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Orthopaedic and Spine Surgery
Sports Medicine Surgery

Your	Full	Na	me												
Гoda	y's I	Date					Date of Injury								
SYM	IPT(OM:	<u>S*:</u>												
								at whi						without	
1	1. '	Wha	t is the	high	est leve	el of ac	tivity t	hat you	ı can pe	erform	withou	ıt signi	ficant	knee pain?	
	 □ Very strenuous activities like jumping or pivoting as in basketball or soccer □ Strenuous activities like heavy physical work, skiing or tennis □ Moderate activities like moderate physical work, running or jogging □ Light activities like walking, housework or yard work □ Unable to perform any of the above activities due to knee pain 														
2	2. During the past 4 weeks, or since your injury, how often have you had pain?														
1	Neve	er	0 □	1	2 □	3 □	4 □	5 □	6 □	7 □	8 □	9 □	10	Constant	
3	3.]	lf yo	u have	pain,	how so	evere i	s it?								
1	No P	ain	0 □	1	2 □	3 □	4 □	5	6 □	7 □	8 □	9 □	10	Worst pain Imaginable	
۷	4. l	Duri	ng the	past 4	weeks	s, or si	nce you	ır injur	y, how	stiff o	r swoll	en was	your	knee?	
				Mil Mo Vei	deratel	-									
4	5. Y	Wha	t is the	high	est leve	el of ac	tivity y	ou can	perfor	m with	out sig	gnificai	nt swe	lling in your knee?	
				Stre Mo Lig	enuous derate ht activ	activit activit vities l	ies like ies like ike wal	nping o heavy moder king, h of the a	physic ate phy ousew	cal wor ysical v ork or	k, skiii vork, r yard w	ng or to unning ork	ennis or jog	ggings	
6	5. l	Duri	ng the	past 4	weeks	s, or si	nce you	ır injur	y, did y	our kr	nee loc	k or ca	tch?		
			Ye	es 🗆		No									
7	7. '	Wha	t is the	high	est leve	of ac	tivity y	ou can	perfor	m with	out sig	gnificai	nt givi	ng way in your knee?	
				Stre Mo Lig	enuous derate ht activ	activit activit vities l	ies like ies like ike wal	nping o heavy moder king, h	physic ate phy ousew	cal wor ysical v ork or	k, skiii vork, r yard w	ng or to unning ork	ennis or jog	ggings	

	8.	What is the	e high	est leve	el of ac	tivity y	you can	partic	ipate i	n on a	regular	basis'	?		
			l Stro l Mo l Lig	enuous oderate ght activ	activit activiti vities li	ies like ies like ike wa	e heavy moder lking, h	physicate physicate physicate	cal wo ysical ork or	rk, skii work, r yard w	ketball ong or to running rork to knee	ennis or jog	ggings		
	9.	How does	your k	knee af	fect yo	ur abil	ity to:								
	a	ı. Go up stair	rs	No	ot diffic at all	cult		imally ficult		Moder diffic	cult	I	Extreme difficul		Unable to do □
	b. Go down stairs														
	c	. Kneel on the front of yo	ee												
	d	l. Squat													
	e	e. Sit with yo bent	our kne	ee							l				
	f	Rise from	a chai	r]				
	g	g. Run straig	ht ahe	ad							1				
	h	Jump and I your invol									l				
	i. Stop and start quickly														
<u>FU</u>	NC	ΓΙΟΝ:													
10. How would you rate the function of your knee on a scale of 0 to 10 with 10 being normal, excellent function and 0 being the inability to perform any of your usual daily activities?															
	FUNCTION PRIOR TO YOUR KNEE INJURY:														
		nnot perforn ly activities											No limitati		
			0	1	2	3	4 □	5	6	7 □	8	9	10		
	CURRENT FUNCTION OF YOUR KNEE:														
		nnot perforn	ı										1	No lim	itation
	dai	ly activities	0	1	2 □	3 □	4 □	5 □	6 □	7 □	8	9 □	10		