

- I am able to do only light home activities. I am unable to vacuum the floor, do dishes, sweep, mop, and do laundry.
- I am unable to any home activities due to pain or other symptoms. I need help putting on clothes and taking a bath.

5. SLEEPING

- I normally have no difficulty sleeping due to pain or other symptoms.
- I have occasional difficulty sleeping due to pain and other symptoms. I wake up at night, resulting in 30-minute loss of sleep.
- I have occasional sleeping difficulties due to pain. I lose 10-15% of normal sleeping hours a night.
- I have frequent difficulty sleeping due to pain or other symptoms. I am restless most of the night. I lose 25% of normal sleeping hours a night.
- My sleeping hours are reduced about 50%. I usually need medications to sleep well.
- I have no normal sleeping hours. I am never able to sleep more than 2-3 hours without heavy medication. I never feel rested.

6. SITTING

- I can sit at my desk or drive my car normally with no pain.
- I can sit at my desk or drive my car with occasional annoying pain. I need to take breaks on long trips.
- Sitting or driving causes frequent annoying pain. Pain becomes severe if I sit for more than two hours and I need to change positions.
- I can sit or drive for 3-4 hours, but I frequent breaks to change my body position. I am unable to sit constantly over 1 hour.
- I cannot sit or drive for more than 30 minutes at a time due to pain severity.
- I cannot sit at my desk, chair at home or drive my car at any time due to pain severity.

7. UPPER BODY FUNCTION

- I am able to use my neck, shoulders, arms, and hands in all normal activities with no pain.
- I am able to use my neck, shoulders, arms, and hands in all normal activities with occasional annoying pain.
- I am able to lift and move my head and neck, lift my arms over my head, reach over my head, carry objects, and grip objects with my hands. I have occasional pain when lifting heavy objects over my head, which causes me to stop. Occasionally, I will have difficulty typing, feeling, or gripping objects with my hands due to either weakness or numbness. I am limited to light to moderate weights in my hands.
- I am able to lift my arms up to a height of my shoulder for short periods but not over my head, carry light to moderate weight objects, and grip with my hands. I get occasional pain when lifting heavy objects over my head. Occasionally, I will have difficulty typing, feeling, or gripping objects with my hands due to weakness or numbness. I drop objects two or three times a week. I have to use two hands for some activities that I could do with one hand before. I am limited to moderate weights.
- I am able to carry and grip light weight objects only. I get frequent pain when lifting any object above my waist and sometimes I am unable to lift to the height of my shoulder. I am not able to lift my arms upto the height of my shoulders and lift over my head. I frequently have difficulty feeling or gripping objects with my hands due either to weakness or numbness. I drop objects daily unless I am very careful. I have to use two hands for most activities where I had to use only one before. I have frequent difficulty typing, using a computer and writing letters. I am limited to light weights. I have lost 75% of hand-lifting ability.
- I am able to lift my arms to the level of my shoulders only, and just lifting my arms above my waist causes severe pain. I am unable to lift any object over the height of my waist. Every time I lift my arms I get severe pain in my neck, shoulders, or arms, and I have to lower my arm or arms immediately. I am unable to write letters. I am unable to lift 5 lbs. in my hands.

8. LOWER BODY FUNCTION (low back and legs)

- I can sit, drive, stand, squat, stoop, walk, bend my knees, use my feet, and lift normal heavy weights with no low back pain.

- I can sit, drive, stand, squat, stoop, walk, bend my knees, use my feet, and lift heavy weights with occasional annoyance of mild pain. I can do all of these activities, but more slowly if demands are high.
- Moderate levels of low back/leg pain happen if I do prolonged or repeated sitting, driving, standing, stooping, walking, or bending. I can lift heavy objects if properly positioned. Pain limits me to walking to 1/2 mile. I am unable to stand for more than 45 minutes at a time. Repeated stooping or bending for more than 20 minutes will cause me to slow down.
- Moderate to severe levels of low back/leg pain happen if I do prolonged or repeated sitting, driving, standing, stooping, walking, or bending. I can't lift heavy objects at all and am able to lift moderately heavy objects (1/4 my body weight) if properly positioned. Pain limits me to walking to 1/4 mile. I am unable to stand for more than 30 minutes at a time.
- I experience severe levels of pain if I do short-term sitting, standing, stooping, walking, or bending. I can't lift moderate or heavy objects at all and am able to lift light objects only (10-15 lbs). I need a lumbar belt support and/or a cane for support to walk. Pain limits me to walking to one block. I am unable to stand for more than 10 minutes at a time.
- I experience severe levels of pain if I do sitting, driving, standing, stooping, walking, or bending. I am able to walk only with the use of a cane, crutches, or a wheelchair. I need to lie down frequently to relieve pain. I am unable to lift or carry any object over 5 lbs. I need lumbar belt support to move about in my home. During daytime I lie down for 3-4 hours.

9. HEADACHES

- I have no headaches normally.
- I have headaches occasionally, which only annoy me at work or at home.
- I have occasional headaches that are intense enough to slow me down at work or at home.
- I have occasional headaches that cause me to stop and rest for short periods of time.
- I have frequent headaches that stop all of my activity. I frequently lose time at work or have delays in work production due to pain.
- I have frequent headaches that cause my not being able to go to work, school, or home, or participate in recreational activities.

10. MENTAL ABILITY

- My memory and mental function are normal. I have no difficulty with work or home demands.
- I am able to perform most mental activities and am able to function at work, at home, and in society. I have occasional slight difficulty with complex tasks, memory and math.
- I am able to function normally in most work, home, and society activities. Complex tasks, multiple tasks, and intense concentration tasks are difficult, often resulting in mistakes. I have noticed about a 10-25% memory loss and a performance decline recently.
- I am not able to handle difficult or complex tasks. I have notable memory loss and difficulty making decisions. My friends, family, and I have noticed recent personality changes. It takes much longer to do work and home tasks.
- I am able to handle only simple tasks one at a time. I am unable to keep a full-time job. My job performance ratings are poor. My reaction times have slowed down a lot. I have noticed about a 51-75% memory loss and job performance decline recently.
- I am unable to hold any job at all. I am unable to balance my checkbook and need help. I am unable to shop without a shopping list. I have severe performance difficulties. I am unable to remember instructions.

TOTAL SCORE (1-10): _____ x 2 = _____

DO WRITE HERE

The Neck Disability Index

Patient name: _____ File# _____ Date: _____

Please read instructions:

This questionnaire has been designed to give the doctor information as to how your neck pain has affected your ability to manage everyday life. Please answer every section and mark in each section only the ONE box that applies to you. We realize that you may consider that two of the statements in any one section relate to you, but please just mark the box that most closely describes your problem.

SECTION 1-PAIN INTENSITY

- I have no pain at the moment.
- The pain is very mild at the moment.
- The pain is moderate at the moment.
- The pain is fairly severe at the moment.
- The pain is very severe at the moment.
- The pain is the worst imaginable at the moment.

SECTION 2-PERSONAL CARE (Washing, Dressing, etc.)

- 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 and 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.

SECTION 3-LIFTING

- I can lift heavy weights without extra pain.
- I can lift heavy weights, but it gives extra pain.
- Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned, for example, on a table.
- Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- I can lift very light weights.
- I cannot lift or carry anything at all.

SECTION 4-READING

- I can read as much as I want to, with no pain in my neck.
- I can read as much as I want to, with slight pain in my neck.
- I can read as much as I want to, with moderate pain in my neck.
- I can't read as much as I want, because of moderate pain in my neck.
- I can hardly read at all, because of severe pain in my neck.
- I cannot read at all.

SECTION 5-HEADACHES

- I have no headaches at all.
- I have slight headaches that come infrequently.
- I have moderate headaches that come infrequently.
- I have moderate headaches that come frequently.
- I have severe headaches that come frequently.
- I have headaches almost all the time.

SECTION 6-CONCENTRATION

- I can concentrate fully when I want to, with no difficulty.
- I can concentrate fully when I want to, with slight difficulty.
- I have a fair degree of difficulty in concentrating when I want to.
- I have a lot of difficulty in concentrating when I want to.
- I have a great deal of difficulty in concentrating when I want to.
- I cannot concentrate at all.

SECTION 7-WORK

- I can do as much work as I want to.
- I can do my usual work, but no more.
- I can do most of my usual work, but no more.
- I cannot do my usual work.
- I can hardly do any work at all.
- I can't do any work at all.

SECTION 8-DRIVING

- I can drive my car without any neck pain.
- I can drive my car as long as I want, with slight pain in my neck.
- I can drive my car as long as I want, with moderate pain in my neck.
- I can't drive my car as long as I want, because of moderate pain in my neck.
- I can hardly drive at all, because of severe pain in my neck.
- I can't drive my car at all.

SECTION 9-SLEEPING

- I have no trouble sleeping.
- My sleep is slightly disturbed (less than 1 hr sleepless).
- My sleep is mildly disturbed (1-2 hrs sleepless).
- My sleep is moderately disturbed (2-3 hrs sleepless).
- My sleep is greatly disturbed (3-5 hrs sleepless).
- 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.
- I am able to engage in all my recreation activities, with some neck pain at all.
- I am able to engage in most, but not all, of my usual recreation activities, because of pain in my neck.
- I am able to engage in few of my recreation activities, because of pain in my neck.
- I can hardly do any recreation activities, because of pain in my neck.
- I can't do any recreation activities at all.

Instructions:

1. The NDI is scored in the same way as the Oswestry Disability Index.
2. Using this system, a score of 10-28% (i.e., 5-14 points) is considered by the authors to constitute mild disability; 30-48% is moderate; 50-68% is severe; 72% or more is complete.