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Oswestry Low Back Pain Disability Questionnaire



PRESENTED BY CLINIC PRO SOFTWARE INC.
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Oswestry Disability Index

Please complete this questionnaire. It is designed to tell us how your back pain affects your ability to function in every day life.

I have “Chronic Pain” or pain that has bothered me for 3 months or more:

Yes No

CHECK ONE OF THE FOLLOWING:

- Prior to Surgery
- After Surgery 3 Months
- After Surgery 1 year
- After Surgery 6 weeks
- After Surgery 6 Months
- After Surgery 2 years

Please answer each section below by checking the One Choice that applies the most to you at this time. (You may feel that more than one of the statement relates to you at this time, but it is very important that you Please check only one choice that best describes your problem at this time.

Section 1: Pain Intensity

- I can tolerate the pain I have without having to use pain killers. [0 points]
- The pain is bad but I manage without taking pain killers. [1 point]
- Pain killers give complete relief from pain . [2 points]
- Pain killers give moderate relief from pain. [3 points]
- Pain killers give very little relief from pain. [4 points]
- Pain killers have no effect on the pain and I do not use them. [5 points]

Section 2: Personal Care

- I can look after myself normally without causing extra pain. [0 points]
- I can look after myself normally but it causes extra pain. [1 point]
- It is painful to look after myself and I am slow and careful. [2 points]
- I need some help but manage most of my personal care. [3 points]
- I need help every day in most aspects of self care. [4 points]
- I do not get dressed wash with difficulty and stay in bed. [5 points]



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Section 3: Lifting

- I can lift heavy weights without extra pain. [0 points]
- I can lift heavy weights but it gives extra pain. [1 point]
- Pain prevents me from lifting heavy weights off the floor but I can manage if they are conveniently positioned for example on a table. [2 points]
- Pain prevents me from lifting heavy weights but I can manage light to medium weights if they are conveniently positioned. [3 points]
- I can lift only very light weights. [4 points]
- I cannot lift or carry anything at all. [5 points]

Section 4: Walking

- Pain does not prevent me walking any distance. [0 points]
- Pain prevents me walking more than 1 mile. [1 point]
- Pain prevents me walking more than 0.5 miles. [2 points]
- Pain prevents me walking more than 0.25 miles. [3 points]
- I can only walk using a stick or crutches. [4 points]
- I am in bed most of the time and have to crawl to the toilet. [5 points]

Section 5: Sitting

- I can sit in any chair as long as I like. [0 points]
- I can only sit in my favorite chair as long as I like. [1 point]
- Pain prevents me sitting more than 1 hour. [2 points]
- Pain prevents me from sitting more than 0.5 hours. [3 points]
- Pain prevents me from sitting more than 10 minutes. [4 points]
- Pain prevents me from sitting at all. [5 points]

Section 6: Standing

- I can stand as long as I want without extra pain. [0 points]
- I can stand as long as I want but it gives me extra pain. [1 point]
- Pain prevents me from standing for more than 1 hour. [2 points]
- Pain prevents me from standing for more than 30 minutes. [3 points]
- Pain prevents me from standing for more than 10 minutes. [4 points]
- Pain prevents me from standing at all. [5 points]



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Section 7: Sleeping

- Pain does not prevent me from sleeping well. [0 points]
- I can sleep well only by using tablets. [1 point]
- Even when I take tablets I have less than 6 hours sleep. [2 points]

Section 7: Sleeping (Cont.)

- Even when I take tablets I have less than 4 hours sleep. [3 points]
- Even when I take tablets I have less than 2 hours of sleep. [4 points]
- Pain prevents me from sleeping at all. [5 points]

Section 8: Sex Life

- My sex life is normal and causes no extra pain. [0 points]
- My sex life is normal but causes some extra pain. [1 point]
- My sex life is nearly normal but is very painful. [2 points]
- My sex life is severely restricted by pain. [3 points]
- My sex life is nearly absent because of pain. [4 points]
- Pain prevents any sex life at all. [5 points]
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Section 9: Social Life

- My social life is normal and gives me no extra pain. [0 points]
- My social life is normal but increases the degree of pain. [1 point]
- Pain has no significant effect on my social life apart from limiting energetic interests such as dancing. [2 points]
- Pain has restricted my social life and I do not go out as often. [3 points]
- Pain has restricted my social life to my home. [4 points]
- I have no social life because of pain. [5 points]

Section 10: Traveling

- I can travel anywhere without extra pain. [0 points]
- I can travel anywhere but it gives me extra pain. [1 point]
- Pain is bad but I manage journeys over 2 hours. [2 points]
- Pain restricts me to journeys of less than 1 hour. [3 points]
- Pain restricts me to short necessary journeys under 30 minutes. [4 points]
- Pain prevents me from traveling except to the doctor or hospital. [5 points]



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Interpretation:

Simply add up your points for each section and plug it in to the following formula in order to calculate your level of disability: $\text{point total} / 50 \times 100 = \% \text{ disability}$ (aka: 'point total' divided by '50' multiply by '100' = percent disability)

Example: on my last ODI I scored a 18. So, $18/50 \times 100 = 36\%$ disability:

ODI Scoring:

0% to 20% (minimal disability): Patients can cope with most activities of daily living. No treatment may be indicated except for suggestions on lifting, posture, physical fitness and diet. Patients with sedentary occupations (ex. secretaries) may experience more problems than others.

21%-40% (moderate disability): Patients may experience more pain and problems with sitting, lifting and standing. Travel and social life are more difficult. Patients may be off work. Personal care, sleeping and sexual activity may not be grossly affected.

Conservative treatment may be sufficient.

41%-60% (severe disability): Pain is a primary problem for these patients, but they may also be experiencing significant problems in travel, personal care, social life, sexual activity and sleep. A detailed evaluation is appropriate.

61%-80% (crippled): Back pain has an impact on all aspects of daily living and work. Active treatment is required.

81%-100%: These patients may be bed bound or exaggerating their symptoms. Careful evaluation is recommended.

References:

1. Fairbank JC, Pynsent PB. The Oswestry Disability Index. *Spine* 2000; 25(22):2940-2952

The Oswestry Disability Index Fairbank JC, Pynsent PB. Nuffield Orthopaedic Centre, Oxford, United Kingdom. jeremy.fairbank@ndos.ox.ac.uk

STUDY DESIGN: The Oswestry Disability Index (ODI) has become one of the principal condition-specific outcome measures used in the management of spinal disorders. This review is based on publications using the ODI identified from the authors' personal databases, the Science Citation Index, and hand searches of Spine and current textbooks of spinal disorders. **OBJECTIVES:** To review the versions of this instrument, document methods by which it has been validated, collate data from scores found in normal and back pain populations, provide curves for power calculations in studies using the ODI, and maintain the ODI as a gold standard outcome measure.

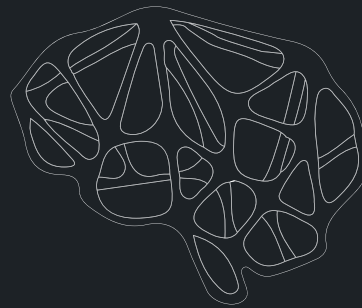
SUMMARY OF BACKGROUND DATA: It has now been 20 years since its original publication. More than 200 citations exist in the Science Citation Index. The authors have a large correspondence file relating to the ODI, that is cited in most of the large textbooks related to spinal disorders. **METHODS:** All the published versions of the questionnaire were identified. A systematic review of this literature was made. The various reports of validation were collated and related to a version.

RESULTS: Four versions of the ODI are available in English and nine in other languages. Some published versions contain misprints, and many omit the scoring system. At least 114 studies contain usable data. These data provide both validation and standards for other users and indicate the power of the instrument for detecting change in sample populations.

CONCLUSIONS: The ODI remains a valid and vigorous measure and has been a worthwhile outcome measure. The process of using the ODI is reviewed and should be the subject of further research. The receiver operating characteristics should be explored in a population with higher self-report disabilities. The behavior of the instrument is incompletely understood, particularly in sensitivity to real change.

PMID: 11074683 [PubMed - indexed for MEDLINE]

2. Fairbank JCT, Couper J, Davies JB. The Oswestry low Back Pain Questionnaire. *Physiotherapy* 1980; 66: 271-273.



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