck. |
| | lave slight headaches which come infrequently. | or pain in my neck. ☐ I cannot engage in any recreational activities at all |
| | nave moderate headaches which come infrequently. | |
| | | because of pain in my neck. |
| | ave severe headaches which come frequently. ave headaches almost all the time. | |
| | | |
| How Strong is Your Pain? | | |
| Please place an "X" on the line below at the point which you feel represents your pain <u>right now</u> . | | |

No Pain _____ Excruciating (the worst possible)