

## ROLAND DISABILITY INDEX

Name \_\_\_\_\_ Date \_\_\_\_\_

When you have pain, you may find it difficult to do some of the things you normally do. In the box before each sentence, put a check mark for anything that happens all the time, or an "S" for things that happen only once in a while, leave the box empty if the statement does not apply to you.

- I stay home most of the time because of my pain.
- I change positions frequently to try relieve the pain.
- I walk slower than usual because of my pain.
- Because of my pain, I am not doing any of the jobs that I usually do around the house.
- Because of my pain, I use a handrail to get upstairs.
- Because of my pain, I lie down more to rest.
- Because of my pain, I have to hold on to something to get out of an easy chair.
- Because of my pain, I try to get other people to do things for me.
- I get dressed more slowly because of my pain.
- I can only stand up for short periods of time because of my pain.
- Because of my pain, I try not to bend or kneel.
- I find it difficult to get out of a chair because of my pain.
- I am in pain almost all of the time.
- I find it difficult to turn over in bed because of my pain.
- My appetite is not very good because of my pain.
- I have trouble pulling up my socks (stockings) because of my pain.
- I only walk short distances because of my pain.
- I do not sleep well because of my pain.
- I need help dressing because of my pain.
- I sit most of the day because of my pain.
- Because of my pain, I am more irritable and ill-tempered with people than usual.
- Because of my pain, I go up stairs slower than usual.
- I stay in bed most of the time because of my pain.