此處刷卡用

台中榮民總醫院內部過敏免疫風濕科

			<u> </u>				• •	•	温胜县							
	健保員工	1		員眷		果 i	1.	類風濕性關節炎特別紀錄表(二)								
姓名		病房床			位 =		三 茜令		病歷號							
Function	al capa	acity i	n R A													
() Cla	ss I:	Capable of all activities														
() Cla	ss II:	Modera	te res	tric	tion											
		Adequate for normal activities despite handicap										of d	iscon	nfort	or	
		limite	d moti	on a	t one	or m	ore j	oints	5							
() Cla	ss III:	Marked restriction														
` ,						f-cai	re and	d dew	or no	dutie	es of	a usu	al oc	cupat	ion	
() Cla	ss IV:	Activity limited to self-care and dew or no duties of a usual occupation Bed and/or chair														
()		Capable of little or no self-care														
Articular	indox fo								itia							
Date	muex 10	i tile ass	esessi	Пеп	OI KII		atoiu	arum	1118	1						
Total score	1															
oint score		Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt	Rt	Lt	
G-M join		Itt	Li	IXU	Lt	140	Li	IXt	Li	IXC	Lt	140	Li	IXC		
C-spine																
ternoclay																
Acrominoc																
houlder																
Elbow																
Vrist																
ЛСР																
PIP																
Hip																
Knee																
Ankle																
aloealc																
/Iid-tarsal																
ЛТР																

*0=no tender, 1= tender, 2=tender & winced, 3= tender & winced & withdrew

Signature: