

## Neck Index

Name \_\_\_\_\_

Date \_\_\_\_\_

Please answer EVERY section by marking one statement that most closely describes your problem.

### Pain Intensity

- 0-I have no pain at the moment.
- 1-The pain is very mild at the moment.
- 2-The pain comes and goes and is moderate.
- 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.

### Sleeping

- 0-I have no trouble sleeping.
- 1-My sleep is slightly disturbed (less than 1 hour).
- 2-My sleep is mildly disturbed (1-2 hrs sleepless).
- 3-My sleep is moderately 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).

### Reading

- 0-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 with moderate neck pain.
- 3-I cannot read as much because of moderate pain.
- 4-I can hardly read at all because of severe neck pain.
- 5-I cannot read at all because of neck pain.

### Concentration

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

### Work

- 0-I can do as much work as I want.
- 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.
- 4-I can hardly do any work at all.
- 5-I cannot do any work at all.

### Personal Care

- 0-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.
- 5-I do not get dressed, I wash with difficulty and stay in bed.

### Lifting

- 0-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 (e.g., on a table).
- 3-Pain prevents me from lifting heavy weights off the floor, but I can manage light/medium weights if they are conveniently positioned.
- 4-I can only lift very light weights.
- 5-I cannot lift or carry anything at all.

### Driving

- 0-I can drive my car without any 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 pain.
- 4-I can hardly drive at all because of severe neck pain.
- 5-I cannot drive my car at all because of neck pain.

### Recreation

- 0-I am able to engage in all my recreation activities without pain.
- 1-I am able to engage in all my usual recreation activities with some neck pain.
- 2-I am able to engage in most but not all my usual recreation activities because of neck pain.
- 3-I am only able to engage in a few of my usual recreation activities because of neck pain.
- 4-I can hardly do any recreation activities because of neck pain.
- 5-I cannot do any recreation activities at all.

### Headaches

- 0-I have no headaches at all.
- 1-I 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.
- 5-I have headaches almost all the time.

$\text{Index Score} = \left[ \frac{\text{sum of all statements selected}}{\text{\# of section with a statement selected} \times 5} \right] \times 100$
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Neck Index Score \_\_\_\_\_