

# Oswestry Back Disability Index

Patient Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Instructions: Please mark only ONE BOX in each section, which most closely describes your problem**

## Section 1- Pain Intensity

0. The pain comes and goes and is very mild
1. The pain is mild and does not vary much
2. The pain comes and goes and is moderate
3. The pain is moderate and does not vary much
4. The pain comes and goes and is severe
5. The pain is severe and does not vary much

## Section 2- Personal Care

0. I would not have to change my way of washing or dressing in order to avoid pain
1. I do not normally change my way of washing or dressing even though it causes some pain
2. Washing and dressing increase the pain but I manage not to change my way of doing it
3. Washing and dressing increase the pain and I find it necessary to change my way of doing it.
4. Because of the pain, I am unable to do some washing and dressing without help.
5. Because of the pain, I am unable to do any washing or dressing without help

## Section 3- 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.
3. Pain prevents me lifting heavy weight off the floor, but I can manage if they are conveniently positioned e/g/ on a table
4. pain prevents me from lifting heavy weights but I can manage light to medium weights if they are conveniently positioned e.g. on a table
5. I can lift only very light weights

## Section 4—Walking

0. I have no pain when walking
1. I have some pain when walking but it doesn't increase with distance
2. I cannot walk more than 1 mile without increasing pain
3. I cannot walk more than 1/2 mile without increasing pain
4. I cannot walk more than 1/4 mile without increasing pain
5. I cannot walk at all without increasing pain

## Section 5—Sitting

0. I can sit in any chair for as long as I like
1. I can sit only in my favourite chair for as long as I like
2. Pain prevents me from sitting for more than 1 hour
3. Pain prevents me from sitting for more than 20 minutes
4. Pain prevents me from sitting for more than 10 minutes
5. I avoid sitting because it increases my pain immediately

## Section 6—Standing

0. I can stand for as long as I want without pain.
1. I have pain on standing but it does not increase with time
2. I cannot stand longer than 1 hour without increasing pain
3. I cannot stand longer than 30 minutes without increasing pain
4. I cannot stand longer than 10 minutes without increasing pain
5. I avoid standing because I increases the pain immediately

## Section 7—Sleeping

0. I have no pain in bed
1. I have pain in bed, but it does not prevent me from sleeping well
2. Because of my pain, my normal night's sleep is reduced by less than 1/4
3. Because of my pain, my normal night's sleep is reduced by less than 1/2
4. Because of my pain, my normal night's sleep is reduced by less than 3/4
5. Pain prevents me from sleeping at all

## Section 8—Social life

0. My social life is normal and give me no pain
1. My social life is normal, but increase the degree of pain
2. Pain has no significant effect on my social life apart from limiting more energetic interests e.g. dancing etc.
3. Pain has restricted my social life and I do not go out often
4. Pain has restricted my social life to my home
5. I have hardly any social life because of my pain

## Section 9—Travelling

0. I have no pain when I travel
1. I have some pain when travelling but none of my usual forms of travel make it worse
2. I have extra pain when travelling but it does not compel me to seek alternative forms of travel
3. I have extra pain when travelling which compels me to seek alternative forms of travel
4. Pain restricts me to short forms of travel
5. Pain restricts all forms of travel

## Section 10—Changing degree of Pain

0. My pain is rapidly getting better
1. My pain fluctuates but overall is definitely getting better
2. My pain seems to be getting better but improvement is slow
3. My pain is neither getting better nor worse
4. My pain is gradually getting worse
5. My pain is rapidly getting worse

<b>Doctor's use only</b> Score:	%	
	Last Score:	%