Dr Daan Botes - Joint Clinic Paarl



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in good hands by us

## The Foot & Ankle Disability Index (FADI) Score

## Patient's name (or ref

Please answer every question with one response that most closely describes your condition within the past week. If the activity in question is limited by something other than your foot or ankle, mark N/A

	No difficulty at all	Slight difficulty	Moderate difficulty	Extreme difficulty	Unable to do
1. Standing	0	$\bigcirc$	0	0	0
2. Walking on even ground	$\bigcirc$	$\bigcirc$	$\bigcirc$	0	0
3. Walking on even ground without shoes	$\bigcirc$	$\bigcirc$	$\bigcirc$	0	$\bigcirc$
4. Walking up hills	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
5. Walking down hills	$\bigcirc$	$\bigcirc$	$\bigcirc$	0	$\bigcirc$
6. Going up stairs	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
7. Going down stairs	$\bigcirc$	$\bigcirc$	0	0	0
8. Walking on uneven ground	$\bigcirc$	$\bigcirc$	$\bigcirc$	0	$\bigcirc$
9. Stepping up and down curves	$\bigcirc$	$\bigcirc$	0	0	0
10. Squatting	0	$\bigcirc$	0	0	0
11. Sleeping	$\bigcirc$	$\bigcirc$	$\bigcirc$	0	0
12. Coming up to your toes	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
13. Walking initially	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
14. Walking 5 minutes or less	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
15. Walking approximately 10 minutes	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
16. Walking 15 minutes or greater	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
17. Home responsibilities	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
18. Activities of daily living	0	0	0	0	0
19. Personal care	$\bigcirc$	0	0	0	0
20. Light to moderate work (standing, walking)	$\bigcirc$	0	0	0	0
21. Heavy work (push/pulling, climbing, carrying)	$\bigcirc$	0	0	0	0
22. Recreational activities	0	0	0	0	0

	NO PAIN	MILD	MODERATE	SEVERE	UNBEARABLE
23. General level of pain	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
24. Pain at rest	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
25. Pain during your normal activity	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
26. Pain first thing in the morning	0	0	0	0	0

Thank you very much for completing all the questions in this questionnaire.

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Score is

(**NB.** A FADI score may not be calculated if there are greater than 3 missing items.)