

LANCE E. GRAVELY, M.D., INC.
NEUROLOGICAL AND SPINE SURGERY

NECK PAIN AND DISABILITY INDEX

Patient Name: _____ Date: _____

Please read instructions carefully. This questionnaire has been designed to give the doctor information as to how your low back pain has affected your ability to manage everyday life. Please read all statements in each section and mark the box which most closely describes your problem.

SECTION 1: PAIN INTENSITY

- The pain comes and goes and is very mild.
- The pain is mild and does not vary much
- The pain comes and goes and is moderate.
- The pain is moderate and does not vary much.
- The pain comes and goes and is very severe.
- The pain is severe and does not vary much.

SECTION 2: PERSONAL CARE

- I can look after myself normally without causing pain.
- I can look after myself normally, but it causes pain.
- It is painful to look after myself even when I am slow and careful.
- I need some help but manage most of my personal care.
- I need help everyday in most aspects of self-care.

SECTION 3: LIFTING

- I can lift heavy objects without any extra pain.
- I can lift heavy objects, but it gives extra pain.
- Pain prevents me from lifting heavy objects off the floor.
- Pain prevents me from lifting heavy objects off the floor, but I can manage if they are conveniently positioned on the table.
- Pain prevents me from lifting heavy objects, but I can manage light to medium objects.
- I can only lift very light objects at the most.

SECTION 4: - READING

- I can read as much as I want to with no pain in my neck.
- I can read as much as I want to with light pain in my neck.
- I can read as much as I want to with moderate pain in my neck.
- I can't read as much as I want to because of moderate pain in my neck
- I can hardly read at all because of severe pain in my neck.
- I cannot read at all

SECTION 5: - HEADACHES

- I have no headaches at all
- I have slight headaches which come frequently.
- I have moderate headaches which come frequently.
- I have severe headaches which come frequently.
- I have head aches almost all the time.

SECTION 6: - CONCENTRATION

- I can concentrate fully when I want to with no difficulty
- I can concentrate fully when I want to with slight difficulty.
- I have a fair degree of difficulty in concentrating when I want to.
- I have a great deal of difficulty in concentrating when I want to.

SECTION 7: WORK

- I can do as much work as I want.
- I can do only my usual work, but no more.
- I can do most of my usual work, but no more.
- I can hardly do my usual work.
- I can't do any work at all.

SECTION 8: SOCIAL LIFE

- I can drive without any neck pain.
- I can drive as long as I want with slight neck pain.
- I can drive as long as I want with moderate neck pain.
- I can hardly drive at all because of sever neck pain.
- I can't drive at all.

SECTION 9: SLEEPING

- I have no trouble sleeping.
- Pain reduces my normal sleep by ¼ each night.
- Pain reduces my normal sleep by ½ each night.
- Pain reduces my normal sleep by ¾ each night.
- Pain prevents me from sleeping at all.

SECTION 10: - RECREATION

- I can engage in all my recreational activities with no neck pain.
- I can engage in all my recreational activities with some neck pain
- I can engage in most, but not all my usual recreational activities because of neck pain
- I can engage in a few of my usual recreational activities because of neck pain.
- I can hardly do any recreational activities because of neck pain
- I can't do any recreation activities at all.