

NECK DISABILITY INDEX QUESTIONNAIRE

Name: _____

Date: ____ / ____ / ____

Please Read: This questionnaire is designed to enable us to understand how much your neck pain has affected your ability to manage everyday activities. Please answer each section by selecting the **ONE CHOICE** that most applies to you. We realize that you may feel that more than one statement may relate to you, but **Please just select the one choice which closely describes your problem right now.**

SECTION 1 - Pain Intensity

- ☐ A. I have no pain at the moment.
- ☐ B. The pain is mild at the moment.
- ☐ C. The pain comes and goes and is moderate.
- ☐ D. The pain is moderate and does not vary much.
- ☐ E. The pain is severe but comes and goes.
- ☐ F. The pain is severe and does not vary much.

SECTION 2 - Personal Care

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

SECTION 3 - Lifting

- ☐ A. I can lift heavy weights without extra pain.
- ☐ B. I can lift heavy weights, but it causes extra pain.
- ☐ C. Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned, e.g. on the table.
- ☐ D. Pain prevents me from lifting heavy weights, but I can manage light to medium weights if they are conveniently positioned.
- ☐ E. I can lift very light weights.
- ☐ F. I cannot lift or carry anything at all.

SECTION 4 - Reading

- ☐ A. I can read as much as I want to with no pain in my neck.
- ☐ B. I can read as much as I want with slight pain in my neck.
- ☐ C. I can read as much as I want with moderate pain in my neck.
- ☐ D. I cannot read as much as I want because of moderate pain in my neck.
- ☐ E. I cannot read as much as I want because of severe pain in my neck.
- ☐ F. I cannot read at all.

SECTION 5 - Headache

- ☐ A. I have no headaches at all.
- ☐ B. I have slight headaches which come infrequently.
- ☐ C. I have moderate headaches which come infrequently.
- ☐ D. I have moderate headaches which come frequently.
- ☐ E. I have severe headaches which come frequently.
- ☐ F. I have headaches almost all the time.

SECTION 6 - Concentration

- ☐ A. I can concentrate fully when I want to with no difficulty.
- ☐ B. I can concentrate fully when I want to with slight difficulty.
- ☐ C. I have a fair degree of difficulty in concentrating when I want to.
- ☐ D. I have a lot of difficulty in concentrating when I want to.
- ☐ E. I have a great deal of difficulty in concentrating when I want to.
- ☐ F. I cannot concentrate at all.

SECTION 7 - Work

- ☐ A. I can do as much work as I want to.
- ☐ B. I can only do my usual work, but no more.
- ☐ C. I can do most of my usual work, but no more.
- ☐ D. I cannot do my usual work.
- ☐ E. I can hardly do any work at all.
- ☐ F. I cannot do any work at all.

SECTION 8 - Driving

- ☐ A. I can drive my car without neck pain.
- ☐ B. I can drive my car as long as I want with slight pain in my neck.
- ☐ C. I can drive my car as long as I want with moderate pain in my neck.
- ☐ D. I cannot drive my car as long as I want because of moderate pain in my neck.
- ☐ E. I can hardly drive my car at all because of severe pain in my neck.
- ☐ F. I cannot drive my car at all.

SECTION 9 - Sleeping

- ☐ A. I have no trouble sleeping.
- ☐ B. My sleep is slightly disturbed (less than 1 hour sleepless).
- ☐ C. My sleep is mildly disturbed (1-2 hours sleepless).
- ☐ D. My sleep is moderately disturbed (2-3 hours sleepless).
- ☐ E. My sleep is greatly disturbed (3-5 hours sleepless).
- ☐ F. My sleep is completely disturbed (5-7 hours sleepless).

SECTION 10 - Recreation

- ☐ A. I am able to engage in all recreational activities with no pain in my neck at all.
- ☐ B. I am able to engage in all recreational activities with some pain in my neck.
- ☐ C. I am able to engage in most, but not all recreational activities because of pain in my neck.
- ☐ D. I am able to engage in a few of my usual recreational activities because of pain in my neck.
- ☐ E. I can hardly do any recreational activities because of pain in my neck.
- ☐ F. I cannot do any recreational activities at all.

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PLEASE RATE YOUR PAIN ON A SCALE FROM 0-10 WITH 10 BEING THE WORST PAIN EVER.

Please rate your pain when it is at its worst: 0 1 2 3 4 5 6 7 8 9 10

Please rate your pain when it is at its best: 0 1 2 3 4 5 6 7 8 9 10

Please rate your pain today: 0 1 2 3 4 5 6 7 8 9 10

Please rate your pain on average: 0 1 2 3 4 5 6 7 8 9 10

Score: _____