The Young Spine Questionnaire

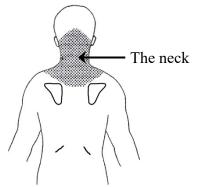
Version: 9 – 12 years

English



This questionnaire is related to the neck and back. Use only one cross (X) to answer each question. If none of the answers are suitable, place your cross by the answer that is best suited.

1. The neck is shown in the picture

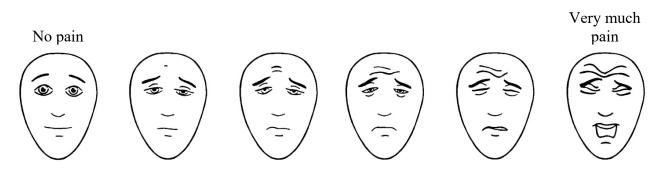


Person seen from behind

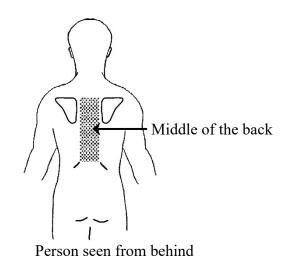
| 1a. | How often have you had pain in the neck? | Often Once in a while Once or twice Never |
|-----|--|--|
| 1b. | Have you had neck pain in the last week? | □ Yes □ No |
| 1c. | Have you had neck pain today ? | □ Yes □ No |

The faces below show how much something can hurt. The pain ranges from 'No pain' to 'very much pain'.

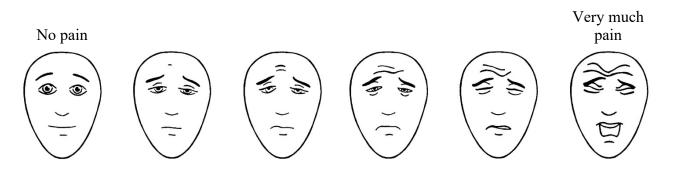
1d. Put a cross (X) on the face which shows how much pain you have had in the neck when it was worst.



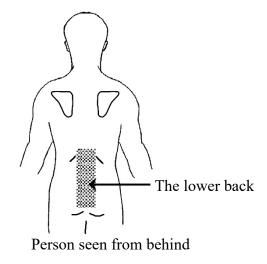
2. The middle of the back is shown in the picture.



- 2a. How often have you had pain in the middle of the back?
 2b. Have you had pain in the middle of the back in the last week?
 2c. Have you had pain in the middle of the back are not week?
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- 2d. Put a cross (X) on the face which shows how much pain you have had in the middle of the back when it was worst.

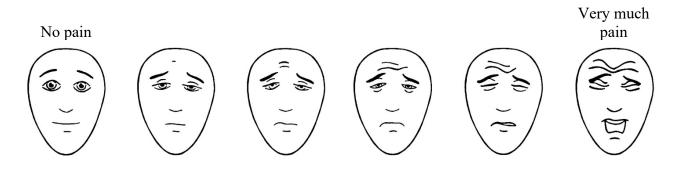


3. The lower back is shown in the picture.



| 3a. | How often have you had pain in the lower back? | Often Once in a while Once or twice Never |
|-----|---|--|
| 3b. | Have you had pain in the lower back in the last week ? | □ Yes □ No |
| 3c. | Have you had pain in the lower back today ? | □ Yes □ No |

3d. Put a cross (X) on the face which shows how much pain you have had in the lower back when it was worst.



4. School, recreation and treatment

| 4a. | Have you stayed home from school because of neck or back pain? | □ Often □ Once in a while □ Once or twice □ Never |
|---------------|---|--|
| 4b. | Has neck or back pain ever stopped you from doing sports? | Often Once in a while Once or twice Never |
| 4c. | Have you been to a doctor, chiropractor or physiotherapist because of neck or back pain? | Often Once in a while Once or twice Never |
| 5. The family | | |
| 5a | Has your father or stepfather ever had neck or back pain? | □ Yes □ No |
| 5b. | If he has, has it kept him home from work? | □ Often □ Once in a while □ Never |
| 5c | Has your mother or stepmother ever had neck or back? | □ Yes □ No |
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