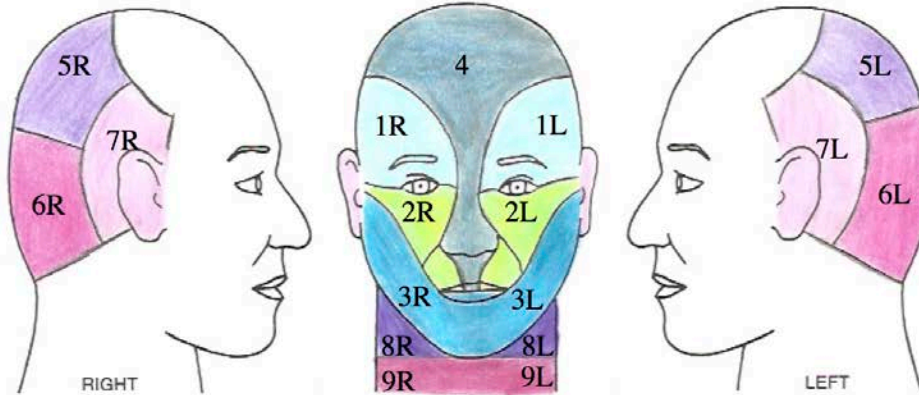


Upper and Lower Body Segmental Hemangioma Study

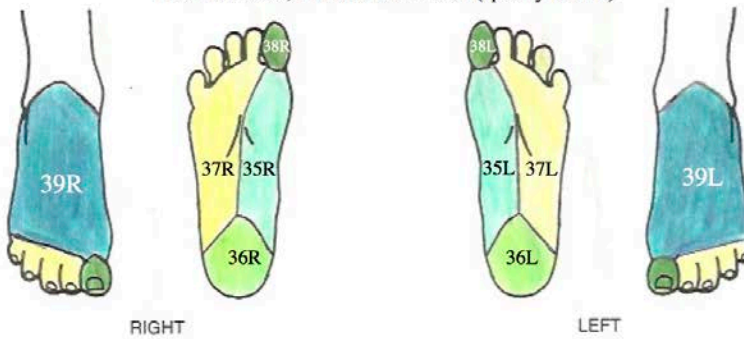
PI: Dr. Maria Garzon
IRB Approval #: AAAR8409

Physician Institution: _____

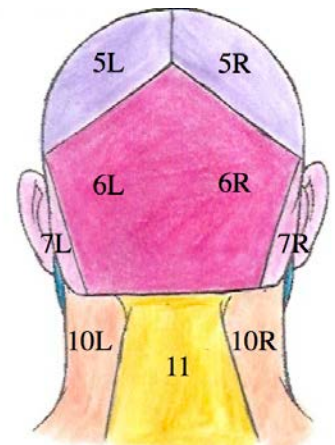
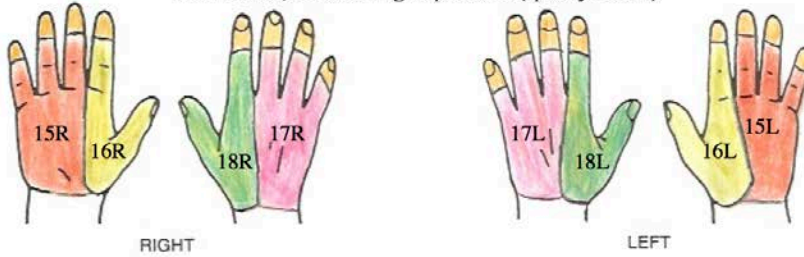
1. Please shade below diagram to represent the approximate size and distribution of the patient's segmental hemangioma. Please include measurements, when available.



Great toe is 38; all other toes are 37 (specify R or L)



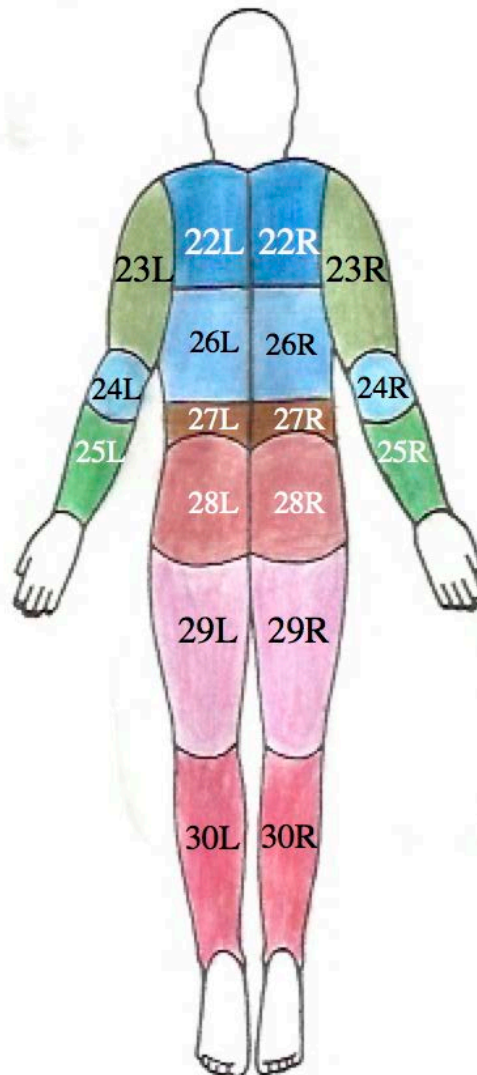
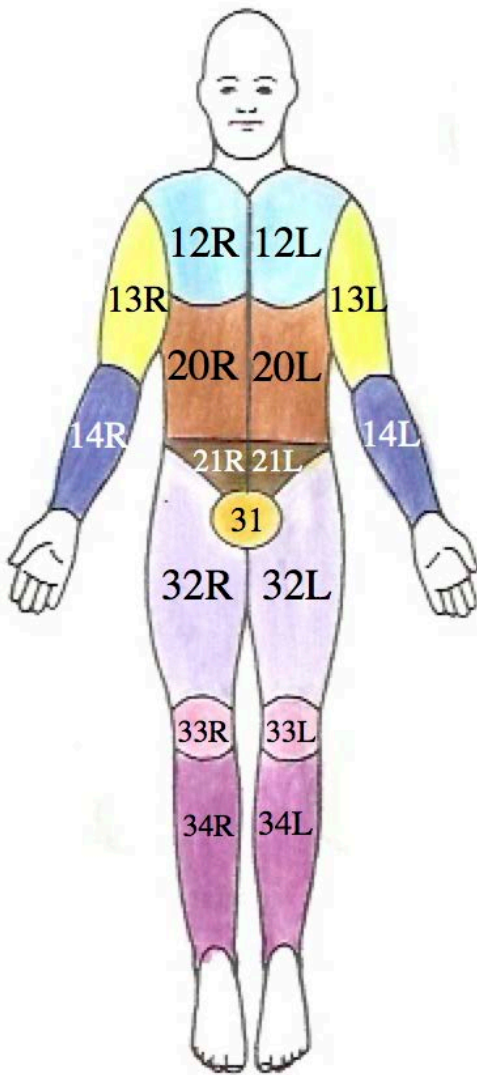
Thumb is 16; all other fingertips are 19 (specify R or L)



- 2.

Upper and Lower Body Segmental Hemangioma Study

PI: Dr. Maria Garzon
 IRB Approval #: AAAR8409



3. Does the child have any markers of spinal dysraphism?

If yes, check all that apply.

- Hypertrichosis
- Dimple
- Nevus
- Asymmetrical gluteal cleft
- Skin appendage / tag
- Lipoma
- Aplasia cutis

Yes No Unknown

- Dermal melanocytosis
- Caudal appendix
- Acrochordon
- Dermal sinus
- None
- Other: _____

Upper and Lower Body Segmental Hemangioma Study

PI: Dr. Maria Garzon

IRB Approval #: AAAR8409

4. Does the child have any defects of the chest wall?

Yes No Unknown

If yes, check which apply:

- Midline abdominal raphe
- Omphalocele
- Sternal pit
- Absent sternum
- Midline hemangioma
- Unknown

- Bifid sternum
- Sternal cleft
- Other, please describe:

5. Does the child have myelopathy?

Yes No Unknown

If yes, check all that apply:

- Tethered cord
- Lipomyelocele
- Lipomyelomeningocele
- Syrinx
- Spinal dysraphism

- Abnormal termination of conus medullaris (high or low)
- Abnormally thickened / fatty filum terminale
- Other: _____

6. Does the child have any brain abnormalities?

Yes No Unknown

If yes, check which apply:

- Posterior fossae anomalies
- Cerebral hypoplasia
- Arachnoid cyst
- Agenesis/dysgenesis of corpus callosum
- Septum pellucidum

- Frontal lobe calcification
- Absence of foramen lacerum
- Polymicrogyria
- Other, please describe: _____
- Unknown

7. Does the child have any eye anomalies?

Yes No Unknown

If yes, check which apply:

- Microphthalmos
- Retinal vascular abnormality
- Persistent fetal retinal vessels
- Optic atrophy
- Iris vessel hypertrophy
- Iris hypoplasia
- Optic nerve hypoplasia
- Congenital cataracts

- Sclerocornea
- Lens coloboma
- Exophthalmos
- Congenital third nerve palsy
- Morning glory deformity of retina
- Glaucoma
- Other, please describe: _____
- Unknown

8. Does the child have any heart problems?

Yes No Unknown

If yes, check which apply:

- Atrial septal defect
- Ventricular septal defect
- Patent foramen ovale
- Patent ductus arteriosus
- Tricuspid atresia
- Pulmonary stenosis
- Persistent left SVC
- Dextrocardia

- Aortic coarctation
- Transverse coarctation
- Aortic aneurysm
- Double aortic arch
- Interrupted aortic arch
- Right aortic arch
- Left aortic arch
- Anomalous coronary arteries

Upper and Lower Body Segmental Hemangioma Study

PI: Dr. Maria Garzon

IRB Approval #: AAAR8409

Other, please describe: _____

Unknown

9. Does the child have any arterial anomalies?

Yes No Unknown

If yes, please name the affected artery or arteries and describe the nature of the anomaly:

10. Does the child have any urogenital anomalies?

Yes No Unknown

If yes, check all that apply:

Elongated or extrophied bladder

Ureteral reflux

Pyelo-ureteral duplication

Clitoromegaly

Hemiclitoris

Incomplete, hypertrophied, asymmetric or atrophic labia majora

Absent labia minora

Vaginal duplication or atresia

Uterine cavity duplication

Undescended testis(es)

Hydrocele

Testicular remnant

Torqued penis

Hypospadias

Micropenis

Bifid or vulviform scrotum

Ambiguous genitalia

Other: _____

11. Does the child have any anorectal malformations?

Yes No Unknown

If yes, check all that apply:

Imperforate anus

Fistulas (recto-vestibular, recto-vaginal, recto-scrotal, rectal-fourchette, recto-perineal)

Anus (anterior displacement, stenosis, vestibular)

Complex cloacal anomaly

Deviated gluteal cleft

Other: _____

12. Does the child have any renal anomalies?

Yes No Unknown

If yes, check all that apply:

Single kidney

Pelvic kidney

Pelviectasia

Pelvic diastasis

Nephromegaly

Hydronephrosis

Hypoplastic kidney

Duplex left kidney

Other: _____

13. Does the child have any musculoskeletal anomalies?

Yes No Unknown

If yes, check all that apply:

Foot deformity

Leg discrepancy in length or diameter

Hip dysplasia

Sacrum abnormality

Scoliosis

Other: _____

Upper and Lower Body Segmental Hemangioma Study

PI: Dr. Maria Garzon

IRB Approval #: AAAR8409

14. Does the child have any internal hemangiomas? Yes No Unknown

If yes, please describe the type and site of the internal hemangioma(s):

15. Does the child have any other anomalies, including skin lesions such as congenital melanocytic nevi or focal hemangiomas, not previously mentioned? Yes No Unknown

If yes, please describe the nature and site of the anomaly:

16. Please indicate if any of the below studies were ever performed and associated detail regarding the **area of the body imaged** and **results**:

US: _____

CT: _____

Echocardiogram: _____

Other: _____

MRI / MRA: _____

17. Was this patient ever diagnosed with definite PHACE, possible PHACE or LUMBAR syndrome?

Yes, definite PHACE

Yes, possible PHACE

Yes, LUMBAR

No