

MANCHESTER-OXFORD FOOT QUESTIONNAIRE (MOXFQ)

1. I have pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

2. I avoid walking long distances because of pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

3. I change the way I walk due to pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

4. I walk slowly because of pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

5. I have to stop and rest my foot/ankle because of pain

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

6. I avoid some hard or rough surfaces because of pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

7. I avoid standing for a long time because of pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

8. I catch the bus or use the car instead of walking, because of pain in my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

9. I feel self-conscious about my foot/ankle

- ☐ None of the time
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time

10. I feel self-conscious about the shoes I have to wear

- ☐ None of the time
☐ Rarely
☐ Some of the time
☐ Most of the time
☐ All of the time

11. The pain in my foot/ankle is more painful in the evening

- ☐ None of the time
☐ Rarely
☐ Some of the time
☐ Most of the time
☐ All of the time

12. I get shooting pains in my foot/ankle

- ☐ None of the time
☐ Rarely
☐ Some of the time
☐ Most of the time
☐ All of the time

13. The pain in my foot/ankle prevents me from carrying out my work/everyday activities

- ☐ None of the time
☐ Rarely
☐ Some of the time
☐ Most of the time
☐ All of the time

14. I am unable to do all my social or recreational activities because of pain in my foot/ankle

- ☐ None of the time
☐ Rarely
☐ Some of the time
☐ Most of the time
☐ All of the time

15. During the past 4 weeks how would you describe the pain you usually have in your foot/ankle? (please tick one box)

- ☐ None
☐ Very mild
☐ Mild
☐ Moderate
☐ Severe

16. During the past 4 weeks have you been troubled by pain from your foot/ankle in bed at night? (please tick one box)

- ☐ No nights
☐ Only 1 or 2 nights
☐ Some nights
☐ Most nights
☐ Every nights

Comment:**Answering date:**Day Month Year **submit**