

## Appendix A

### Part I of the questionnaire

1. Please check the location in which you live.

Urban area  Rural area  Other (specify : )

2. Please check your usual sitting style.

Korean (usually sit on the floor)

Western (usually sit on a chair)

3. Do you live with a family member?

Yes  No

4. Please check your education level.

No formal education

Elementary school

Middle school

High school

University or graduate school

5. Please check your subjective income level.

Low  Middle  High

## Appendix B

### Part II of the questionnaire

Please answer the following questions about your sports activities before and after surgery.

1. Did you play sports regularly before surgery?

Yes  No

2. If you played sports before surgery, please check the types of activities.

Hiking,  Swimming,  Cycling,  Walking,  Running,  Gymnastics,  Table tennis,  Badminton,  Gate ball,  Golf,  Tennis,  Stretching,  Other (specify : )

3. Please check your level of activity before surgery. (UCLA activity scale)

Regularly participates in impact sports such as jogging, tennis, skiing, acrobatics, ballet, heavy labor, or back packing

Sometimes participates in impact sports

Regularly participates in very active events, such as bowling or golf

Regularly participates in active events, such as bicycling

Regularly participates in moderate activities, such as

swimming and unlimited house work or shopping

Sometimes participates in moderate activity

Regularly participates in mild activities, such as walking, limited house work, and limited shopping

Sometimes participates in mild activity

Mostly inactive: restricted to minimal activities or daily living

Wholly inactive: dependent on others; cannot leave residence

4. If you played sports before surgery, were you able to resume your preoperative sports activities after surgery?

Yes  No

5. Do you play sports regularly after the surgery?

Yes  No

6. If you play sports activities after the surgery, please check the types of activities.

Hiking,  Swimming,  Cycling,  Walking,  Running,  Gymnastics,  Table tennis,  Badminton,  Gate ball,  Golf,  Tennis,  Stretching,  Other (specify : )

7. Please check your level of activity after surgery. (UCLA activity scale)

Regularly participates in impact sports such as jogging, tennis, skiing, acrobatics, ballet, heavy labor, or back packing

Sometimes participates in impact sports

Regularly participates in very active events, such as bowling or golf

Regularly participates in active events, such as bicycling

Regularly participates in moderate activities, such as swimming and unlimited house work or shopping

Sometimes participates in moderate activity

Regularly participates in mild activities, such as walking, limited house work, and limited shopping

Sometimes participates in mild activity

Mostly inactive: restricted to minimal activities or daily living

Wholly inactive: dependent on others; cannot leave residence

8. If you do not play sports activities after surgery, please check the causes.

Problems in the operated knee

Problems in the non-operated knee

- Lack of sports facilities
- Comorbidities not related to the knee joint
  - a. Other joint problems
  - b. Cardiovascular diseases (hypertension, myocardial infarction, etc)
  - c. Respiratory diseases (asthma, etc)
  - d. Endocrine diseases (diabetes, etc)
  - e. Other (specify:            )
  - f. Other (specify:            )

### **Appendix C**

Part III of the questionnaire

Please answer the following questions about your level of satisfaction after surgery.

1. Please rate your level of satisfaction with the overall surgical outcome.

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

2. Please rate your level of satisfaction with the overall surgical outcome.

Very dissatisfied 0    1    2    3    4    5    6    7    8    9    10 very satisfied

3. How do you rate your current physical activity as compared with your preoperative expectation?

- Better than expected     As expected     Poorer than expected

4. How do you rate your current physical activity as compared with peers?

- Better     Equal     Poorer

5. Please rate your level of satisfaction regarding your level of physical activity.

Very dissatisfied 0    1    2    3    4    5    6    7    8    9    10 very satisfied