**脊髓损伤患者登记表**

**Information of Patient with Spinal Cord Injury**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名  Name |  | 性 别  Gender | | | | |  |
| 出生年月  Date of birth |  | 发病日期  Date of accident | | | | |  |
| 身份证号  ID number |  | 联系电话  Mobile number | | | | |  |
| 家庭住址  Home address |  | 受教育程度  Education | | | |  | |
| 导致脊髓损伤原因  Causes of injury | 外伤trauma  肿瘤tumor  脊髓炎myelitis  脊柱结核spinal tuberculosis | | | | 脊髓血管性疾病vascular disease of spinal cord  椎间盘突出prolapse of lumbar intervertebral disc  其他others | | |
| 损伤平面  Level of injury |  | | | ASIA分级  Grade of ASIA | | |  |
| 曾经就诊医院  Hospital admission |  | | | | | | |
| 曾经进行治疗  Treatment history |  | | | | | | |
| 既往病史  Past history |  | | | | | | |
| 患者目前情况  Current conditions of the patient | 1.肢体功能motor function：  使用高靠背轮椅，有时需要辅助呼吸  Uses high back wheelchair，needs assisted aspiration sometimes  可用生活辅助具自己进食和做部分清洁活动，用手摇杆操控电动高靠背轮椅  Eats cut food and performs partial grooming task (washing hands and face , brushing teeth, combing hair, shaving, applying makeup) using adaptive devices, controls high back wheelchair using joystick  独立穿衣，自己完成某些身体转移动作  Dresses independently, performs some transferring movements  独立进行各种身体转移，独立使用轮椅，自己处理大小便  Performs all kinds of transferring activities independently, uses wheelchair independently, manages feces and urine by his or her own  自由使用轮椅，穿戴矫形器，用腋拐或助行器可治疗性站立和步行  Uses wheelchair freely, wears orthotics, therapeutic standing and walking with axillary crutches or walkers.  完成以上动作，并利用矫形器和拐杖或助行器做家庭功能性步行  Performs above movements, and accomplishes family functional ambulation with orthotics and crutches or walkers.  利用（或不利用）矫形器和手杖，可进行社区功能性步行  Performs community functional ambulation with or without orthotics and crutches  其他（请根据您的个人情况补充填写，如果无特殊补充可不填本条） others  2.大、小便功能bladder and bowel function：  基本正常almost normal  尿潴留urinary retention  尿失禁urinary incontinence  便秘Constipation  其他 others  3.并发症（可多选）complication（selecting more than one options is allowed）：  肺部感染 pulmonary infection  肺栓塞 pulmonary embolism  呼吸衰竭 respiratory failure  深静脉血栓 deep vein thrombosis  体位性低血压 postural hypotension  痉挛 spasm  关节挛缩 contracture of joint  压疮 contracture of joint  泌尿系感染 urinary system infection  异位骨化 urinary system infection  自主神经反射亢进 autonomic hyperreflexia  4.其他补充情况other supplemental conditions： | | | | | | |
| 报送单位  Institution of the reporter |  | | 报送者姓名  Name of reporter | | | |  |
| 报送者电话  Phone number of the reporter |  | | 报送者邮箱  E-mail of the reporter | | | |  |
| 报送日期  Date of report |  | | | | | | |

说明：在“导致脊髓损伤原因”和“患者目前情况”部分，点击符合患者情况的条目前面的，将会变成√。

Note：Touch the  before the items in the box of “Causes of injury” and “Current conditions of the patient” that occur on the patient，the  will turn into √.

**请您将表格发送回我们的邮箱：[xwhospitalkf@163.com](mailto:xwhospitalkf@163.com)。非常感谢。**