BU-WOUND-STUDY	FOLLOW-UP	Side Code ☐☐☐	Patient´s NO ☐☐☐

Date: __. __. __ (dd/mm/yy)

General Information

Hospital status	(1) hospitalized	(0) outpatient	(8) discharge date: __.__.__ (dd/mm/yy)

Body temperature (axillary): __ __, _ °C

Weight __ __ __ kg

Main treatment

☐ Antimycobacteria agents: _____

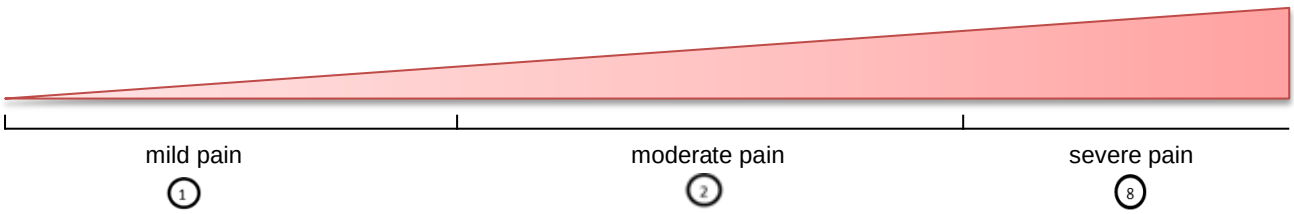
☐ Physiotherapy/ physical rehabilitation

☐ Others: _____

Present complaints and since last examination

Pain	(1) Yes*	(0) No

* If yes, specify in the visual analog scale (VAS)



Is there an analgesic therapy?	(1) Yes	(0) No
	If yes, please specify:	
Other complaints?	(1) Yes	(0) No
	If yes, please specify:	

Lymph nodes

Palpable	(1) Yes	(0) No
If yes:	(1) generalized	(2) head/ neck
	(3) armpit	(4) grain
Painful on palpation	(1) Yes	(0) No
Skin above palpable lymph node warmer compared to surrounding skin	(1) Yes	(0) No

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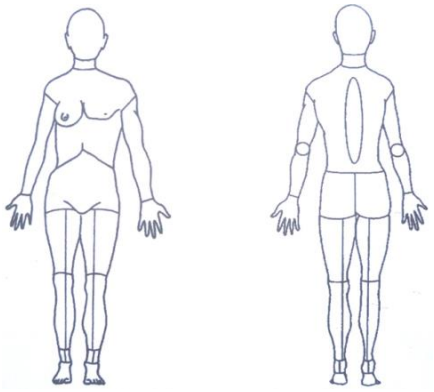
Lesion specific

Fill in one form per lesion in patients with multiple lesions. Number the lesions as in the CRF “Day 0”.



☐ Ulcer ☐ Nodule

Lesion Localization ☐☐☐

Main treatment

□ Dressing
□ Excision
□ Skin graft: Date: __. __. __ (dd/mm/yy)
□ Amputation : Date: __. __. __ (dd/mm/yy)
□ Debridement: Date: __. __. __ (dd/mm/yy)
□ Others: _____

Wound Assessment

Size

Max. diameter: __ __ __ mm Area of the wound __ __ __ mm²
Max. diameter: __ __ __ mm Area of the induration __ __ __ mm²

Epithelialization		(1) Yes	(0) No	
Eschar		(1) Yes	(0) No	
Exudation		(1) Yes	(0) No	
Scarring		(1) Yes	(0) No	
Moisture balance		(1) dry	(0) moisture	
Wound base		(1) clear discharge	(0) necrotic	
		(8) white- cotton wool	(2) fibrinous	
Granulation tissue		(1) Yes	(0) No	
	If yes, specify:	(1) normal	(0) discoloration	
		(8) other:		
Margin of the ulcer		(1) undermined	(0) collapsed	
		(8) flat	(0) edematous	
		(2) reddened		

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Surrounding skin of the lesion	(0) induration, size:	(1) oedema, size
	(8) discoloration, size:	(2) ΔT
	(3) redness	

Microbiological assessment

Wound surface looks	(1) opaque	(0) yellow
	(8) green	
Discharge	(1) Yes	(0) No
If yes please specify:	(1) clear	(0) bloody
	(8) pus	(2) others:
Odor	(1) Yes	(0) No

Laboratory

Swab, Microbiology	(1) done	(0) not done	(8) not applicable
Blood sample	(1) done	(0) not done	(8) not applicable
Blood culture	(1) done	(0) not done	(8) not applicable
Punch biopsy	(1) done	(0) not done	(8) not applicable
Tissue samples (Debridement/ Excision)	(1) done	(0) not done	(8) not applicable

Photographs

Photographs taken (1) Yes (0) No

if no, please specify reason_____

if yes, fill in the nos:

Picture nos: _____, _____, _____, _____, _____

Investigator(s) signature(s):