DOB: Gender: Examiner:

Indicate laterality when applicable:  Left  Right

|  |  |  |
| --- | --- | --- |
| Cerebellar |  | Comments: If abnormal, explain or describe below |
| Rapid Alternating Movements (Forefinger to Thumb) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Heel to shin | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Finger-Nose-Finger | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*Gait |  |  |
| 1. Tiptoes | 1. Normal   Abnormal  Cannot assess, e*xplain*: |  |
|  | 1. Asymmetry in arm swing:   Yes No |  |
| 1. Heel walking | 1. Normal   Abnormal  Cannot assess, e*xplain*: |  |
|  | 1. Asymmetry in arm swing:   Yes No |  |
| 1. Normal gait | 1. Normal   Abnormal  Cannot assess, e*xplain*: |  |
|  | 1. Asymmetry in arm swing:   Yes No |  |
| \*Military Romberg | 1. Normal   Abnormal  Cannot assess, e*xplain*: |  |
|  | 1. Sway Yes No |  |
| \*Tandem Romberg | 1. Normal   Abnormal  Cannot assess, e*xplain*: |  |
|  | 1. Sway Yes No |  |
| \*\*Handedness | Right  Left  Ambi  Cannot assess, e*xplain*: |  |
| \*\*Cerebellar summary | Normal Abnormal  Exam not done |  |

|  |  |  |
| --- | --- | --- |
| Cranial Nerves |  | Comments: If abnormal, explain or describe below |
| Extra ocular muscles (eye movements) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| Visual fields (confrontation) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Shoulder raise | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Hearing (gross) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| Facial expression | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Tongue protrusion | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Cranial nerves summary | Normal  Abnormal  Exam not done |  |

|  |  |  |
| --- | --- | --- |
| Sensory (hands, feet) |  | Comments: If abnormal, explain or describe below |
| Light touch (Compare hand to foot) | Normal  Abnormal  Cannot assess, e*xplain*: | Supplemental |
| Pinprick | Normal  Abnormal  Cannot assess,e*xplain*: |  |
| Vibration (Compare hand to foot) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Proprioception (great toe, up/down) | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Sensory (hands, feet) summary | Normal  Abnormal  Exam not done |  |

|  |  |  |
| --- | --- | --- |
| Muscles |  | Comments: If abnormal, explain or describe below |
| \*\*Tone | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Atrophy | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Rise from chair to tip toes | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Involuntary movements | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| Proximal muscle strength | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| Distal muscle strength | Normal  Abnormal  Cannot assess, e*xplain*: |  |
| \*\*Muscle strength summary | Normal  Abnormal  Exam not done |  |

|  |  |  |
| --- | --- | --- |
| Reflexes |  | Comments: If abnormal, explain or describe below |
| Biceps | Normal  Abnormal  Hyper  Cannot assess, e*xplain*: |  |
| Wrist | Normal  Abnormal  Hyper  Cannot assess, e*xplain*: |  |
| Patellar | Normal  Abnormal  Hyper  Cannot assess, e*xplain*: |  |
| Ankle Jerk | Normal  Abnormal  Hyper  Cannot assess, e*xplain*: |  |
| \*\*Babinski | Absent  Present  Cannot assess, e*xplain*: |  |
| \*\*Hoffman’s Sign | Positive  Negative  Cannot assess, e*xplain*: |  |
| \*\*Reflexes summary | Normal  Abnormal  Exam not done |  |

|  |  |  |
| --- | --- | --- |
|  |  | Comments: If abnormal, explain or describe below |
| Neurologic summary | Normal  Abnormal  Exam not done |  |

GENERAL INSTRUCTIONS

The Neurological Exam is generally administered at screening and/or baseline to determine study eligibility. It may also be administered at follow-up visits to track a participant’s/subject’s physical status. If not specified, the CDEs on this CRF are Supplemental and should be used as needed for the study. If the study is going to conduct a neurological exam, investigators should consider these elements, but there may be some studies where a physical exam is not appropriate or could be abbreviated.

This form may be modified for study-specific research hypotheses. The CDEs are dependent on the age of the patients, the research question(s) being investigated, and other data being collected.

Important note: None of the data elements included on this CRF Module are considered Core (i.e., required for all ME/CFS studies to collect).

\*Element is classified as Supplemental – Highly Recommended

\*\*Element is classified as Exploratory

SPECIFIC INSTRUCTIONS

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

REFERENCES

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Fitzpatrick T, Peterson DL, Gottschalk CG, Rajeevan MS; MCAM Study Group. Multi-Site Clinical Assessment of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (MCAM): Design and Implementation of a Prospective/Retrospective Rolling Cohort Study. Am J Epidemiol. 2017;185(8):617-626.