

# ATRS (Achilles Tendon Total Rupture Score)

All ques ons refer to your limita ons/di cul es related to your injured Achilles tendon. Answer every ques on by grading your limita ons/symptoms from 0-10. Remer limita ons and 10= No limita ons).

1. Are you limited due to decreased strength in the calf/Achilles tendon/foot?

2. Are you limited due to fa gue in the calf/Achilles tendon/foot?

3. Are you limited due to s ness in the calf/Achilles tendon/foot?

4. Are you limited due to pain in the calf/Achilles tendon/foot?

5. Are you limited during ac vi es of daily living?

6. Are you limited when walking on uneven surfaces?

7. Are you limited when walking quickly up the stairs or up a hill?

8. Are you limited during ac vi es that include running?

9. Are you limited during ac vi es that include jumping?

10. Are you limited in performing hard physical labour?

Comment:

Answering date:

Day  Month  Year

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