

FOLLOW-UP VISIT PHYSICAL EXAM

Effective January 18, 2011, the variable visit number suffix was changed from 2 digits (i.e., VARIABLE_54) to a 3 digit suffix (i.e., VARIABLE_054) and affects ALL visit questionnaire variables from the first visit onward.

MARKING INSTRUCTIONS

- Make dark marks that fill the circle completely.
Make clean erasures.
Make NO stray marks.
Do NOT fold this form.



VISIT NUMBER (430) and CLINICIAN NUMBER (CLIN_43) grid.

1. ID NUMBER (MACSID) grid.

2. DATE (Month, Day, Year) grid with month selection circles.

3. WEIGHT (KILOGRAMS) grid.

4. Blood pressure readings (FIRST and SECOND READING) and Caffeine/Nicotine (CFNIC) and Quietness (SIT1, SIT2) questions.

5. ORAL TEMPERATURE grid.

- 6. SKIN/HAIR/NAILS (Excluding genital area)
a. Fungal infection lesions (excluding athletes foot)
b. Herpes Zoster (active)
c. Molluscum contagiosum
d. Seborrhea
e. Psoriasis
f. Jaundice
g. Spider Angioma
h. Other (please describe below)

- i. Kaposi's Sarcoma
1) Skin Lesions
IF YES: Number of lesions
Diameter of largest lesion in cms.
2) Oral lesions
3) Anal/perianal lesions

Comments section with multiple lines for text entry.

SERIAL #

Serial number input grid.

7. OROPHARYNGEAL

NO YES REFUSED

a. Consistent with oral thrush/candidiasis ENTTH_43

IF YES:

- KOH negative ENTKO_43
- OR-
- KOH positive
- Not performed

b. Consistent with herpetic lesions ENTHP_43

c. Gingivitis/gum disease ENTGG_43

d. Oral hairy leukoplakia ENTLE_43

e. Other (please describe below) ENTOT_43

8. EYES

NO YES REFUSED

a. Conjunctiva

1) Redness EYRED_43

2) Discharge EYDIS_43

b. Scleral icterus EYSCI_43

c. Other (please describe below) EYOTH_43

9. LYMPH NODES

NO YES REFUSED

a. Are there any nodes present (excluding inguinal and femoral) LYND1_43

which are ≥1 cm?

SKIP TO Q 10

b. Presence of node ≥1 cm

1) Occipital Right OCCR_43 Left OCCL_43

2) Post. auricular Right POAUR_43 Left POAUL_43

3) Pre-auricular Right PRAUR_43 Left PRAUL_43

4) Submental/submandibular Right SUBMR_43 Left SUBML_43

5) Ant. cervical Right ACERR_43 Left ACERL_43

6) Post. cervical Right PCERR_43 Left PCERL_43

7) Supraclavicular Right SCLVR_43 Left SCLVL_43

8) Axillary Right AXILR_43 Left AXILL_43

9) Epitrochlear Right EPTRR_43 Left EPTRL_43

c. What is the diameter of the largest node present? LNODD_43

- 1-2 cm
- 2.1-4 cm
- >4 cm

d. Are any of the nodes tender? TENND_43

e. Are any of the nodes matted? MATND_43

LIPODYSTROPHY PHYSICAL EXAMINATION

1. Height:

HEIGHCM_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

2. Mid-Arm Girth:

LDMID_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

3. Chest Girth:

LDCHE_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

4. Waist Girth:

LDWAI_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

5. Hip Girth:

LDHIP_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

6. Thigh Girth:

LDTHI_43

cm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

(see instructions)

LIPODYSTROPHY MEASURER CODE

LPEXN_43

20	2
30	3
40	4
50	5
60	6
70	7
80	8
90	9

7. Thigh Skinfold:

SKFTH_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

8. Triceps Skinfold:

SKFTR_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

9. Subscapular Skinfold:

SKSBS_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

10. Biceps Skinfold:

SKFBI_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

11. Breast Skinfold:

SKFBR_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

12. Abdominal Skinfold:

SKFAB_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

13. Suprailiac Skinfold:

SKSIL_43

mm

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

14. Fat Wasting (see severity definitions below):

If None or Refused, go to next question.
If Yes, indicate severity of symptom.

	Severity*		
	Mild	Moderate	Severe
1) Facial fat loss (sunken cheeks)	<input type="radio"/> SWFAC_43	<input type="radio"/> SWARM_43	<input type="radio"/>
2) Arms	<input type="radio"/> FWARM_43	<input type="radio"/> SWLEG_43	<input type="radio"/>
3) Legs	<input type="radio"/> FWLEG_43	<input type="radio"/> SWBUT_43	<input type="radio"/>
4) Buttocks	<input type="radio"/> FWBUT_43	<input type="radio"/>	<input type="radio"/>

15. Fat Accumulation:

If None or Refused, go to next question.
If Yes, indicate severity of symptom.

	Severity*		
	Mild	Moderate	Severe
1) Moon facies	<input type="radio"/> FAMOO_43	<input type="radio"/> SWMOO_43	<input type="radio"/>
2) Abdomen	<input type="radio"/> FAABD_43	<input type="radio"/> SWABD_43	<input type="radio"/>
3) Back of Neck	<input type="radio"/> FANCK_43	<input type="radio"/> SWNCK_43	<input type="radio"/>
4) Breasts	<input type="radio"/> FABRS_43	<input type="radio"/> SWBRS_43	<input type="radio"/>

16. Other physical exam findings noted related to fat distribution:

Specify:

PCFAT_43 (percentage of body fat)

* 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.