

Depending if this questionnaire is being used for the healthy or the injured hand, the corresponding term should be checked:

Healthy

Injured hand

Question	Score
1. <u>Do you ever experience any undesirable feelings in your hand during cold weather or with direct contact to cold objects? (This questionnaire should not be used if the answer to this question is "no" for both hands. If "no" for one hand, assign the CISS score "0" to that hand and compare to the score obtained in the other hand using the questions in this questionnaire).</u>	<u>Yes/No</u>
2. Which of the following symptoms of cold intolerance do you experience in your hand upon exposure to cold?: Pain, swelling, aching, numbness, stiffness, weakness, skin color change (white/ bluish white/ blue)	Not scored
3. How often do you experience these symptoms <u>when you are in cold weather or are directly exposed to cold items? (if pain is present in both situations then score this question based on whichever of these two elicits the more undesirable feeling)(please check):</u> Continuously/ all the time <u>Most of the time</u> <u>Half of the time</u> <u>Rarely</u> <u>Occurred once</u>	10 8 6 4 2
4. When you develop cold induced symptoms, upon your return to a warm environment, are the symptoms relieved (please check): Within a few minutes Within 30 minutes After more than 30 minutes	2 6 10
5. What do you do to ease or prevent your symptoms from occurring? (please check):(If the specific action of the patient is not listed, try to match the patient's actions to one of the suggestions below) Take no special action Keep hand in pocket Wear gloves in cold weather Wear gloves all the time <u>Actively avoid cold weather/stay indoors</u>	0 2 4 6 8
6. <u>Please rate to what extent the cold induced symptoms bother your hand in the following situations: (0 means that the cold induced symptoms don't occur during the activity, 10 means you can no longer execute the activity due to the cold induced symptoms):</u> Holding a glass of ice water for 30 seconds Holding a frozen package from a freezer for 30 seconds <u>Holding your hands in cold water for 30 seconds (ex. washing dishes)</u> When you get out of a hot bath/shower with air at room temperature During cold weather <u>when you go outside</u>	/10 /10 /10 /10 /10

7. Please state how each of the following activities have been affected as a consequence of cold induced symptoms in your hand and score each on a scale from 0 to 4. 0 Means that the cold induced symptoms have had no effect whatsoever on the activity. 4 Means that you are no longer able to perform the activity due to the cold induced symptoms:

Domestic chores	/4
Hobbies and interests	/4
Dressing and undressing	/4
Tying your shoe laces	/4
Your job	/4

Add up all the scores and multiply by 100/98 to get a percentage score.