



Physical Therapy & Vestibular Rehabilitation

Wendy Webb Schoenewald, PT, OCS
 Joanne Haug, PT • Kelsey Hanlon PT, DPT
 Palak Mulji, PT, DPT • Jenna McLane, PT, DPT
 Amanda Nguyen, PT, DPT

FOOT AND ANKLE DISABILITY INDEX - SPORTS (FADI)

Name: _____ Date: _____

Instructions: Please answer the following questions by circling a number from 0-4. If you feel a questions does not pertain to you please put a NA (not applicable) in the space.

0=No difficulty at all 1=Slight difficulty 2=Moderate difficulty 3=Extreme difficulty 4=Unable to do

Standing	0	1	2	3	4	Coming up to your toes	0	1	2	3	4
Walking on even ground	0	1	2	3	4	Walking initially	0	1	2	3	4
Walking on even ground without shoes	0	1	2	3	4	Walking 5 minutes or less	0	1	2	3	4
Walking up hills	0	1	2	3	4	Walking approx. 10 minutes	0	1	2	3	4
Walking down hills	0	1	2	3	4	Walking 15 minutes or greater	0	1	2	3	4
Going up stairs	0	1	2	3	4	Home responsibilities	0	1	2	3	4
Going down stairs	0	1	2	3	4	Activities of daily living	0	1	2	3	4
Walking on uneven ground	0	1	2	3	4	Personal care	0	1	2	3	4
Stepping up and down curbs	0	1	2	3	4	Light to moderate work (standing, walking)	0	1	2	3	4
Squatting	0	1	2	3	4	Heavy work (push/pulling, climbing, carrying)	0	1	2	3	4
Sleeping	0	1	2	3	4	Recreational activities	0	1	2	3	4
Total						Total					

SPORTS

Running	0	1	2	3	4
Jumping	0	1	2	3	4
Landing	0	1	2	3	4
Squatting and stopping quickly	0	1	2	3	4
Cutting, lateral movements	0	1	2	3	4
Low-impact activities	0	1	2	3	4
Ability to perform activity with your normal technique	0	1	2	3	4
Ability to participate in your desired sport as long as you would like	0	1	2	3	4
Total					

Pain related to the foot and ankle:

0=No Pain 1=Mild Pain 2=Moderate Pain
 3=Severe Pain 4=Unbearable

General level of pain	0	1	2	3	4
Pain during your normal activity	0	1	2	3	4
Pain at rest	0	1	2	3	4
Pain first thing in the morning	0	1	2	3	4
Total					



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Use Only - Score: _____ / 150 points = _____ % impairment

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