

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

BLSA Hand Photo - Ver 1.0**Section Title: Which hand**

Date Completed

☐ blank

TesterID

Which hand(s) was submitted to interpretation?

☐ Both ☐ Left only ☐ Right only ☐ None

Reason not done

☐ Physical problems ☐ Cognitive problems ☐ Refused ☐ Technical problems

1) Is the resolution maximized?

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

2) Is the background non reflective?

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

3) Are the ID and visit clearly legible?

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

4) Are the fingers slightly spread apart and the thumb slightly extended?

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

5) Are ALL DIPs visible in the photo?

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

6) Is the wrist visible? (If no, mark Unknown for wrist)

Right ☐ Yes ☐ NoLeft ☐ Yes ☐ No

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

Section Title: Right hand

TesterID

Date Completed

RIGHT Hand - Bony ProminenceWrist ☐ Absent ☐ Possible ☐ Present ☐ Unknown1st CMC
☐ Absent
☐ Possible
☐ Present
☐ Unknown1st IP
☐ Absent
☐ Possible
☐ Present
☐ Unknown1st MCP
☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd DIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd PIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd MCP
☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd DIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd PIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd MCP
☐ Absent
☐ Possible
☐ Present
☐ Unknown4th DIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown4th PIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown4th MCP
☐ Absent
☐ Possible
☐ Present
☐ Unknown5th DIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown5th PIP
☐ Absent
☐ Possible
☐ Present
☐ Unknown5th MCP
☐ Absent
☐ Possible
☐ Present
☐ Unknown**RIGHT Hand - Soft Tissue Enlargement**Wrist ☐ Absent ☐ Possible ☐ Present ☐ Unknown

1st CMC	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st IP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
2nd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
3rd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	3rd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	3rd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
4th DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	4th PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	4th MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
5th DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	5th PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	5th MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown

RIGHT Hand - Deformity

Wrist ☐ Absent ☐ Possible ☐ Present ☐ Unknown

1st CMC	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st IP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
2nd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown

3rd DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

3rd PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

3rd MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

Section Title: Left hand**LEFT Hand - Bony Prominence**Wrist ☐ Absent ☐ Possible ☐ Present ☐ Unknown1st CMC ☐ Absent
☐ Possible
☐ Present
☐ Unknown1st IP ☐ Absent
☐ Possible
☐ Present
☐ Unknown1st MCP ☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd DIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd PIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown2nd MCP ☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd DIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd PIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown3rd MCP ☐ Absent
☐ Possible
☐ Present
☐ Unknown4th DIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown4th PIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown4th MCP ☐ Absent
☐ Possible
☐ Present
☐ Unknown5th DIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown5th PIP ☐ Absent
☐ Possible
☐ Present
☐ Unknown5th MCP ☐ Absent
☐ Possible
☐ Present
☐ Unknown**LEFT Hand - Soft Tissue Enlargement**Wrist ☐ Absent ☐ Possible ☐ Present ☐ Unknown

1st CMC	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st IP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
2nd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
3rd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	3rd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	3rd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
4th DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	4th PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	4th MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
5th DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	5th PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	5th MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown

LEFT Hand - Deformity
Wrist☐ Absent ☐ Possible ☐ Present ☐ Unknown

1st CMC	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st IP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	1st MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown
2nd DIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd PIP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown	2nd MCP	<input type="radio"/> Absent <input type="radio"/> Possible <input type="radio"/> Present <input type="radio"/> Unknown

3rd DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

3rd PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

3rd MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

4th MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th DIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th PIP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

5th MCP

☐ Absent

☐ Possible

☐ Present

☐ Unknown

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

Section Title: Which hand
