

Psoriasis Area and Severity Index Version Fredriksson (PASI FREDRIKSSON)

Item Number	Item Description	Item Response
		<p>If every item on the instrument was not completed, please provide the reason not done:</p> <p>_____</p> <p style="text-align: right;">RSREASND when RSSTAT = NOT DONE</p>
Head		
1	Erythema/Redness Symptom Score RSTESTCD = PASI0301	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe RSORRES RSSTRESC/ RSSTRESN
2	Thickness/Induration Symptom Score RSTESTCD = PASI0302	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe RSORRES RSSTRESC/ RSSTRESN
3	Desquamation/Scaling Symptom Score RSTESTCD = PASI0303	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe RSORRES RSSTRESC/ RSSTRESN
4	Area Score RSTESTCD = PASI0304	<input type="checkbox"/> 0 = No involvement <input type="checkbox"/> 1 = <10% <input type="checkbox"/> 2 = 10 - <30% <input type="checkbox"/> 3 = 30 - <50% <input type="checkbox"/> 4 = 50 - <70% <input type="checkbox"/> 5 = 70 - <90% <input type="checkbox"/> 6 = 90 - 100% RSORRES RSSTRESC/ RSSTRESN
Upper Extremities		
5	Erythema/Redness Symptom Score RSTESTCD = PASI0305	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
6	Thickness/Induration Symptom Score RSTESTCD = PASI0306	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe

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7	Desquamation/Scaling Symptom Score RSTESTCD = PASI0307	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
8	Area Score RSTESTCD = PASI0308	<input type="checkbox"/> 0 = No involvement <input type="checkbox"/> 1 = <10% <input type="checkbox"/> 2 = 10 - <30% <input type="checkbox"/> 3 = 30 - <50% <input type="checkbox"/> 4 = 50 - <70% <input type="checkbox"/> 5 = 70 - <90% <input type="checkbox"/> 6 = 90 - 100%
Trunk		
9	Erythema/Redness Symptom Score RSTESTCD = PASI0309	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
10	Thickness/Induration Symptom Score RSTESTCD = PASI0310	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
11	Desquamation/Scaling Symptom Score RSTESTCD = PASI0311	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
12	Area Score RSTESTCD = PASI0312	<input type="checkbox"/> 0 = No involvement <input type="checkbox"/> 1 = <10% <input type="checkbox"/> 2 = 10 - <30% <input type="checkbox"/> 3 = 30 - <50% <input type="checkbox"/> 4 = 50 - <70% <input type="checkbox"/> 5 = 70 - <90% <input type="checkbox"/> 6 = 90 - 100%

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Lower Extremities		
13	Erythema/Redness Symptom Score RSTESTCD = PASI0313	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
14	Thickness/Induration Symptom Score RSTESTCD = PASI0314	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
15	Desquamation/Scaling Symptom Score RSTESTCD = PASI0315	<input type="checkbox"/> 0 = None <input type="checkbox"/> 1 = Slight <input type="checkbox"/> 2 = Moderate <input type="checkbox"/> 3 = Severe <input type="checkbox"/> 4 = Very severe
16	Area Score RSTESTCD = PASI0316	<input type="checkbox"/> 0 = No involvement <input type="checkbox"/> 1 = <10% <input type="checkbox"/> 2 = 10 - <30% <input type="checkbox"/> 3 = 30 - <50% <input type="checkbox"/> 4 = 50 - <70% <input type="checkbox"/> 5 = 70 - <90% <input type="checkbox"/> 6 = 90 - 100%

Reference: Fredriksson T, Pettersson U. Severe Psoriasis - Oral Therapy with a New Retinoid. Dermatologica. 1978; 157(4):238-244.

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