

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 the 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"/>

How would you rate the current function of your knee during your usual daily activities on a scale from 0 to 100 with 100 being your level of knee function prior to your injury and 0 being the inability to perform any of your usual daily activities?

How would you rate the overall function of your knee during your usual daily activities? (please check the one response that best describes you)

- normal
- nearly normal
- abnormal
- severely abnormal

As a result of your knee injury, how would you rate your current level of daily activity? (please check the one response that best describes you)

- normal
- nearly normal
- abnormal
- severely abnormal