

Oswestry Low Back Pain Index

This questionnaire is designed to help us better understand how your back pain affects your ability to manage everyday activities. Please mark ONE LETTER in each section that applies to you. Although you may consider that two statements may apply to you, please mark the one that MOST CLOSELY describes your current condition.

Pain Intensity

- A. Pain comes and goes and is mild.
- B. Pain is mild and does not vary.
- C. Pain comes and goes and is moderate.
- D. Pain is moderate and does not vary much.
- E. Pain comes and goes and is severe.
- F. Pain is severe and does not vary much.

Standing

- A. Can stand for an unlimited amount of time w/o pain
- B. Some pain standing doesn't increase with time.
- C. Cannot stand for more than 1 hour.
- D. Cannot stand for more than 1/2 hour.
- E. Cannot stand for more than 10 minutes.
- F. Cannot stand at all.

Personal Care

- A. Does not change habits to avoid pain.
- B. Does not change habits but have some pain.
- C. Does not change habits but increases the pain.
- D. Changes habits due to pain.
- E. Unable to do personal care without some help.
- F. Unable to wash or dress without help.

Sleeping

- A. No pain in bed.
- B. Gets pain in bed, but sleeps well.
- C. Normal night's sleep reduced by 1/4.
- D. Normal night's sleep reduced by 1/2.
- E. Normal night's sleep reduced by 3/4.
- F. Cannot sleep at all due to pain.

Lifting

- A. Lifts heavy weights with no pain.
- B. Lifts heavy weights with pain.
- C. Cannot lift heavy weights off the floor.
- D. Can lift heavy weights from a table.
- E. Can lift light weights from table.
- F. Can lift only very light weights.

Traveling

- A. Travel without pain.
- B. Travel causes some pain, but not made worse.
- C. Causes extra pain, no change in form.
- D. Causes pain, uses alternative travel.
- E. Pain restricts all form of travel.
- F. Pain restricts except lying down.

Walking

- A. Pain does not prevent walking.
- B. Cannot walk more than 1 mile.
- C. Cannot walk more than 1/2 mile.
- D. Cannot walk more than 1/4 mile.
- E. Can walk only with cane or crutches.
- F. Bedridden and must crawl to toilet.

Social life

- A. Normal and causes no pain.
- B. Normal but causes extra pain.
- C. Limits more energetic interests. (Dancing etc.)
- D. Pain limits me, do not go out as often.
- E. Pain restricts my social life to home.
- F. Pain restricts all social life.

Sitting

- A. Can sit in any chair as long as desired.
- B. Can sit only in favorite chair as long as desired.
- C. Can sit no more than 1 hour.
- D. Can sit no more than 1/2 hour.
- E. Can sit no more than 10 minutes.
- F. Cannot sit at all due to pain.

Changing Degree of Pain

- A. Pain is rapidly improving.
- B. Pain fluctuates but is improving.
- C. Improvement is slow.
- D. Pain level is unchanged.
- E. Pain is gradually worsening.
- F. Pain is rapidly worsening.

Patient Name: _____

Date: _____

Signature: _____



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