



7. OROPHARYNGEAL

NO YES

§ a. Consistent with oral thrush/candidiasis **ENTTH\_32**

IF YES:

KOH negative

-OR-

KOH positive

**ENTKO\_32**

§ b. Consistent with herpetic lesions **ENTHP\_32**

§ c. Gingivitis/gum disease **ENTGG\_32**

§ d. Oral hairy leukoplakia **ENTLE\_32**

e. Other (please describe below) **ENTOT\_32**

Empty text box for describing other oral conditions.

8. EYES

NO YES

a. Conjunctiva

1) Redness **EYRED\_32**

2) Discharge **EYDIS\_32**

b. Scleral icterus **EYSCI\_32**

c. Other (please describe below) **EYOTH\_32**

Empty text box for describing other eye conditions.

9. § LYMPH NODES

NO YES

a. Are there any nodes present (excluding inguinal and femoral) which are ≥1 cm? **LYND1\_32**

**SKIP TO Q 10** ←

b. Presence of node ≥1 cm

1) Occipital **Right OCCR\_32**  
**Left OCCL\_32**

2) Post. auricular **Right POAUR\_32**  
**Left POAUL\_32**

3) Pre-auricular **Right PRAUR\_32**  
**Left PRAUL\_32**

4) Submental/submandibular **Right SUBMR\_32**  
**Left SUBML\_32**

5) Ant. cervical **Right ACERR\_32**  
**Left ACERL\_32**

6) Post. cervical **Right PCERR\_32**  
**Left PCERL\_32**

7) Supraclavicular **Right SCLVR\_32**  
**Left SCLVL\_32**

8) Axillary **Right AXILR\_32**  
**Left AXILL\_32**

9) Epitrochlear **Right EPTRR\_32**  
**Left EPTRL\_32**

c. What is the diameter of the largest node present? **LNODD\_32**

1-2 cm  2.1-4 cm  >4 cm

d. Are any of the nodes tender? **TENND\_32**

e. Are any of the nodes matted? **MATND\_32**







# LIPODYSTROPHY PHYSICAL EXAMINATION

1. Weight: recorded on page 1	2. Height: inches	3. Waist Girth: cm	4. Hip Girth: cm	5. Mid-Arm Girth: cm	6. Thigh Girth cm
	<b>HEIGHIN_32</b>	<b>LDWAI_32</b>	<b>LDHIP_32</b>	<b>LDMID_32</b>	<b>LDTHI_32</b>
	(see instructions)	(see instructions)	(see instructions)	(see instructions)	(see instructions)

## 7. Fat Wasting (see severity definitions below):

	<i>If None, go to next question. If Yes, indicate severity of symptom.</i>	<b>Severity*</b>		
	None      Yes	Mild	Moderate	Severe
1) Facial fat loss (sunken cheeks)	<b>FWFAC_32</b>	<input type="radio"/>	<b>SWFAC_32</b>	<input type="radio"/>
2) Arms	<b>FWARM_32</b>	<input type="radio"/>	<b>SWARM_32</b>	<input type="radio"/>
3) Legs	<b>FWLEG_32</b>	<input type="radio"/>	<b>SWLEG_32</b>	<input type="radio"/>
4) Buttocks	<b>FWBUT_32</b>	<input type="radio"/>	<b>SWBUT_32</b>	<input type="radio"/>

## 8. Fat Accumulation:

	<i>If None, go to next question. If Yes, indicate severity of symptom.</i>	<b>Severity*</b>		
	None      Yes	Mild	Moderate	Severe
1) Moon facies	<b>FAMOO_32</b>	<input type="radio"/>	<b>SWMOO_32</b>	<input type="radio"/>
2) Abdomen	<b>FAABD_32</b>	<input type="radio"/>	<b>SWABD_32</b>	<input type="radio"/>
3) Back of Neck	<b>FANCK_32</b>	<input type="radio"/>	<b>SWNCK_32</b>	<input type="radio"/>
4) Breasts	<b>FABRS_32</b>	<input type="radio"/>	<b>SWBRS_32</b>	<input type="radio"/>

## 9. Other physical exam findings noted related to fat distribution:

Specify:

### \* Definitions:

- None: Patient does not exhibit any signs of fat maldistribution. (Not noted by patient or clinician)
- Mild: Mild signs noted only after close inspection by patient or clinician.
- Moderate: Signs of fat maldistribution are noticed by patient or clinician without specifically looking for it. Patient may complain that current clothing has become tighter.
- Severe: Signs of fat maldistribution easily noted by casual observer. Symptoms have required a change in size of clothing or undergarments worn.