

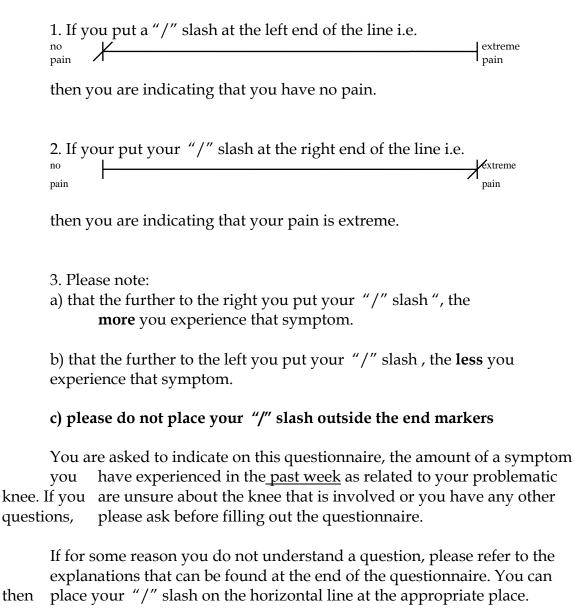
WESTERN ONTARIO MENISCAL EVALUATION TOOL (WOMET)

A disease specific quality of life measurement tool for patients with meniscal lesions A. Kirkley S. Griffin

INSTRUCTIONS TO PATIENTS

In Sections A, B, C, and D you will be asked to answer questions in the following format and you should give your answer by putting a "/" slash on the horizontal line.

NOTE:



Section A Physical Symptoms

INSTRUCTIONS TO PATIENTS

The following questions concern the physical symptoms you have experienced due to your knee problem. In all cases, please enter the amount of the symptom you have experienced in the last week. (Please mark your answers with a slash "/")

1.	How much have you been bothered by a feeling of giving way or	insecurity in your knee?
not at all		extremely bothered
2.	How much are you bothered by pain or soreness in your knee af	ter activities?
not at all	 	extremely bothered
3.	How much have you been bothered by a loss of range of motion	in your knee?
not at all		extremely bothered
4.	How much have you been bothered by numbness in and around	you knee?
not at all		extremely bothered
5. not at	How much have you been bothered by stiffness in your knee after sitting for a long period of time?	er rising in the morning r extremely bothered
all		
6.	How much are you bothered by weakness in your knee?	
not at all	1	extremely bothered
Sectio	n A cont'd	

7. How much are you bothered by swelling in your knee?

not at all	extremel	y bothered			
8.	How much have you been bothered by sharp pains in your knee after ful for a period of time?	I weight bearing			
not at all	extremel	y bothered			
9.	How much have you been bothered by cracking, grinding or popping in y	vour knee?			
not at all	extremel	y bothered			
Section B Sports/Recreation/Work/Lifestyle					
	INSTRUCTIONS TO PATIENTS				
The following section concerns how your knee problem has affected your work, sports or recreational activities in the past week. For each question, please indicate the amount with a slash "/" across the horizontal line.					
10.	How much do you fear reinjuring your knee through a return to your spo	rt or work?			
	not at all	extremely fearful			
11.	How much has your knee affected the amount of time you can participat injury activities?	e in your pre-			
	not at all	extremely affected			
12.	How much has your knee affected your ability to perform the specific ski your sport or work? (If both are affected consider the area that is the mo				
	not at all	extremely affected			
13.	How much of a problem do you have squatting?				
	none	extreme problems			

Section C

Emotions

INSTRUCTIONS TO PATIENTS

The following questions relate to how you have felt in the past week with regard to your knee problem. Please indicate your answer with a slash "/" across the horizontal line.

14.	How conscious are you of your knee?		
	not at all	extremely conscious	
15.	How worried are you about what will happen to your knee in the future?		
	not at all	extremely worried	
16.	How much frustration or discouragement do you feel because of your knee?		
	none	extreme	

Thank you for completing the questionnaire

Explanation of the Meaning of the Questions in the WOMET Questionnaire

Physical Symptoms

- 1. Refers to feeling like your knee will not support you or is not very secure.
- 2. Refers to the pain or aching that you experience after you have engaged in an activity such as a sport, work or working in and around the house.
- 3. Refers to not being able to completely flex or extend the knee
- 4. Refers to the feeling of numbness in the knee area or around the scar.
- 5. Refers to the feeling of your knee joint not wanting to move. This does not refer to loss of range of motion.
- 6. Refers to a lack of strength or weakness in your knee to carry out an action.
- 7. Refers to any increase in the size of your knee due to swelling.
- 8. Refers to pain that you experience when you have been standing or doing any other activity that requires you to take full weight on your knee.
- 9. Refers to any sounds you hear in your knee when bending it or walking etc.

Sports/Recreation/Work/ Lifestyle

- 10. Refers to being frightened of retearing your meniscus if you carry out the same sport or work as before the injury.
- 11.Refers to having to restrict the amount of time that you can participate in an activity you did before your injury or if you have had to stop all together because of a lack of stamina or pain etc in your knee.
- 12. Refers to any difficulty you have performing the skills that are required at work, in a sport, in a recreational activity or around the house.
- 13. Refers to not being able to squat due to pain or not being able to get the knee into full flexion.

Emotions

- 14. Refers to always being aware of your knee or taking it into consideration before doing anything.
- 15 Refers to being concerned about your knee getting worse or the long term condition of your knee as you get older.
- 16. Refers to feeling frustrated or discouraged because of your inability to do the things you used to do or that you want to do but can't because of your knee.

SCORING OF THE WESTERN ONTARIO MENISCAL EVALUATION TOOL (WOMET)

- 1. Measure the distance from the left side of the line and calculate the score out of 100 (recorded to the nearest 0.5 mm.). Write it into the space provided for that question.
- You can calculate a total score for each domain (Physical Symptoms/900; Sports/Recreation/Work/Lifestyle/400; Emotions/300) or the total score for the domains can be summed for an aggregate score out of 1600.
- 3. Some find it more meaningful to report scores out of 100 i.e. a percentage of normal score. Since is the worst possible score is 1600, the aggregate score is subtracted from 1600 and divided by 16. e.g. total aggregate score = 1425; 1600 1425 = 175 / 16 = 10.9%

