**Appendix 1: Athletic activity questionnaire**

**Your joint replacement and recreational activity**

1. **Overall, how satisfied are you with your joint replacement? (Circle one):**

Highly dissatisfied Dissatisfied Fairly dissatisfied Neutral

Fairly satisfied Satisfied Highly satisfied

1. **How likely are you to recommend having a joint replacement to others who are in need of one? (Circle one):**

Highly unlikely Unlikely Fairly unlikely Neutral

Fairly likely Likely Highly likely

1. **Please list all of the types of recreational/athletic/sports activities that you were able to perform in the two years prior to your joint replacement (For example: walking, cycling, swimming):**
2. **Please now list the types of recreational activity that you perform following your joint replacement. Please include those that you still perform as well as any new activities you have started (if any) :**
3. **How important is it for you to have been able to continue with your favoured activities following your joint replacement? (Circle one):**

Highly unimportant Unimportant Fairly unimportant Neutral

Fairly important Important Highly important

1. **How often are you performing your favoured activities currently? (Circle one):**

Less than weekly Once a week 2-3 times a week 4-6 times a week Daily

1. **How do you rate your ability in performing your favoured activities now in comparison to the two years before your joint replacement? (Circle one):**

A lot worse Worse Slightly worse About the same

Slightly better Better A lot better

1. **If there are any particular activities that you now no longer perform, what is/are the reason(s) for it? (Circle all that apply):**
   1. I have never been active
   2. I have a pain or problem with my joint replacement
   3. I have a pain or problem with my other joints
   4. I have problems with my general health
   5. I feel physically unable to do the activity
   6. I don’t want to stress my joint replacement
   7. My surgeon has told me not to do the activity anymore
   8. A physiotherapist/other doctor/other health professional has told me not to do the activity anymore
   9. Another source (friends/family/internet/other media) told me not to do the activity anymore