Neck Disability Index

This questionnaire has been designed to give us 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 the one box that applies to you. We realise you may consider that two or more statements in any one section relate to you, but please just mark the box that most closely describes your problem.

	Name		
l .	Date		
re			
□ .			
☐ I cannot lift or carry anything			
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 slight pain in my neck			
☐ I can read as much as I want with moderate pain in my neck			
☐ I can't read as much as I want 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			
1 Carriot read at an			
Section 5: Headaches			
☐ I have no headaches at all			
☐ I have slight headaches, which come infrequently			
☐ I have moderate heada	ches, which come infrequently		
	ches, which come frequently		
☐ I have severe headaches, which come frequently			
☐ I have headaches almost all the time			
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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 lot of difficulty in concentrating when I want to			
☐ I have a great deal of difficulty in concentrating when I want to			
☐ I cannot concentrate at all			
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Section 1: Pain Intensity

☐ I have no pain at the moment
\Box The pain is very mild at the moment
\square The pain is moderate at the moment
☐ The pain is fairly severe at the moment
☐ The pain is very severe at the moment
☐ The pain is the worst imaginable at the moment
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Section 2: Personal Care (Washing, Dressing, etc.)

☐ I can look after myself normally without causing extra pain		
☐ I can look after myself normally but it causes extra pain		
☐ It is painful to look after myself and I am slow and careful		
\square I need some help but can manage most of my personal care		
☐ I need help every day in most aspects of self care		
☐ I do not get dressed, I wash with difficulty and stay in bed		

Section 3: Lifting
☐ I can lift heavy weights without extra pain
☐ I can lift heavy weights but it gives extra pain
☐ Pain prevents me lifting heavy weights off the floor, but I can manage if they are conveniently placed, for example on a table
☐ Pain prevents me from lifting heavy weights but I can manage light to medium weights if they are conveniently positioned
☐ I can only lift very light weights

Section 7: Work		Section 9: Sleeping	
☐ I can do as much work as I want to		☐ I have no trouble sleeping	
☐ I can only do my usual work, but no more		☐ My sleep is slightly disturbed (less than 1 hr sleepless)	
☐ I can do most of my usual work, but no more		☐ My sleep is mildly disturbed (1-2 hrs sleepless)	
☐ I cannot do my usual work		☐ My sleep is moderately disturbed (2-3 hrs sleepless) ☐ My sleep is greatly disturbed (3-5 hrs sleepless)	
☐ I can hardly do any work at all			
☐ I can't do any work at all		☐ My sleep is completely disturbed (5-7 hrs sleepless)	
Section 8: Driving		Section 10: Recreation	
☐ I can drive my car without any neck pain		☐ I am able to engage in all my recreation activities with no neck pain at all	
☐ I can drive my car as long as I want with slight pain in my neck		☐ I am able to engage in all my recreation activities, with some pain in my neck	
☐ I can drive my car as long as I want with moderate pain in my ☐ I can't drive my car as long as I want because of moderate pain		☐ I am able to engage in most, but not all of my usual recreation activities because of pain in my neck	
☐ I can hardly drive at all because of severe pain in my neck ☐ I can't drive my car at all		☐ I am able to engage in a few of my usual recreation activities because of pain in my neck	
		☐ I can hardly do any recreation activities because of pain in my neck	
		☐ I can't do any recreation activities at all	
Score:/50 Transform to percentage score x 100	= %points		
Scoring: For each section the total possible score is 5: if the first s completed the score is calculated as follows:	tatement is marked the s Example: <u>16</u> (total sco:	vection score = 0, if the last statement is marked it = 5. If all ten sections are	
completed the score is calculated as follows.	50 (total possible score) \times 100 = 32%		
If one section is missed or not applicable the score is calculated:	16 (total scored)		
if one section is imosed of not appreciate the score is calculated.	45 (total possible score) x 100 = 35.5%		
Minimum Detectable Change (90% confidence): 5 points or 10 %	` -	, i 100 331370	
NDI developed by: Vernon, H. & Mior, S. (1991). The Neck Disability Ind	ex: A study of reliability and	l validity. Journal of Manipulative and Physiological Therapeutics. 14, 409-415	