



ENDORSED AS A BEST PRACTICE GUIDELINE BY



Acute Low Back Pain Screening Questionnaire

» FROM THE NEW ZEALAND ACUTE LOW BACK PAIN GUIDE INCORPORATING THE
GUIDE TO ASSESSING PSYCHOSOCIAL YELLOW FLAGS IN ACUTE LOW BACK PAIN



Scoring Instructions – Acute Low Back Pain Screening Questionnaire

(LINTON & HALLDÉN, 1996)

- For question 4, count the number of pain sites and multiply by 2.
- For questions 6, 7, 8, 9, 10, 12, 13, 14, 17, 18 and 19 the score is the number that has been ticked or circled.
- For questions 11, 15, 16, 20, 21, 22, 23 and 24 the score is 10 minus the number that has been ticked or circled.
- Write the score in the shaded box beside each item – Questions 4 to 24.
- Add them up and write the sum in the box provided – this is the total score.

Note: The scoring method is built into the questionnaire.

Interpretation of Scores – Acute Pain Screening Questionnaire

QUESTIONNAIRE SCORES GREATER THAN 105 INDICATE THAT THE PATIENT IS AT RISK.

This score produces:

- 75% correct identification of those not needing modification to ongoing management
- 86% correct identification of those who will have between 1 and 30 days off work
- 83% correct identification of those who will have more than 30 days off work.

The use of this questionnaire

A prospective study is underway to determine the validity of the cut-off score of 105 in New Zealand using a local sample. Information regarding any amendment to this scoring system will be provided as soon as it becomes available.



Acute Low Back Pain Screening Questionnaire

LINTON & HALLDÉN, 1996)

Today's date >> / /

ACC Claim Number >>

Name >>

Address >>

Telephone >> HOME ()

>> WORK ()

Job Title >> OCCUPATION

Date stopped work this episode >> / /

These questions and statements apply if you have aches or pains, such as back, shoulder or neck pain. Please read and answer each question carefully. Do not take too long to answer the questions. However, it is important that you answer every question.

There is always a response for your particular situation.

1. What year were you born?

2. Are you male female

3. Were you born in New Zealand? yes no

4. Where do you have pain? Place a ✓ for all the appropriate sites.

neck shoulders upper back lower back leg

2x COUNT

5. How many days of work have you missed because of pain during the past 18 months? Tick (✓) one.

0 days [1] 1-2 days [2] 3-7 days [3] 8-14 days [4] 15-30 days [5]
 1 month [6] 2 months [7] 3-6 months [8] 6-12 months [9] over 1 year [10]

6. How long have you had your current pain problem? Tick (✓) one.

0 days [1] 1-2 days [2] 3-7 days [3] 8-14 days [4] 15-30 days [5]
 1 month [6] 2 months [7] 3-6 months [8] 6-12 months [9] over 1 year [10]

7. Is your work heavy or monotonous? Circle the best alternative.

1 2 3 4 5 6 7 8 9 10
< Not at all Extremely >

8. How would you rate the pain that you have had during the past week? Circle one.

1 2 3 4 5 6 7 8 9 10
< No pain Pain as bad as it could be >

9. In the past 3 months, on average, how bad was your pain? Circle one.

1 2 3 4 5 6 7 8 9 10
< No pain Pain as bad as it could be >

10. How often would you say that you have experienced pain episodes, on average, during the past 3 months? Circle one.

1 2 3 4 5 6 7 8 9 10
< Never Always >

11. Based on all the things you do to cope, or deal with your pain, on an average day, how much are you able to decrease it? Circle one.

1 2 3 4 5 6 7 8 9 10
< Can't decrease Can decrease it completely >

10 - x

12. How tense or anxious have you felt in the past week? Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Absolutely calm and relaxed

As tense as I've ever felt ▷

13. How much have you been bothered by feeling depressed in the past week? Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Not at all

Extremely ▷

14. In your view, how large is the risk that your current pain may become persistent? Circle one.

1 2 3 4 5 6 7 8 9 10

◁ No risk

Very large risk ▷

15. In your estimation, what are the chances that you will be working in 6 months? Circle one.

1 2 3 4 5 6 7 8 9 10

◁ No chance

Very large chance ▷

10 - x

16. If you take into consideration your work routines, management, salary, promotion possibilities and work mates, how satisfied are you with your job? Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Not at all satisfied

Completely satisfied ▷

10 - x

Here are some of the things which other people have told us about their back pain. For each statement please circle one number from 0 to 10 to say how much physical activities, such as bending, lifting, walking or driving would affect your back.

17. Physical activities make my pain worse. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Completely disagree

Completely agree ▷

18. An increase in pain is an indication that I should stop what I am doing until the pain decreases. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Completely disagree

Completely agree ▷

19. I should not do my normal work with my present pain. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Completely disagree

Completely agree ▷

Here is a list of five activities. please circle the one number that best describes your current ability to participate in each of these activities.

20. I can do light work for an hour. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Can't do it because of pain problem

Can do it without pain being a problem ▷

10 - x

21. I can walk for an hour. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Can't do it because of pain problem

Can do it without pain being a problem ▷

10 - x

22. I can do ordinary household chores. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Can't do it because of pain problem

Can do it without pain being a problem ▷

10 - x

23. I can go shopping. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Can't do it because of pain problem

Can do it without pain being a problem ▷

10 - x

24. I can sleep at night. Circle one.

1 2 3 4 5 6 7 8 9 10

◁ Can't do it because of pain problem

Can do it without pain being a problem ▷

10 - x

SUM