

ROLAND-MORRIS QUESTIONNAIRE

Patient Name: _____

Date: ____/____/____

Please read carefully:

When your back hurts you may find it difficult to do some of the things you normally do. Mark only the sentences that describe you **today**.

1. ____ I stay at home most of the time because of my back.
2. ____ I change positions frequently to try and get my back comfortable.
3. ____ I walk more slowly than usual because of my back.
4. ____ Because of my back, I am not doing any of the jobs that I usually do around the house.
5. ____ Because of my back, I use a handrail to get upstairs.
6. ____ Because of my back, I lie down to rest more.
7. ____ Because of my back, I have to hold on to something to get out of an easy chair.
8. ____ Because of my back, I try to get other people to do things for me.
9. ____ I get dressed more slowly because of my back.
10. ____ I only stand up for short periods of time because of my back.
11. ____ Because of my back, I try not to bend or kneel.
12. ____ I find it difficult to get out of a chair because of my back.
13. ____ My back is painful almost all of the time.
14. ____ I find it difficult to turn over in bed because of my back.
15. ____ My appetite is not very good because of my back.
16. ____ I have trouble putting on my socks/stockings because of my back.
17. ____ I only walk short distances because of my back pain.
18. ____ I sleep less well because of my back pain.
19. ____ Because of my back pain, I get dressed with help from someone else.
20. ____ I sit down for most of the day because of my back.
21. ____ I avoid heavy jobs around the house because of my back.
22. ____ Because of my back pain, I am more irritable and bad tempered with people than usual.
23. ____ Because of my back, I go upstairs more slowly than usual.
24. ____ I stay in bed most of the day because of my back.

OTHER COMMENTS:
