

### Consistency In Patient-Reported Outcomes Survey Response

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**Context:** Patients returning from ACL or other knee injuries must be physically ready to return to activity and mentally. Patient-reported outcome measures are important means to evaluate the level of patient readiness. Many healthcare providers utilize multiple surveys as part of their intake process to determine current status. The distribution of multiple surveys related to one joint may be problematic. A question of completeness and consistency among participants is a limitation of most measures. The purpose of this study was 1) to determine the level at which people will persist in multiple surveys and 2) to determine the consistency in participant response across questions repeated across surveys, similar questions, or movement patterns. **Methods:** The study design for this research was a qualitative survey of a convenient sample. Participants were recruited via their university, asking for participation in the study. The survey was distributed through the host's school email system, and Qualtrics hosted the survey. To be included in the study, participants had to be either a student, faculty, or staff member of the university. The study included general demographic information (age, gender, ethnicity, and history of injury or pain in the knee) and four knee-related quality-of-life surveys, which included the Anterior Cruciate Ligament Return to Sport After Injury (ACL-RSI) scale, International Knee Documentation Committee (IKDC), Knee Injury and Osteoarthritis Outcomes Scores (KOOS), and Lysholm Knee Scoring Scale. Ran interclass correlation coefficient to determine Cronbach's Alpha. Significance was set at the 0.05 level. **Results:** The number of participants who consented to participate in this survey was 663. Of these 663 participants, only 292 (45.34%) completed all 4 surveys. A total of 152 (22.93%) participants stopped after the demographics, 85 (12.82%) completed at least 1 survey, 84 (12.67%) completed at least 2 surveys, and 15 (2.26%) completed at least 3 surveys. Seventy percent of participants complained of knee injury or pain and 27% occurred more than 5 years ago. Response consistency was seen with question looking at confidence in knee (ICC .869, 95% CI .845 to .891), confidence to perform (ICC .94, 95% CI .927 to .951), locking and catching in the knee (ICC .479, 95% CI .374 to .570), stairs (ICC .93, 95% CI .917 to .942), kneeling (ICC .885, 95% CI .856 to .909), squatting (ICC .895, 95% CI .873, .915), and sitting (ICC .731, 95% CI .676, .788). **Conclusion:** These results support response consistency across the four surveys. Survey compliance overall was low, but because it did not impact the consistency of responses, using one survey encompassing questions from all four surveys might increase survey compliance while still gathering sufficient information.