

NECK DISABILITY INDEX

PATIENT NAME _____ FILE # _____ DATE _____

This questionnaire has been designed to give the doctor information as to how your neck pain has affected your ability to manage in everyday life.

Please answer every section and mark in each section only ONE box which applies to you.

We realize you may consider that two of the statements in any one section relates to you, but please just mark the box which MOST CLOSELY describes your problem.

Section 1 – Pain Intensity

- 0 No pain at the moment.
- 1 Mild pain at the moment.
- 2 Moderate pain at the moment.
- 3 Fairly severe pain at the moment.
- 4 Very severe pain at the moment.
- 5 Worst imaginable pain at the moment.

Section 5 – Concentration

- 0 Can concentrate without difficulty.
- 1 Can concentrate with slight difficulty.
- 2 Can concentrate with fair difficulty.
- 3 Can concentrate with a lot of difficulty.
- 4 Can concentrate with extreme difficulty.
- 5 Cannot concentrate at all.

Section 2 – Personal Care

- 0 Personal care is normal without extra pain.
- 1 Personal care normal with extra help.
- 2 Personal care painful/slow and careful.
- 3 Manage most personal care with some help.
- 4 Needs help everyday in most aspects of care.
- 5 Difficulty dressing and washing/stays in bed.

Section 7 -- Work

- 0 Work is unrestricted.
- 1 Can do usual work but no more.
- 2 Can do most usual work, but no more.
- 3 Cannot do usual work.
- 4 Can hardly do any work.
- 5 Cannot do any work.

Section 3 – Lifting

- 0 Lifts heavy weights with no pain.
- 1 Lifts heavy weights with pain.
- 2 Can lift heavy weights from a table.
- 3 Can lift light weights from a table.
- 4 Can lift only very light weight.
- 5 Cannot lift or carry anything.

Section 8 -- Driving

- 0 Can drive without pain.
- 1 Driving causes slight neck pain.
- 2 Driving causes moderate neck pain.
- 3 Cannot drive long due to moderate pain.
- 4 Can hardly drive due to severe pain.
- 5 Pain prevents driving.

Section 4 – Reading

- 0 No pain while reading.
- 1 Slight pain while reading.
- 2 Moderate pain while reading.
- 3 Moderate pain prevents my reading.
- 4 Severe pain prevents reading.
- 5 Cannot read at all.

Section 9 -- Sleeping

- 0 No difficulties sleeping.
- 1 Sleep is mildly disturbed.
- 2 1-2 hours loss of sleep.
- 3 2-3 hours loss of sleep.
- 4 3-5 hours loss of sleep.
- 5 5-7 hours loss of sleep.

Section 5 – Headaches

- 0 No headaches.
- 1 Slight, infrequent headaches.
- 2 Moderate, infrequent headaches.
- 3 Moderate, frequent headaches.
- 4 Severe, frequent headaches.
- 5 Constant headaches.

Section 10 – Recreation

- 0 Recreation is not affected.
- 1 Some neck pain, but does not affect activity.
- 2 Some activity is affected by pain.
- 3 Most activity is affected by pain.
- 4 Activity severely restricted by pain.
- 5 Cannot do any activity.