

## Mr Nadim Aslam

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## PRIVATE PRACTICE MANAGER

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## ALL CORRESPONDENCE

Bone and Joint Clinic Spire South Bank Hospital 139 Bath Road Worcester, WR5 3YB

## **Oxford Knee Score**

Name:			Date:	
Date of birth:			Age:	
During the past 4 w	veeks:			
How would you describe the pain you usually had from your knee?				
☐ None	☐ Very mild	☐ Mild	☐ Moderate	☐ Severe
Have you had trouble with washing and drying yourself (all over) because of your knee?				
□ No trouble at all	☐ Very little trouble	☐ Moderate trouble	☐ Extreme difficulty	☐ Impossible to do
Have you had trouble getting in and out of a car or using or using public transport because of your knee?				
□ No trouble at all	☐ Very little trouble	☐ Moderate trouble	☐ Extreme difficulty	☐ Impossible to do
For how long have you been able to walk before pain from your knee becomes severe?				
☐ No pain/more than	☐ 16 to 30 minutes	☐ 5 to 15 minutes	$\square$ Around the house	□ Not at all – pain
30 minutes			only	severe on walking
After a meal (sat at a table), how painful has it been for you to stand up from a chair because of your knee?				
□ Not at all painful	☐ Slightly painful	☐ Moderately painful	□ Very painful	☐ Unbearable
Have you been limping when walking, because of your knee?				
□ Rarely, never	$\square$ Sometimes, or just	□ Often, not just at	$\square$ Most of the time	$\square$ All of the time
	at first	first		
Could you kneel down and get up again afterwards?				
☐ Yes, easily	□ With a little	☐ With moderate	□ With extreme	□ No, impossible
	difficulty	difficulty	difficulty	
How much has pain from your knee interfered with your usual work (including housework)?				
☐ Not at all	☐ A little bit	☐ Moderately	☐ Greatly	☐ Totally
Have you been troubled by pain from your knee in bed at night?				
☐ No nights	☐ Only 1 or 2 nights	☐ Some nights	☐ Most nights	□ Every night
Have you felt that your knee might suddenly 'give way' or let you down?				
□ Rarely/never	☐ Sometimes, or just	☐ Often, not just at	☐ Most of the time	$\square$ All of the time
	at first	first		
Could you do the household shopping on your own?				
☐ Yes, easily	☐ With a little	☐ With moderate	☐ With extreme	□ No, impossible
	difficulty	difficulty	difficulty	
Could you walk down one flight of stairs?				
☐ Yes, easily	☐ With a little	☐ With moderate	☐ With extreme	□ No, impossible
	difficulty	difficulty	difficulty	