

# Dr. DeLuca

# HARRIS Hip Score Patient Questionnaire

Name					
Date of Birth					
Today's Date_					
Hip (Please cire	cle): Left Right				
Treatment:	Injection	Date	NYP	HSS	
	Arthroscopy	Date	NYP	HSS	
	Pre-op Harris/HOS				
Follow-up fron	n date of injection of	r arthroscopy (Plea	se circle):		
	6 weeks	3 months	6 months	1 year	
	2 years	>2 years	please speci	please specify:	



## **Sports-Related Hip Questionnaire**

If you had a sport-related injury, please read and answer the questions that apply to your injury.

- 1. If you were going to kick a ball, which leg would you kick with?

  Left Right
- 2. What is your main sport of interest?

Running	Basketball	Tennis	Gymnastics
Soccer	Football	Squash	Cycling
Baseball	Swimming	Hockey	Dance
Ballet	Yoga/Pilates	Others:	

- 3. What position do you primarily play when you are participating in your sport?
- 4. What is your level of competition?

  Recreational High School Collegiate Professional
- 5. What was the sport you were participating in when you felt an injury to your groin?
- 6. Action when injury occurred:
  Twisting Running Kicking Turning Stopping
  Other:
- 7. Date of injury:



Choose one response that best describes your hip condition within the last week.

#### Pain

None/Ignores

Slight, occasional, no compromise in activity

Mild, no effect on ordinary activity, pain after usual activity, uses aspirin

Moderate, tolerable, makes concessions, occasional narcotic

Marked, serious limitations

Totally disabled

### **Function: Gait**

<u>Limp</u>	<u>Support</u>	Distance Walked
None	None	Unlimited
Slight	Cane for long walks	6 blocks
Moderate	Cane all the time	2 to 3 blocks
Severe	Crutch	Indoors only
Unable to walk	2 canes	Bed and chair

2 crutches

Unable to walk

## **Functional Activities**

<u>Stairs</u>	Socks/Shoes
Can go up/down normally	With ease
Can go up/down normally with banister	With difficulty
Any method	Unable

Not able

## Sitting Public Transportation

Any chair, 1 hour	Able to enter public transportation
High chair, ½ hour	Unable to use public transportation

Unable to sit, ½ hour, any chair