

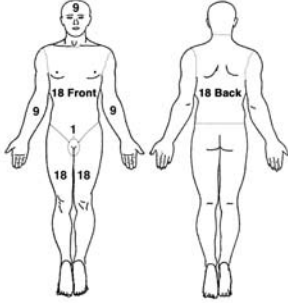

**FORM A**

Current Patient Weight: \_\_\_\_\_

Today's Date: \_\_\_\_\_

MR#/Name: \_\_\_\_\_

**CHRONIC GVHD ACTIVITY ASSESSMENT- CLINICIAN**

Component	Findings		Scoring (see skin score worksheet)			
<b>Skin</b> 	Erythematous rash of any sort		% BSA (max 100%)			
	Moveable sclerosis		% BSA (max 100%)			
	Non-moveable sclerosis (hidebound/non-pinchable) or subcutaneous sclerosis/fasciitis		% BSA (max 100%)			
	Ulcer(s): select the largest ulcerative lesion, and measure its largest dimension in cm and mark location of ulcer		Location: _____ Largest dimension: _____ cm			
<b>Eyes</b> Bilateral Schirmer's Tear Test (without anesthesia) in persons 9 years or older	Right Eye:	mm of wetting	Left Eye:	mm of wetting		
<b>Mouth</b> 	<b>Mucosal change</b>	No evidence of cGVHD	Mild	Moderate	Severe	
	<b>Erythema</b>	None	0	Mild erythema or moderate erythema (<25%) 1	Moderate (≥25%) or Severe erythema (<25%) 2	Severe erythema (≥25%) 3
	<b>Lichenoid</b>	None	0	Hyperkeratotic changes (<25%) 1	Hyperkeratotic changes (25-50%) 2	Hyperkeratotic changes (>50%) 3
	<b>Ulcers</b>	None	0	None 0	Ulcers involving (≤20%) 3	Severe ulcerations (>20%) 6
	<b>Mucoceles*</b>	None	0	1-5 mucoceles 1	6-10 scattered mucoceles 2	Over 10 mucoceles 3
		*Mucoceles scored for lower labial and soft palate only		<b>Total score for all mucosal changes</b>		
<b>Blood Counts</b>	Platelet Count	ULN	Total WBC	ULN	% Eosinophils	
	K/uL	K/uL	K/uL	K/uL	%	
<b>Liver Function Tests</b>	Total serum bilirubin	ULN	ALT	ULN	Alkaline Phosphatase	
	mg/dL	mg/dL	U/L	U/L	U/L	

<b>Gastrointestinal-Upper GI</b> <ul style="list-style-type: none"> <li>• Early satiety OR</li> <li>• Anorexia OR</li> <li>• Nausea &amp; Vomiting</li> </ul>	<i>0= no symptoms</i> <i>1=mild, occasional symptoms, with little reduction in oral intake <u>during the past week</u></i> <i>2=moderate, intermittent symptoms, with some reduction in oral intake <u>during the past week</u></i> <i>3=more severe or persistent symptoms throughout the day, with marked reduction in oral intake, <u>on almost every day of the past week</u></i>																								
<b>Gastrointestinal-Esophageal</b> <ul style="list-style-type: none"> <li>• Dysphagia OR</li> <li>• Odynophagia</li> </ul>	<i>0= no esophageal symptoms</i> <i>1=Occasional dysphagia or odynophagia with solid food or pills <u>during the past week</u></i> <i>2=Intermittent dysphagia or odynophagia with solid foods or pills, but not for liquids or soft foods, <u>during the past week</u></i> <i>3=Dysphagia or odynophagia for almost all oral intake, <u>on almost every day of the past week</u></i>																								
<b>Gastrointestinal-Lower GI</b> <ul style="list-style-type: none"> <li>• Diarrhea</li> </ul>	<i>0= no loose or liquid stools <u>during the past week</u></i> <i>1= occasional loose or liquid stools, on some days <u>during the past week</u></i> <i>2=intermittent loose or liquid stools throughout the day, <u>on almost every day of the past week, without requiring</u> intervention to prevent or correct volume depletion</i> <i>3=voluminous diarrhea <u>on almost every day of the past week, requiring</u> intervention to prevent or correct volume depletion</i>																								
<b>Lungs</b> <ul style="list-style-type: none"> <li>• Bronchiolitis Obliterans</li> </ul>	Pulmonary Function Tests with Diffusing Capacity (attach report for person> 5 yrs old)	FEV-1  % Predicted	Single Breath DLCO (adjusted for hemoglobin)  % Predicted																						
<b>Health Care Provider Global Ratings:</b> In your opinion, do you think that this patient's chronic GVHD is mild, moderate or severe? 0=none 1= mild 2=moderate 3=severe	<b>Where would you rate the severity of this patient's chronic GVHD symptoms on the following scale, where 0 is cGVHD symptoms that are not at all severe and 10 is the most severe cGVHD symptoms possible:</b>  <table border="0" style="width:100%; text-align:center;"> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td> </tr> <tr> <td colspan="5">cGVHD symptoms not at all severe</td> <td colspan="6">Most severe cGVHD symptoms possible</td> </tr> </table>		0	1	2	3	4	5	6	7	8	9	10	cGVHD symptoms not at all severe					Most severe cGVHD symptoms possible						<b>Over the past <u>month</u> would you say that this patient's cGVHD is</b>  +3= Very much better +2= Moderately better +1= A little better 0= About the same -1=A little worse -2=Moderately worse -3=Very much worse
0	1	2	3	4	5	6	7	8	9	10															
cGVHD symptoms not at all severe					Most severe cGVHD symptoms possible																				
<b>Functional Performance</b> (in persons >4 years old) <ul style="list-style-type: none"> <li>• Walk Time</li> <li>• Grip Strength</li> </ul>	Total Distance Walked in 2 Minutes:  Number of laps: _____ (x 50 feet) + final partial lap: _____ feet = _____ feet walked in 2 minutes	<b>Grip Strength (Dominant Hand)</b> <table border="1" style="width:100%; text-align:center;"> <tr> <td>Trial #1</td> <td>Trial #2</td> <td>Trial #3</td> </tr> <tr> <td>psi</td> <td>psi</td> <td>psi</td> </tr> </table>	Trial #1	Trial #2	Trial #3	psi	psi	psi	<b>Range of Motion:</b> <ul style="list-style-type: none"> <li>○ Not performed</li> <li>○ Physical Therapy Report Attached</li> </ul>																
Trial #1	Trial #2	Trial #3																							
psi	psi	psi																							
<b>Score</b>	<b>Lansky Performance Status Scale Definitions (circle from 0-100) (persons &lt; 16 years old)</b>	<b>Karnofsky Performance Status Scale Definitions (circle from 0-100) (persons 16 years or older)</b>																							
100	Fully active, normal	Normal no complaints; no evidence of disease																							
90	Minor restrictions in physically strenuous activity	Able to carry on normal activity; minor signs or symptoms of disease																							
80	Active, but tires more quickly	Normal activity with effort; some signs or symptoms of disease																							
70	Both greater restriction of and less time spent in play activity	Cares for self; unable to carry on normal activity or to do active work																							
60	Up and around, but minimal active play; keeps busy with quieter activities	Requires occasional assistance but is able to care for most personal needs																							
50	Gets dressed but lies around much of the day, no active play but able to participate in all quiet play and activities	Requires considerable assistance and frequent medical care																							
40	Mostly in bed; participates in quiet activities	Disabled; requires special care and assistance																							
30	In bed; needs assistance even for quiet play	Severely disabled; hospital admission is indicated although death not imminent																							
20	Often sleeping; play entirely limited to very passive activities	Very sick; hospital admission necessary; active supportive treatment necessary																							
10	No play; does not get out of bed	Moribund; fatal processes progressing rapidly																							
0	Unresponsive	Dead																							