



Oswestry Disability Index Questionnaire

Patient Name _____ Date _____

Pain Intensity

- 0 I have no pain at the moment.
- 1 The pain is very mild at the moment.
- 2 The pain is moderate at the moment.
- 3 The pain is fairly severe at the moment.
- 4 The pain is very severe at the moment.
- 5 The pain is the worst imaginable at the moment.

Personal Care (Washing, dressing, etc)

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

Lifting (Pets, groceries, books, tools, vacuum cleaner, etc)

- 0 I can lift heavy weights without extra pain.
- 1 I can lift heavy weights, but it gives me extra pain.
- 2 Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g. on a table).
- 3 Pain prevents me from lifting heavy weights, but I can manage light to medium weights if they are conveniently positioned.
- 4 I can lift only very light weights.
- 5 I cannot lift or carry anything at all.

Walking (If your answer falls between two choices, please select the lesser distance.)

- 0 Pain does not prevent me from walking any distance.
- 1 Pain prevents me from walking more than a mile.
- 2 Pain prevents me from walking more than ¼ of a mile.
- 3 Pain prevents me from walking more than 100 yards.
- 4 I can only walk using a stick, crutches or walker.
- 5 I am in bed most of the time and have to crawl to the toilet.

Sitting (If your answer falls between two choices, please select the lesser amount of time.)

- 0 I can sit in any chair as long as I like.
- 1 I can sit in my favorite chair as long as I like.
- 2 Pain prevents me from sitting for more than one hour.
- 3 Pain prevents me from sitting for more than ½ an hour.
- 4 Pain prevents me from sitting for more than 10 minutes.
- 5 Pain prevents me from sitting at all.

Standing (If your answer falls between two choices, please select the lesser amount of time.)

- 0 I can stand as long as I want without extra pain.
- 1 I can stand as long as I want, but it gives me extra pain.
- 2 Pain prevents me from standing for more than one hour.
- 3 Pain prevents me from standing for more than ½ an hour.
- 4 Pain prevents me from standing for more than 10 minutes.
- 5 Pain prevents me from standing at all.

Sleeping (If your answer falls between two choices, please select the lesser amount.)

- 0 My sleep is never disturbed by pain.
- 1 My sleep is occasionally disturbed by pain.
- 2 Because of pain, I have less than six hours of sleep.
- 3 Because of pain, I have less than four hours of sleep.
- 4 Because of pain, I have less than two hours of sleep.
- 5 Pain prevents me from sleeping at all.

Sex Life

- 0 My sex life is normal and causes no extra pain.
 - 1 My sex life is normal, but causes some extra pain.
 - 2 My sex life is nearly normal, but is very painful.
 - 3 My sex life is severely restricted by pain.
 - 4 My sex life is nearly absent because of pain.
 - 5 Pain prevents any sex life at all.
- Not applicable (not sexually active at this time for reasons not related to pain)

Social Life

- 0 My social life is normal and causes me no extra pain.
- 1 My social life is normal, but increases the degree of pain.
- 2 Pain has no significant effect on my social life apart from limiting my more energetic interests (e.g. sports, etc).
- 3 Pain has restricted my social life, and I do not go out as often.
- 4 Pain has restricted my social life to my home.
- 5 I have no social life because of pain.

Traveling

- 0 I can travel anywhere without pain.
- 1 I can travel anywhere, but it gives extra pain.
- 2 Pain is bad, but I manage journeys over two hours.
- 3 Pain restricts me to short journeys of less than one hour.
- 4 Pain restricts me to short, necessary journeys under 30 minutes.
- 5 Pain prevents me from traveling except to receive treatment.

Total Score _____ Signature _____