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**PATIENT PROGRESS QUESTIONNAIRE**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please answer all of the following questions as best you can. The answers will help us serve you and others in a better manner.

1. Have you been satisfied with your care up to this point?
2. What about your care have you liked most?
3. What about your care have you liked least?
4. Do you understand your condition and how it is being treated so far?
5. Do you feel that you've been able to follow the Doctor's recommendations? If not, why?
6. What do you feel is your percentage of relief to this point?
7. How much more do you expect?
8. What conditions have not improved yet?
9. Are there any other conditions or symptoms that have changed since you started treatment?
10. What area of your care would you like to see more emphasized?
11. Have you been satisfied with our staff? If not, why?
12. Is there a question that you've wanted to ask but haven't yet?



American Chiropractic Association  
Georgia Chiropractic Association



## REVISED OSWESTRY DISABILITY INDEX QUESTIONNAIRE

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ Date: \_\_\_\_\_

Please select one answer for each question:

<p><b>Section 1 - Pain Intensity</b></p> <p><input type="radio"/> The pain comes and goes and is very mild.</p> <p><input type="radio"/> The pain is mild and does not very much.</p> <p><input type="radio"/> The pain comes and goes and is moderate.</p> <p><input type="radio"/> The pain is moderate and does not very much.</p> <p><input type="radio"/> The pain comes and goes and is severe.</p> <p><input type="radio"/> The pain is severe and does not very much.</p> <p><b>Section 2 - Personal Care (Washing, Dressing, etc.)</b></p> <p><input type="radio"/> I would not have to change my way of washing or dressing in order to avoid pain.</p> <p><input type="radio"/> I do not normally change my way of washing or dressing even though it causes some pain.</p> <p><input type="radio"/> Washing and dressing increases the pain, but I manage not to change my way of doing it.</p> <p><input type="radio"/> Washing and dressing increases the pain and I find it necessary to change my way of doing it.</p> <p><input type="radio"/> Because of the pain, I am unable to do some washing and dressing without help.</p> <p><input type="radio"/> Because of the pain, I am unable to do any washing or dressing without help.</p> <p><b>Section 3 - Lifting</b></p> <p><input type="radio"/> I can lift heavy weights without extra pain.</p> <p><input type="radio"/> I can lift heavy weights but it gives extra pain.</p> <p><input type="radio"/> Pain prevents me from lifting heavy weights off the floor.</p> <p><input type="radio"/> Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned, for example on a table.</p> <p><input type="radio"/> Pain prevents me from lifting heavy weights, but I can manage light to medium weights if they are conveniently positioned.</p> <p><input type="radio"/> I can only lift very light weights, at the most.</p> <p><b>Section 4 - Walking</b></p> <p><input type="radio"/> Pain does not prevent me from walking any distance.</p> <p><input type="radio"/> Pain prevents me from walking more than one mile.</p> <p><input type="radio"/> Pain prevents me from walking more than ½ mile.</p> <p><input type="radio"/> Pain prevents me from walking more than ¼ mile.</p> <p><input type="radio"/> I can only walk using a cane or crutches.</p> <p><input type="radio"/> I am in bed most of the time and have to crawl to the toilet.</p> <p><b>Section 5 - Sitting ("Favorite chair" includes a recliner):</b></p> <p><input type="radio"/> I can sit in any chair as long as I like without pain.</p> <p><input type="radio"/> I can only sit in my favorite chair as long as I like.</p> <p><input type="radio"/> Pain prevents me from sitting more than one hour.</p> <p><input type="radio"/> Pain prevents me from sitting more than ½ hour.</p> <p><input type="radio"/> Pain prevents me from sitting more than 10 minutes.</p> <p><input type="radio"/> Pain prevents me from sitting.</p>	<p><b>Section 6 - Standing (Remember, standing is NOT walking.):</b></p> <p><input type="radio"/> I can stand as long as I want without pain.</p> <p><input type="radio"/> I have some pain while standing, but it does not increase with time.</p> <p><input type="radio"/> I cannot stand for longer than 1 hour without increasing pain.</p> <p><input type="radio"/> I cannot stand for longer than ½ hour without increasing pain.</p> <p><input type="radio"/> I cannot stand for longer than 10 minutes without increasing pain.</p> <p><input type="radio"/> I avoid standing, because it increases the pain straight away.</p> <p><b>Section 7 - Sleeping</b></p> <p><input type="radio"/> I get no pain in bed.</p> <p><input type="radio"/> I get pain in bed, but it does not prevent me from sleeping well.</p> <p><input type="radio"/> Because of pain, my normal night's sleep is reduced by less than one quarter.</p> <p><input type="radio"/> Because of pain, my normal night's sleep is reduced by less than one half.</p> <p><input type="radio"/> Because of pain, my normal night's sleep is reduced by less than one three-quarter.</p> <p><input type="radio"/> Pain prevents me from sleeping at all.</p> <p><b>Section 8 - Social Life</b></p> <p><input type="radio"/> My social life is normal and gives me no pain.</p> <p><input type="radio"/> My social life is normal but increases the degree of pain.</p> <p><input type="radio"/> Pain has no significant effect on my social life apart from limiting my more energetic interests, e.g. dancing, etc.</p> <p><input type="radio"/> Pain has restricted my social life and I do not go out as often.</p> <p><input type="radio"/> Pain has restricted my social life to my home.</p> <p><input type="radio"/> I have hardly any social life because of pain.</p> <p><b>Section 9 - Traveling</b></p> <p><input type="radio"/> I get no pain while traveling.</p> <p><input type="radio"/> I get some pain while traveling, but none of my usual forms of travel make it any worse.</p> <p><input type="radio"/> I get extra pain while traveling, but it does not compel me to seek alternative forms of travel.</p> <p><input type="radio"/> I get extra pain while traveling which compels me to seek Alternative forms of travel.</p> <p><input type="radio"/> Pain restricts me for all forms of travel.</p> <p><input type="radio"/> Pain prevents all forms of travel except if lying down.</p> <p><b>Section 10 - Changing Degree of Pain</b></p> <p><input type="radio"/> My pain is rapidly getting better.</p> <p><input type="radio"/> My pain fluctuates but overall is definitely getting better.</p> <p><input type="radio"/> My pain seems to be getting better but improvement is slow at the present.</p> <p><input type="radio"/> My pain is neither getting better nor worse.</p> <p><input type="radio"/> My pain is gradually worsening.</p> <p><input type="radio"/> My pain is rapidly worsening.</p>
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