APPENDICES

APPENDIX A

TELEPHONIC CONSULTATION:

1. Are you between 25-45 years of age?
2. Where is your pain located?
3. How long have you had this pain?
4. Have you been diagnosed with Sacroiliac syndrome or any other low back or hip condition before?
5. Have you had any surgery to the lower back or hip?
6. Please give a number between 0 and 100 that best describes your pain intensity, with zero meaning “no pain at all” and one hundred meaning “pain as bad as it could be”.