



PAINXCHANGE

TAILORING PAIN MANAGEMENT ONLINE

Appendix 7

Örebro Musculoskeletal Pain Screening Questionnaire

Appendix 7

8. Based on all the things you do to cope, or deal with your pain on an average day, how much are you able to decrease it? Circle one.

10 - x

0 1 2 3 4 5 6 7 8 9 10

Can't decrease it at all

Can decrease it completely

9. How tense or anxious have you felt in the past week? Circle one.

0 1 2 3 4 5 6 7 8 9 10

Absolutely calm and relaxed

As tense and anxious as I've ever felt

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

0 1 2 3 4 5 6 7 8 9 10

No risk

Very large risk

12. In your estimation, what are the chances that you will be working in 6 months? Circle one.

10 - x

0 1 2 3 4 5 6 7 8 9 10

No chance

Very large chance

13. If you take into consideration your work routines, management, salary, promotion possibilities and work mates, how satisfied are you with your job? Circle one.

10 - x

0 1 2 3 4 5 6 7 8 9 10

Not at all satisfied

Completely satisfied

Here are some of the things that other people have told us about their pain. For each statement please circle one number from 0 to 10 to say how much physical activities, such as bending, lifting, walking or driving would affect your pain.

14. Physical activity makes my pain worse.

0 1 2 3 4 5 6 7 8 9 10

Completely disagree

Completely agree

15. 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

16. I should not do my normal work with my present pain.

0 1 2 3 4 5 6 7 8 9 10

Completely disagree

Completely agree

Appendix 7

Here is a list of five activities. Please circle one number that best describes your current ability to participate in each of these activities.

10 - x

17. I can do light work for an hour.

0 1 2 3 4 5 6 7 8 9 10

Can't do it because
of pain problem

Can do it without pain
being a problem

18. I can walk for an hour.

0 1 2 3 4 5 6 7 8 9 10

Can't do it because
of pain problem

Can do it without pain
being a problem

10 - x

19. I can do ordinary household chores.

0 1 2 3 4 5 6 7 8 9 10

Can't do it because
of pain problem

Can do it without pain
being a problem

10 - x

20. I can go shopping.

0 1 2 3 4 5 6 7 8 9 10

Can't do it because
of pain problem

Can do it without pain
being a problem

10 - x

21. I can sleep at night.

0 1 2 3 4 5 6 7 8 9 10

Can't do it because
of pain problem

Can do it without pain
being a problem

10 - x

Explanatory Notes

The Örebro Musculoskeletal Pain Questionnaire (ÖMPQ) is a 'yellow flag' screening tool that predicts long-term disability and failure to return to work when completed four to 12 weeks following a soft tissue injury². A cut-off score of 105 has been found to predict those who will recover (with 95 per cent accuracy), those who will have no further sick leave in the next six months (with 81 per cent accuracy), and those who will have long-term sick leave (with 67 per cent accuracy)¹.

The ÖMPQ predicted failure to return to work six months after compensable musculoskeletal injury in a NSW population of workers. The injuries in the study group were mixed, and the ÖMPQ was found to be more specific and sensitive for back injuries. In workers with back injuries screened at four to 12 weeks, a cut-off score of 130 correctly predicted 86 per cent of those who failed to return to work³.

Identification, through the ÖMPQ, of workers at risk of failing to return to work due to personal and environmental factors provides the opportunity for treating practitioners to apply appropriate interventions (including the use of activity programs based on cognitive behavioral strategies) to reduce the risk of long-term disability in injured workers. Evidence indicates that these factors can be changed if they are addressed⁴.

Administering the questionnaire

The ÖMPQ is designed to be a self administered tool completed by the worker in a quiet environment without assistance from any other person. A detailed explanation is provided by the person administering the questionnaire:

"Information from this questionnaire helps us understand your problem better, and it especially helps us evaluate the possible long-term consequences your pain may have. It is important that you read each question carefully and answer it as best you can. There are no right or wrong answers. Please answer every question. If you have difficulty, select the answer that best describes your situation".

Where uncertainty or a request for more information is expressed, encouragement is provided to "answer as best you can". The questionnaire item may be read aloud to assist, however the question should not be rephrased. All questions should be answered, as missing values will reduce validity⁵.

Scoring instructions

- For question 1, count the number of pain sites and multiply by two – this is the score (maximum score allowable is 10).
- For questions 2 and 3 the score is the number bracketed after the ticked box.
- For questions 4,5,6,7,9,10,11,14,15 and 16 the score is the number that has been ticked or circled.
- For questions 8,12,13,17,18,19,20 and 21 the score is 10 minus the number that has been circled.
- Write the score in the shaded area beside each item.
- Add up the scores for questions 1 to 21 – this is the total ÖMPQ score.

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3. Dunstan DA, Covic T, Tyson GA, Lennie IG (2005) Does the ÖMPQ predict outcomes following a work related compensable injury? *International Journal of Rehabilitation Research* 28(4), 369-370.
4. Linton SJ, Ryberg M. A Cognitive-behavioral group intervention as prevention for persistent neck and back pain in a non-patient population: a randomized controlled trial. *Pain* 2001; 83-90.
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5. Linton SJ. *Understanding pain for better clinical practice – a psychological perspective*. Edinburgh: Elsevier, 2005.