

## Knee Outcome Survey Sports Activities Scale (SAS)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Symptoms: To what degree does each of the following symptoms affect your level of sports activity?**

(Please ✓ check one answer on each line)

	I do not have the symptom	I have the symptom, but it does not affect my Sport activity	The symptom affects my Sport activity slightly	The symptom affects my Sport activity moderately	The symptom affects my Sport activity severely	The symptom prevents me from all Sport activity
Pain	5	4	3	2	1	0
Grinding or grating	5	4	3	2	1	0
Stiffness	5	4	3	2	1	0
Swelling	5	4	3	2	1	0
Slipping or partial giving way of knee	5	4	3	2	1	0
Buckling or full giving way of knee	5	4	3	2	1	0
Weakness	5	4	3	2	1	0

Sum

**Functional Limitations With Sports Activities:**

**How does your knee affect your ability to?**

(Please ✓ check one answer on each line)

	Not difficult at all	Minimally difficult	Somewhat difficult	Fairly difficult	Very difficult	I am unable to do
Run straight ahead	5	4	3	2	1	0
Jump and land on your involved leg	5	4	3	2	1	0
Stop and start quickly	5	4	3	2	1	0
Cut and pivot on your involved leg	5	4	3	2	1	0

Scoring: The first column is scored 5 points for each item, followed in successive columns by scores of 4, 3, 2, 1, and 0 for the last column. The total points from all items are summed, then divided by 55 and multiplied by 100 for the SAS score.

Sum of both Tables / 55 x 100 = xx %

(SAS)

Score

%