< Appendix 1 >

**FIRST ASSESSMENT - DOCTOR**

Visit Date: 1 2 3 4 5 6 7 8 9 10

**Patient who meets all the criteria below can only be enrolled.**

1. Patients included in Knee OA as ACR standard □
   - ACR criteria: Patient who meets following three criteria of idiopathic Knee osteoarthritis categorized by clinical and radiological standard.
     ① Knee joint pain
     ② Exist one of following three symptoms:
        - Age > 50 y
        - Morning stiffness < 30 minutes
        - Friction sound
     ③ Evidence of osteophyte in the X-ray

2. Age over 65 years old □

3. Pain NRS≥4 (If pain exist in both side of knee joints, mark the worse side as pain index.) □
   - (0: Free from pain, 10: the worst pain ever)

   ![Pain Scale](pain-scale.png)

4. Patient diagnosed as symptomatic knee OA by a clinician □

5. Recommended NSAIDs (including COX-2 inhibitors) for 3 weeks from a clinician. □
   - **What is the reason for prescribing NSAIDs (including COX-2 inhibitors)?** (Answer can be multiple)
     ① Due to severe pain
     ② NSAIDs have a relatively better effectiveness compared to other medicine.
     ③ Low effectiveness when used for 1~2 weeks
     ④ Signs of Inflammation present.
     ⑤ etc:
     ⑥ Unable to answer
   - **What is the usage for prescribed NSAIDs(including COX-2 inhibitors)?**
     1 day ( ) times

Respondent's signature: ____________________________ Date: _________ year ___ mm