RHEUMATOLOGIC EXAM

Fondazione PRINTO (info@fondazione-printo.it)
PRCSG (www.prcsg.org)

Patient ID			
Date of visit (dd/mm/yyyy)		Investigator's Name/City	

Check box if present ☒

LEGEND:

Swell: swelling
Pain: pain on motion and/or tenderness
LOM: limitation on motion

Swell	Pain	LOM	JOINTS	Swell	Pain	LOM
☐	☐	☐	Temporo-mandibular	☐	☐	☐
☐	☐		Sterno-clavicular	☐	☐	
☐	☐		Acromion-clavicular	☐	☐	
☐	☐	☐	Shoulder	☐	☐	☐
☐	☐	☐	Elbow	☐	☐	☐
☐	☐	☐	Wrist	☐	☐	☐
☐	☐	☐	MCP I	☐	☐	☐
☐	☐	☐	MCP II	☐	☐	☐
☐	☐	☐	MCP III	☐	☐	☐
☐	☐	☐	MCP IV	☐	☐	☐
☐	☐	☐	MCP V	☐	☐	☐
☐	☐	☐	PIP I	☐	☐	☐
☐	☐	☐	PIP II	☐	☐	☐
☐	☐	☐	PIP III	☐	☐	☐
☐	☐	☐	PIP IV	☐	☐	☐
☐	☐	☐	PIP V	☐	☐	☐
☐	☐	☐	DIP II	☐	☐	☐
☐	☐	☐	DIP III	☐	☐	☐
☐	☐	☐	DIP IV	☐	☐	☐
☐	☐	☐	DIP V	☐	☐	☐
	☐	☐	Hip		☐	☐
☐	☐	☐	Knee	☐	☐	☐
☐	☐	☐	Ankle	☐	☐	☐
☐	☐	☐	Subtalar joints	☐	☐	☐
☐	☐	☐	Intertarsal joints	☐	☐	☐
☐	☐	☐	MTP I	☐	☐	☐
☐	☐	☐	MTP II	☐	☐	☐
☐	☐	☐	MTP III	☐	☐	☐
☐	☐	☐	MTP IV	☐	☐	☐
☐	☐	☐	MTP V	☐	☐	☐
☐	☐	☐	TOE I	☐	☐	☐
☐	☐	☐	TOE II	☐	☐	☐
☐	☐	☐	TOE III	☐	☐	☐
☐	☐	☐	TOE IV	☐	☐	☐
☐	☐	☐	TOE V	☐	☐	☐

RIGHT SIDE

LEFT SIDE

☐	☐	Cervical spine	
☐	☐	Thoracic spine	
☐	☐	Lumbar spine	
☐		Sacroiliac joints	☐

PHYSICIAN'S GLOBAL ASSESSMENT OF OVERALL DISEASE ACTIVITY

NO ACTIVITY	○ 0	○ 0.5	○ 1	○ 1.5	○ 2	○ 2.5	○ 3	○ 3.5	○ 4	○ 4.5	○ 5	○ 5.5	○ 6	○ 6.5	○ 7	○ 7.5	○ 8	○ 8.5	○ 9	○ 9.5	○ 10	MAXIMUM ACTIVITY