

Örebro Musculoskeletal Pain Screening Questionnaire (SHORT-FORM) ¹

For detailed instructions on how to use this tool, see page 2

Name:

Date:

1. How long have you had your current pain problem? Tick one.

- 0-1 weeks ¹ 1-2 weeks ² 3-4 weeks ³ 4-5 weeks ⁴ 6-8 weeks ⁵
 9-11 weeks ⁶ 3-6 months ⁷ 6-9 months ⁸ 9-12 months ⁹ over 1 year ¹⁰

2. How would you rate the pain that you have had during the past week? Circle one.

- 0 1 2 3 4 5 6 7 8 9 10
No pain *Pain as bad as it could be*

For items 3 and 4, please circle the one number that best describes your current ability to participate in each of these activities. For items 3, 4, & 8 the score is 10 minus the number circled. These items are marked with "10-x=" next to the scoring box.

3. I can do light work (or home duties) for an hour.

- 0 1 2 3 4 5 6 7 8 9 10
Not at all *Without any difficulty* 10-X=

4. I can sleep at night.

- 0 1 2 3 4 5 6 7 8 9 10
Not at all *Without any difficulty* 10-X=

5. How tense or anxious have you felt in the past week?

- 0 1 2 3 4 5 6 7 8 9 10
Absolutely calm and relaxed *As tense and anxious as I've ever felt*

6. How much have you been bothered by feeling depressed in the past week?

- 0 1 2 3 4 5 6 7 8 9 10
Not at all *Extremely*

7. In your view, how large is the risk that your current pain may become persistent?

- 0 1 2 3 4 5 6 7 8 9 10
No risk *Very large risk*

8. In your estimation, what are the chances you will be working your normal duties (at home or work) in 3 months.

- 0 1 2 3 4 5 6 7 8 9 10
Not chance *Very large chance* 10-X=

9. An increase in pain is an indication that I should stop what I'm doing until the pain decreases.

- 0 1 2 3 4 5 6 7 8 9 10
Completely disagree *Completely agree*

10. I should not do my normal work (at work or home duties) with my present pain.

- 0 1 2 3 4 5 6 7 8 9 10
Completely disagree *Completely agree*

Total

1. J Linton, S. J., Nicholas, M., & MacDonald, S. (2011). Development of a short form of the Orebro Musculoskeletal Pain Screening Questionnaire. *Spine*, 36(22), 1891-1895.

Scoring the short version of the Örebro Musculoskeletal Pain Screening Questionnaire (ÖMPSQ)

The items are scored 0-10, where 0 refers to absence of impairment and 10 to severe impairment. However, three items need to be reversed in order for all the questions to be oriented in the same direction.

The scoring method has been built into the questionnaire and scoring boxes are provided to the right of each item:

- Item 1, on pain duration, the categories 1-10 represent periods of time ranging from “0-1 week” (first box on the left) to “over 1 year” (last box to the right). For example, “6-8 weeks would be scored “5”
- Items 2, 5, 6, 7, 9, and 10 the score is the number circled
- Items 3, 4, and 8 the score is 10 minus the number circled. These items are marked with “10-x” next to the scoring box. For example, if the patient circles 7 for question 3 (“I can sleep at night”), the score will be $10-7=3$
- Write the score for each item in the shaded scoring box
- Score total
 - If using the tool **online**, the score total in the last shaded box will be calculated as the score for each item is entered.
 - If using a **printed** version of the tool, add all the scores to obtain the total score and write it in the last shaded box.

The total score will range between 1 and 100, with a score >50 indicating higher estimated risk for future work disability (Linton, Nicholas & MacDonald, 2011).