

HOSPITAL FOR SPECIAL SURGERY

KNEE REPLACEMENT EXPECTATIONS SURVEY

Please circle the number that best describes your response to each question.

How much relief or improvement do you expect in the following areas as a result of your knee replacement?

	Back to normal or complete improvement	Not back to normal, but...			I do not have this expectation, or this expectation does not apply to me
		a lot of improvement	a moderate amount of improvement	a little improvement	
Relief of pain	1	2	3	4	5
Improve ability to walk ** short distance (indoors, 1 block)	1	2	3	4	5
** medium distance (take a walk, up to 1 mile)	1	2	3	4	5
** long distance (more than 1 mile)	1	2	3	4	5
Remove the need for a cane, crutch or walker	1	2	3	4	5
Make knee or leg straight	1	2	3	4	5
Improve ability to go up stairs	1	2	3	4	5
Improve ability to go down stairs	1	2	3	4	5
Improve ability to kneel	1	2	3	4	5
Improve ability to squat	1	2	3	4	5
Improve ability to use public transportation, drive	1	2	3	4	5
Be employed for monetary reimbursement	1	2	3	4	5
Improve ability to participate in recreation (for example, dancing, pleasure travel)	1	2	3	4	5
Improve ability to perform daily activities (for example, household chores, daily routine)	1	2	3	4	5
Improve ability to exercise or participate in sports	1	2	3	4	5
Improve ability to change position (for example, go from sitting to standing or from standing to sitting)	1	2	3	4	5
Improve ability to interact with others (for example, take care of someone, play with children)	1	2	3	4	5
Improve sexual activity	1	2	3	4	5
Improve psychological well-being	1	2	3	4	5