

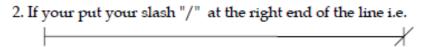
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WORC (Western Ontario Rotator Cuff) Index

INSTRUCTIONS TO PATIENTS

In the following questionnaire you will be asked to answer questions in the following format and you should give your answer by putting a slash "/" on the horizontal line.

NOTE: 1. If you put a slash "/" at the left end of the line i.e. then you are indicating that you have no pain.



then you are indicating that your pain is extreme.

- Please note:
- a) that the further to the right you put your slash "/", the more you experience that symptom.
- b) that the further to the left you put your slash "/" , the less you experience that symptom.
- c) please do not place your slash "/" outside the end markers

You are asked to indicate on this questionnaire, the amount of a symptom you have experienced in the <u>past week</u> as related to your problematic shoulder. If you are unsure about the shoulder that is involved or you have any other questions, please ask before filling out the questionnaire.

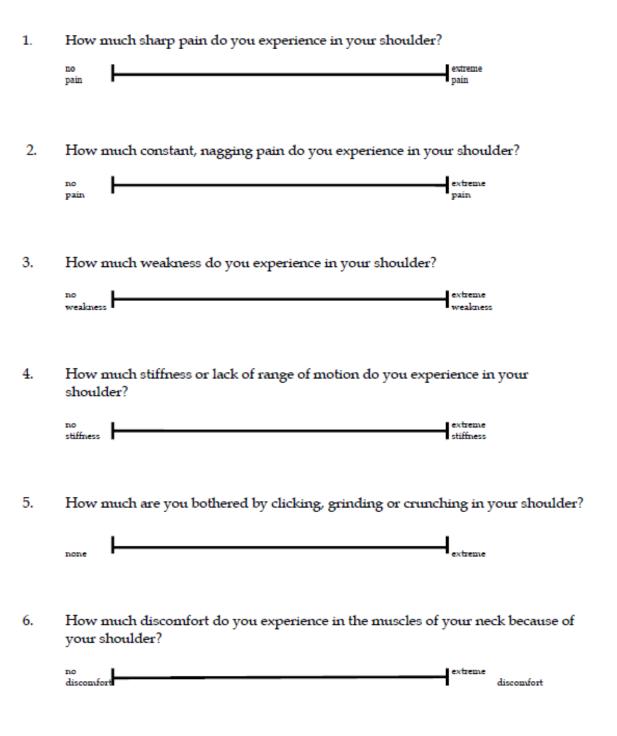
If for some reason you do not understand a question, please refer to the explanations that can be found at the end of the questionnaire. You can then place your slash "/" on the horizontal line at the appropriate place. If an item does not pertain to you or you have not experienced it in the past week, please make your "best guess" as to which response would be the most accurate



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Section A: Physical Symptoms INSTRUCTIONS TO PATIENTS

The following questions concern the physical symptoms you have experienced due to your shoulder problem. In all cases, please enter the amount of the symptom you have experienced in the last week. (Please mark your answers with a slash "/")



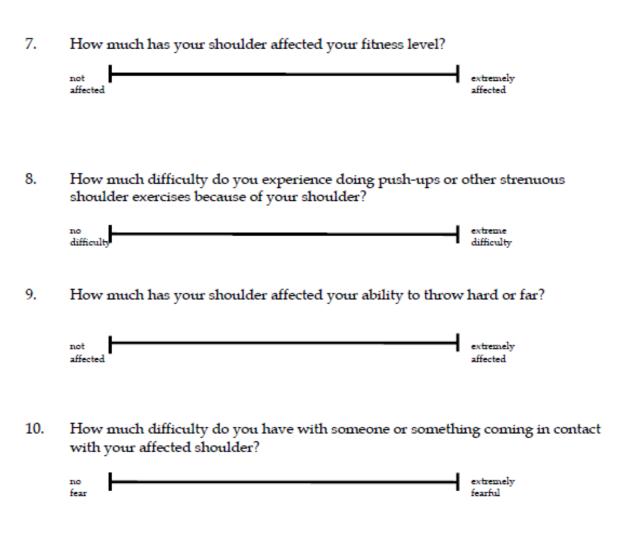


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SECTION B: Sports/Recreation INSTRUCTIONS TO PATIENTS

The following section concerns how your shoulder problem has affected your sports or recreational activities in the past week. For each question, please mark your answers with a slash "/".)



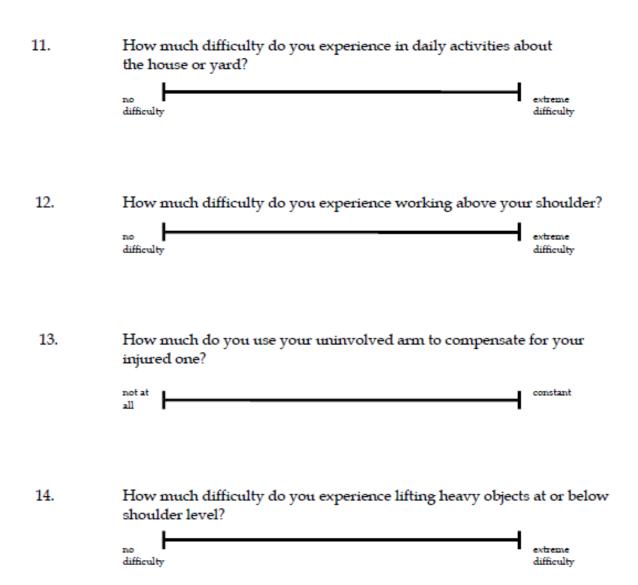


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SECTION C: Work INSTRUCTIONS TO PATIENTS

The following section concerns the amount that your shoulder problem has affected your work around or outside of the home. Please indicate the appropriate amount for the past week with a slash "/".



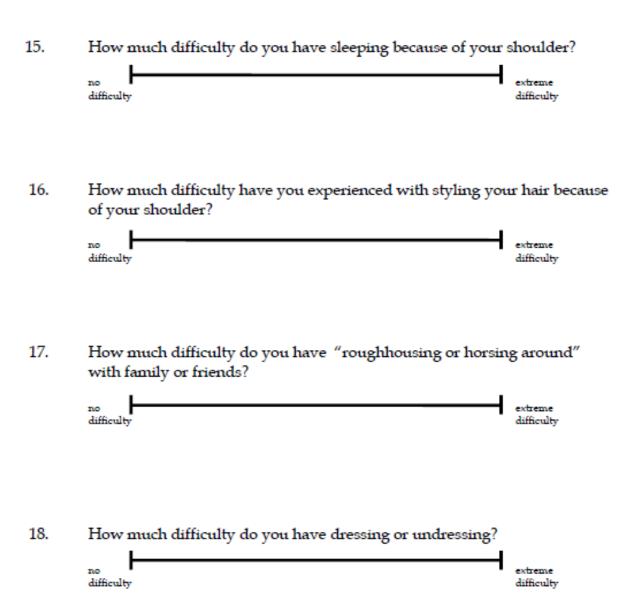


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SECTION D: Lifestyle INSTRUCTIONS TO PATIENTS

The following section concerns the amount that your shoulder problem has affected or changed your lifestyle. Again, please indicate the appropriate amount for the past week with a slash "/".



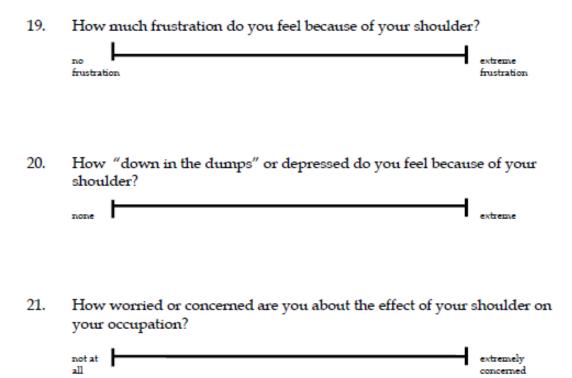


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SECTION E: Emotions INSTRUCTIONS TO PATIENTS

The following questions relate to how you have felt in the past week with regard to your shoulder problem. Please indicate your answer with a slash "/".





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FOR OFFICE USE ONLY:

SCORING OF THE WESTERN ONTARIO ROTATOR CUFF (WORC) INDEX

- Measure the distance from the left side of the line and calculate the score out of 100 (recorded to the nearest 0.5 mm.).
 Write it into the space provided for that question.
- You can calculate a total score for each domain (Physical Symptoms/600; Sports and Recreation/400; Work/400 and Lifestyle/400; Emotions/400) or the total score for the domains can be summed for an aggregate score out of 2100.
- Some find it more meaningful to report scores out of 100 i.e. a percentage of normal score. Since the worst
 possible score is 2100, the aggregate score is subtracted from 2100 and divided by 21. e.g. if your patient's
 total aggregate score = 1625; then the percentage score would be <u>2100 1625</u>

21 = 22.6%

The same applies for each domain.

physical symptoms	sports/recreation	work	lifestyle
PS 1	s 7	W11	L 15
PS 2	S 8	W12	L 16
PS 3	S 9	W13	L 17
PS 4	S 10	W14	L 18
PS 5	TOTAL	TOTAL	TOTAL
PS 6			
TOTAL			

	emonons	
E 19		
E 20		
E 21	-	
TOTAL		

summary		
PS		
s		
w		
L		
E		
TOTAL:		