

Knee Outcome Survey Activities of Daily Living Scale (ADLS).

Symptoms: To what degree does each of the following symptoms affect your level of activity? (check one answer on each line)

	I do not have the symptom	I have the symptom, but it does not affect my activity	The symptom affects my activity slightly	The symptom affects my activity moderately	The symptom affects my activity severely	The symptom prevents me from all daily activity
Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stiffness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giving way, buckling, or shifting of the knee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weakness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Functional Limitations With Activities of Daily Living: How does your knee affect your ability to: (check one answer on each line)

	Activity is not difficult	Activity is minimally difficult	Activity is somewhat difficult	Activity is fairly difficult	Activity is very difficult	I am unable to do the activity
Walk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go up stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go down stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneel on front of your knee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sit with your knee bent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rise from a chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Scoring: The first column is scored 5 points for each item, followed in successive columns by scores of 4, 3, 2, 1, and 0 for the last column. The total points from all items are summed, then divided by 70 and multiplied by 100 for the ADLS score. For example, if the individual places marks for 12 items in the first column, and 2 items in the second column the total points would be $12 \times 5 = 60$ points, plus $2 \times 4 = 8$ points, for a total of 68 points. The ADLS score would then be $68/70 \times 100 = 97\%$.

Please continue to the other side of the page to complete the survey.

Please indicate the worst your pain has been in the last 24 hours on the scale below.

