WOMEN'S INTERAGENCY HIV STUDY	
NP01: BASELINE NEUROPATHY SIGNS AND SYMPTOMS FO	RM

A1.	PARTICIPANT ID:	- - -
A2.	WIHS STUDY VISIT #:	
A3.	FORM VERSION:	10/01/07
A4.	DATE OF INTERVIEW:	${M}$ / ${D}$ / ${Y}$
A5.	CLINICIAN'S INITIALS:	
A6.	TIME MODULE BEGAN:	_ : AM1 PM2
PRO	MPT: DO NOT ADMINISTI TWO FEET.	ER IF PARTICIPANT DOES NOT HAVE TWO LEGS AND
	SECTI	ON B: NEUROPATHY SYMPTOMS
toes of left fee the ba I am g well y	f both feet and may go up into the et, or both feet and both legs. Pleack and goes down the leg. going to ask you some questions abou can feel a tuning fork on your because of the control of the contr	n our study. We are interested in problems with the nerves that start in the legs. This kind of pain occurs at the same time in both the right and the ase do not include pain that is the result of an injury or pain that starts in bout how well the nerves in your feet work. Then, I am going to see how big toe and test your ankle reflexes. Do you have any questions? CARD NP01 TO RATE SEVERITY.
B1.	<u>time</u> ?	or burning in <u>both</u> feet, or <u>both</u> feet and <u>both</u> legs, <u>at around the same</u>
		here 1 is mild and 10 is severe, please rate to what extent this bothered right foot and leg:
B2.	In the last 6 months, have you h around the same time?	ad pain, aching, or burning in both feet, or both feet and both legs, at

WIHSII	D#	1
	On a scale of 1 to 10, who you in the	ere 1 is mild and 10 is severe, please rate to what extent this bothered
	a.	right foot and leg:
	b.	<u>left</u> foot and leg:
В3.	Sometimes people feel a sensation. This is what I mean by "pins and	n after they have been sitting for too long in one place on a hard surface needles."
	•	dles" in <u>both</u> feet, or <u>both</u> feet and <u>both</u> legs, <u>at around the same time</u> ? "pins and needles" caused by sitting for too long.)
		1
	On a scale of 1 to 10, who you in the	ere 1 is mild and 10 is severe, please rate to what extent this bothered
	a.	right foot and leg:
	b.	<u>left</u> foot and leg:
B4.	the same time? YES	d "pins and needles" in <u>both</u> feet, or <u>both</u> feet and <u>both</u> legs, <u>at around</u>
	NO	2 (B5)
	On a scale of 1 to 10, who you in the	ere 1 is mild and 10 is severe, please rate to what extent this bothered
	a.	right foot and leg:
	b.	<u>left</u> foot and leg:
B5.		ne or Orajel administered to their gums by a dentist. Even if you tap feel the tap. This is what I mean by numbness.
	Have you <u>ever</u> had numbness in <u>b</u> I am not asking about numbness of	both feet, or both feet and both legs, at around the same time? (PROBE caused by Novocaine or Oragel.)
	On a scale of 1 to 10, who you in the	ere 1 is mild and 10 is severe, please rate to what extent this bothered
	a.	right foot and leg:
	b.	<u>left</u> foot and leg:
B6.	time?	d numbness in <u>both</u> feet, or <u>both</u> feet and <u>both</u> legs, <u>at around the same</u>
		1
	NU	2 (C1)

WILL	SID#					
WIII	31D#					
		scale of 1 to in the	10, where 1 is mild	and 10 is severe, pleas	se rate to what ex	tent this bothered
	Ž		a. <u>right</u> fo	oot and leg:		
			b. <u>left</u> foo	ot and leg:		
NO'				ENT PAIN AS "8" C Y CARE PROVIDI		
			SECTION C: N	EUROPATHY SIGN	S	
INS	TRUCTIONS F	OR EVALUA	ATING PERCEPT	TION OF VIBRATIO	N:	
Have the participant sit on the edge of the exam table with her legs hanging over the side. Strike the end of a 128 Hz tuning fork hard enough that the disks audibly touch. First, establish a vibration control on the participant's wrist. Next, watch the timer as you place the stem gently but firmly on the top of the distal interphalangeal (DIP) joint of the great toe. Stop measuring the seconds when the participant indicates that no vibration is felt or after 12 seconds. The participant should say that the vibration stops when it is removed. Otherwise, re-do the test. Repeat these steps for the left toe.						
C1.	C1. I am going to put the tuning fork on your toe. I want you to tell me if you feel the vibration and as soon as it stops.					tion and as soon as it
		> 10 SECONDS (NORMAL)	6-10 SECONDS (MILD LOSS)	5 SECONDS OR LESS (MODERATE LOSS)	NO FEELING OF VIBRATION	UNABLE TO EVALUATE OR DID NOT ASSESS
	a. RIGHT	0	1	2	3	-9
	b. LEFT	0	1	2	3	-9
INSTRUCTIONS FOR EVALUATING DEEP TENDON REFLEXES: With the participant seated, use one hand to press upward on the ball of the foot, dorsiflexing the participant's ankle to 90 degrees. Use a Queen's Square hammer to strike the Achilles tendon. The tendon reflex is felt by the examiner's hand as a plantar flexion of the foot, appearing after a slight delay from the time the Achilles tendon was struck. If the reflex cannot be elicited, try again with the Jendrassik maneuver (C3).						
C2.	Please close yo	our eyes and re	elax.			
		ABSENT	HYPOACTIVE	E NORMAL, INCR OR CLONU		BLE TO EVALUATE DID NOT ASSESS
	a. RIGHT	0	1	2		-9
	b. LEFT	0	1	2		-9
C3.	ARE BOTH both C2a and		AND LEFT NORM	MAL, INCREASED, O	R CLONUS (i.e.	, "2" is circled for
		YES			1 (C5)	

WIHSID) #			
INSTRUCTIONS FOR EVALUATING DEEP TENDON REFLEXES USING THE JENDRASSIK MANEUVER: The participant should clasp her hands with one thumb up, the other thumb down, and then interlace the fingers. Instruct the participant that, on the count of three, she should pull outwards while keeping her fingers intertwined. Once she starts pulling, try to elicit the reflex again.				
C4. Pl	lease close your eyes and	ABSENT	HYPOACTIVE	NORMAL INCREASED
a.	RIGHT	0	1	2
b.	LEFT	0	1	2
NOTE: IF A PARTICIPANT ASKS HOW SHE DID, PLEASE TELL HER THAT MANY DIFFERENT PROCESSES CAN AFFECT NERVE FUNCTION. THESE INCLUDE DIABETES, HEPATITIS C, NORMAL AGING, THE MEDICATIONS USED TO TREAT HIV, AND SOMETIMES THE HIV VIRUS ITSELF. IF SHE HAS FURTHER CONCERNS, THEN SHE SHOULD BE DIRECTED TO HER HIV DOCTOR OR TO A LOCAL HIV-NEUROLOGIST.				
C5.	TIME MODULE ENDE	D:	_ _ : _	AM1 PM2