

SECTION 2.2: Haemophilia Joint Health Score (HJHS)

Patient ID: _____

Name of Physiotherapist: _____

Date start: _____ Time: _____

	Left Elbow	Right Elbow	Left Knee	Right Knee	Left Ankle	Right Ankle
Swelling	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Swelling Duration	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Muscle Atrophy	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Crepitus on motion	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Flexion Loss	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Joint Pain	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Strength	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE	<input type="checkbox"/> NE
Joints Total						
Sum of Joints Total						
Global Gait Score						
(Non-Evaluable included in Gait items)						
HJHS Total Score						

Swelling	
0	No Swelling
1	Mild
2	Moderate
3	Severe
Swelling duration	
1	No Swelling or <6 months
0	≥ 6 months
Muscle Atrophy	
0	None
1	Mild
2	Severe
Crepitus on motion	
0	None
1	Mild
2	Severe

Joint Pain	
0	No pain through active range of motion
1	No pain through active range only pain on gentle overpressure or palpation
2	Pain through active range
Strength (Using The Daniels & Worthingham's scale) within available ROM	
0	Holds test position against gravity with maximum resistance (gr.5)
1	Holds test position against gravity with moderate resistance (but breaks with maximal resistance) (gr.4)
2	Holds test position with minimal resistance (gr 3+) or holds test position against gravity (gr.3)
3	Able to partially complete ROM against gravity (gr.3/2+) or able to move through ROM gravity eliminated (gr 2-)
4	Trace (gr.1) or no muscle contraction (gr.0)
Global Gait (walking, stairs, running, hopping on 1 leg)	
0	All skills are within normal limits
1	One skill is not within normal limits
2	Two skills are not within normal limits
3	Three skills are not within normal limits
4	No skills are within normal limits

Flexion Loss	
0	<5°
1	5°-10°
2	11°-20°
3	>20°
Extension Loss (From Hyperextension)	
0	<5°
1	5°-10°
2	11°-20°
3	>20°

Comments:

The HJHS is designed for use by physiotherapists. In order to maintain the precision and validity of the tool (score) the developers of the tool strongly recommend that the tool be used by physiotherapists /healthcare professionals who have hemophilia-related expertise/experience and have been trained in the use of clinical measures, musculoskeletal assessment and specifically administration of the HJHS. It is essential for the physiotherapist to possess the required expertise and skills necessary to use anthropometric measures such as muscle testing and range of motion/goniometry, as well as posture and gait assessment prior to performing the evaluation (HJHS).