HIP OUTCOME SCORE

CHOOSE 1 ANSWER FROM EACH SECTION

If the activity is limited by something other than your hip, mark N/A

ACTIVITIES OF DAILY LIVING	Not Difficult	Slight	Moderate	Extreme	Unable	N/A
	At All	Difficulty	Difficulty	Difficulty	To DO	
Standing for 15 minutes						
Getting into an out of an average car						
Walking up steep hills						
Walking down steep hills						
Going up 1 flight of stairs						
Going down 1 flight of stairs						
Stepping up and down curbs						
Deep squats						
Getting into and out of a bath tub						
Walking initially						
Walking approximately 10 minutes						
Walking 15 minutes or greater						
Twisting / pivoting on the involved leg						
Rolling over in bed						
Light to moderate work (standing/walking)						
Heavy work (push/pull, climb, carry)						
Recreational activities						

How would you rate your current level of function during your usual activities of daily living?

0% = inability to perform usual daily activities	and	100% = your	level of	function	orior to you
hip problem					

0% 100%

SPORTS SUBSCALE	Not Difficult	Slight	Moderate	Extreme	Unable	N/A
	At All	Difficulty	Difficulty	Difficulty	To DO	
Running one mile						
Jumping						
Swinging objects like a golf club						
Landing						
Starting and stopping quickly						
Cutting / lateral movements						
Low impact activities like fast walking						
Ability to perform activity with your normal technique						
Ability to participate in your desired sport as long as you would like						

How would you rate your current level of function during your sports related activities?

0% = inability to perform usual sportactivities and 100% = your level of function prior to your hip problem

0%

How would you rate your current level of function? (circle one)

Normal

Nearly Normal

Abnormal

Severely Abnormal