Patient Year of Birth: _____(YYYY) **UPN: 2316__|__|__|__|**

Lymphedema Assessment

Was lymphedema assessment performed? No Yes Date:_____

Note: The measurements must be obtained 10 cm above and 5 cm below the olecranon process on both the ipsilateral and contralateral upper extremities

	10 cm above (cm)	Not done	5 cm below (cm)	Not done
Circumference ipsilateral arm				
Circumference contralateral arm				
Comments:				

Shoulder Motion – Goniometric Assessment

Was shoulder motion assessment performed? No Yes Date:_____

	Left shoulder (xx º)	**Normal** motion range?	**Decreased** motion range?	Not done	**Right** shoulder (xx º)	**Normal** motion range?	**Decreased** motion range?	Not done	Week 1 Patient was not allowed to lift arm above 90°
Forward flexion *Full range 180°*									No / Yes
Abduction *Full range 180°*									No / Yes
External rotation *Full range 90°*									
Internal rotation *Full range 70°*									
In case of relevant differences to the previous measurement not explainable by TAS/ ALND performed, please provide explanatory comment.									
Comment									

I confirm the correctness of this Worksheet:

Date: |__|__|.|__|__|.|__|__|__|__| Signature: _____

_____
Name of performing CRC/SN/SI/PI

Patient Year of Birth: _____(YYYY) **UPN: 2316__|__|__|__|**

Guidelines for the evaluation of the range of shoulder motion (Protocol Appendix 6, adapted)

The range of shoulder motion will be assessed by goniometric measurement of the active arm movement (forward flexion, abduction, internal rotation and external rotation) on both sides.

Goniometry procedure for measurement of all arm movements:

- The patient positions joint in zero position and stabilizes proximal joint component
- The patient moves joint to end of range of motion, i.e. his full available range of motion (to assess quality of movement)
- The patient determines end-feel at point where measurement will be taken (at the end of available range of motion)
- The assessor identifies and palpates bony landmarks
- The assessor aligns goniometer with bony landmarks while the patient holds joint at end of range
- The assessor reads the goniometer
- The assessor records measurement* (e.g. shoulder abduction = 170°)

  *Note: no predefined range for all measurements. Please record the degree you measure

Description of forward flexion and abduction:

Please watch the video for correct assessments: https://swiss-dataspace.ch/#/public/shares-downloads/PeEOFpgIxDPddso2T317zIV7URKzy2YS *(this video is a compilation of the original video from the Lone Star College-Kingwood Occupational Therapy Program, Class of 2009, available on YouTube).* The full range of motion for both measures is 0 – 180 degrees.

The measurements will start from the neutral position as defined by the hanging arm with thumb pointing forward (Figure 1, position 0°). The extent of range of motion (Figure 1, position of the arm at 180°) is measured in reference to this neutral position (Figure 1, position 0°) with elevation of the arm in the following planes:

- Sagittal plane, termed as “forward flexion”
- Frontal plane, referred to as “abduction”

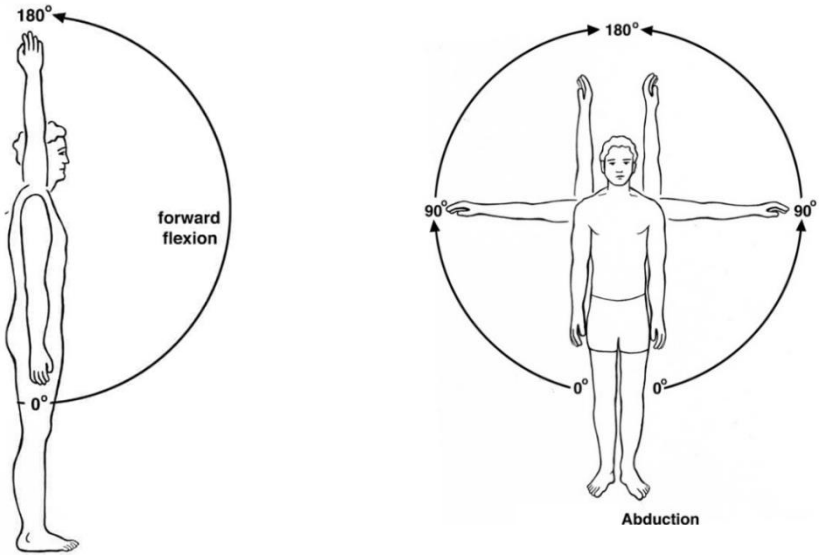

Figure 1: Forward flexion and abduction

Patient Year of Birth: _____(YYYY) **UPN: 2316__|__|__|__|**

Description of internal and external rotation:

Please watch the video for correct assessments: https://swiss-dataspace.ch/#/public/shares-downloads/PeEOFpgIxDPddso2T317zIV7URKzy2YS *(this video is a compilation of the original video from the Lone Star College-Kingwood Occupational Therapy Program, Class of 2009, available on YouTube)*. The full range of motion for the internal rotation is 0 – 70 degrees and the full range of motion for the external rotation is 0 – 90 degrees.

For rotation tasks, the measurements will start with the arm in 90° of abduction and the elbow flexed at 90° (Figure 2, position 0°). The extent of range of motion (Figure 2, indicated with 90°) is measured in reference to this neutral position (Figure 2, position 0°) with rotation of the arm as follows:

- Superior, termed as “outward rotation (external)”, i.e. external rotation
- Inferior, termed as “inward rotation (internal)”, i.e. internal rotation

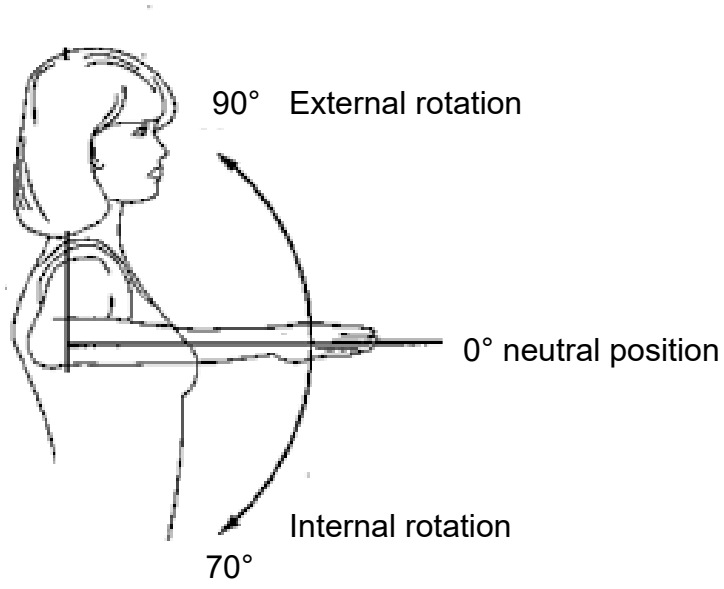

Figure 2: Internal and external rotation