

## Translation: Injury and Pain Questionnaire

### Survey on Sports Medical Science Support for Junior Athlete

1.Date:\_\_\_\_\_2.City\_\_\_\_\_3.Age:\_\_\_\_\_4.Gender (Male • Female) 5.Grade\_\_\_\_\_6 the age to start competitive\_\_\_\_\_7.Dominant side (Right • Left) 8. Training time (last year) (about \_\_\_\_\_ hours/day, about \_\_\_\_\_ days/week, about \_\_\_\_\_ weeks/year)

Please select the number of the place where you have had pain or injury that affects your daily life or badminton.

Write it from 1-25 in the figure below (It doesn't matter how many you write (left or right)).

( \_\_\_\_\_ )

In the places listed above, write the number of the part where you consulted with your parents or coach.

( \_\_\_\_\_ )

In the places listed above, please write the number of the part where you actually required medical care such as a hospital.

( \_\_\_\_\_ )

### Questionnaire/Anatomical sites

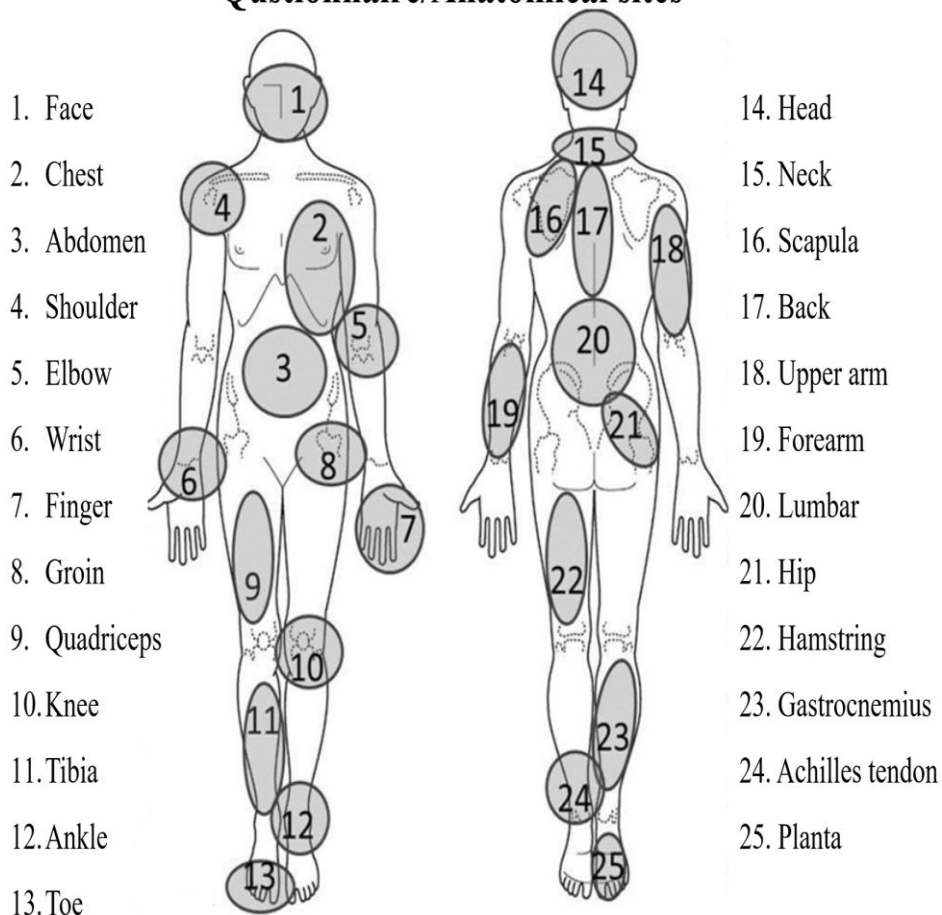


Figure S1. Anatomical regions image

## Translation: Injury and Pain Questionnaire

1.Upper body (Figures: 1-7 front, 14-20 back). Is there a place where there was an injury or pain? If there is, please fill in the form below.

Items (Right • left, anatomical site, injury nature or pain, age, the status that happened, current status)

Example (Right • left, shoulder, pain, 12 years and 2 months old, during the training, the pain eliminated in about a month); (Right • left, lower back, lumbar spondylosis, 11 years and 8 months old, during the training, current pain)

A (      ), B (      ), C (      ), D (      ), E (      ).

2.Lower body (Figures: 8-13 front, 21-25 back). Is there a place where there was an injury or pain? If there is, please fill in the form below.

Items (Right • left, anatomical site, injury nature or pain, age, the status that happened, current status)

Example (Right • left, shoulder, pain, 12 years and 2 months old, during the training, the pain eliminated in about a month); (Right • left, lower back, lumbar spondylosis, 11 years and 8 months old, during the training, current pain)

A (      ), B (      ), C (      ), D (      ), E (      ).

3. Do you warm up at the beginning of practice? (Yes      No).

If yes, please write the time of warm up (      ) minutes.

4 Do you cool down at the beginning of practice? (Yes      No).

If yes, please write the time of warm up (      ) minutes.

Thank you very much.