

Lipodystrophy Evaluation

Please quantify fat increase (+) or atrophy (-) in each of the following areas:

Face: 0 | -½ | | -1 | | -1½ | | -2 |

**Neck/Chin/
Shoulder:** 0 ½ 1 1½ 2

Arms: 0 | -½ | | -1 | | -1½ | | -2 |

Abdomen: 0 ½ 1 1½ 2

Hips/Legs: 0 | -½ | | -1 | | -1½ | | -2 |

Breasts: 0 ½ 1 1½ 2

Total score _____