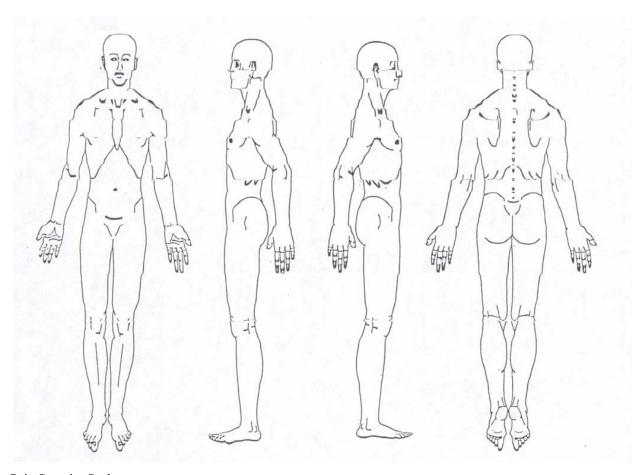
Neck Pain Drawing

Patient Name	Date
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Using the following descriptive symbols, draw the location of your pain on the body outlines below. In addition, mark the level of your pain on the pain scale at the bottom of the page.

Ache	Burning	Numbness	Pins % Needles	Stabbing	Other
<<<	$\Delta\Delta\Delta\Delta$	=====	::::::::::	//////	000



Pain Severity Scale:

Rate the severity of your pain by circling one number on the following scale.

No Pain 0 1 2 3 4 5 6 7 8 9 10 Excruciating Pain

Neck Index

This questionnaire will give the doctor information about how your neck condition affects your everyday life. Please answer every section and mark only the **one box** that applies to you. If two statements in one section relate to you, please **mark the box which most closely describes your problem.**

Section 1 - Pain Intensity

- 1 lave 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.

Section 2 – Personal Care (Washing/Dressing)

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

Section 3 - Lifting

- ① I can lift heavy weights without extra pain.
- ① I can lift heavy weights, but it causes extra pain.
- ② Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned, for example, on a table.
- ③ Pain prevents me from lifting heavy weights off the floor, 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.

Section 4 – Reading

- © I can read as much as I want with no neck pain.
- ① I can read as much as I want with slight neck pain.
- ② I can read as much as I want because of moderate pain.
- 3 I cannot read as much as I want because of my moderate neck pain.
- ④ I can hardly read at all because of severe neck pain.
- ⑤ I cannot read at all.

Section 5 - Headaches

- O I have not headaches at all.
- ①I have slight headaches which come infrequently.
- ② I have moderate headaches which come infrequently.
- 3 I have moderate headaches which come frequently.
- 4 I have severe headaches which come frequently.
- SI have headaches almost all the time

Section 6 – Concentration

- © I can concentrate fully when I want to with no difficulty.
- ① I can concentrate fully when I want to with slight difficulty.
- ② I have a fair degree of difficulty concentrating when I want to.
- 3 I have a lot of difficulty concentrating when I want to.
- (4) I have a great deal of difficulty concentrating when I want to.
- ⑤ I cannot concentrate at all.

Section 7 - Work

- 1 can do as much work as I want to.
- ① I can only do my usual work, but no more.
- ② I can only do most of my usual work, but no more.
- 3 I cannot do my usual work.
- ① I can hardly do any work at all.
- ⑤ I cannot do any work at all.

Section 8 - Driving

- 1 can drive my care without neck pain.
- ① I can drive my car as long as I want with slight neck pain.
- ② I can drive my car as long as I want with moderate neck pain.
- ③ I cannot drive my car as long as I want because of moderate neck pain.
- 4 I can hardly drive at all because of severe neck pain.
- ⑤ I cannot drive my car at all.

Section 9 – Sleeping

- 1 have no trouble sleeping.
- ① My sleep is slightly disturbed (less than 1 hr sleepless).
- ② My sleep is mildly disturbed (1-2 hrs. sleepless).
- ③ My sleep is greatly disturbed (2-3 hrs sleepless).
- ④ My sleep is greatly disturbed (3-5 hrs. sleepless).
- ⑤ My sleep is completely disturbed (5-7 hrs sleepless).

Section 10 - Recreation

- I am able to engage in all my recreation activities with no neck pain at all.
- ① I am able to engage in all my recreation activities with some neck pain.
- ② I am able to engage in most but not all my recreation activities
- ③ I am only able to engage in a few of my usual recreational activities because of neck pain.
- I can hardly do any recreation activities because of neck pain.
- ⑤ I cannot do any recreation activities at all.