11/09/2017 NDI

Neck Disability Index

submit

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).

0 = best 5 = worst
1. PAIN INTENSITY
2. PERSONAL CARE (WASHING/DRESSING)
3. LIFTING
4. Reading
5.Headache
6: Concentration
7. Work
8. Driving
9. Sleeping
10. Recreation
Comment:
Anwering date:
Day 0 \$ Month 0 \$ Year 0 \$