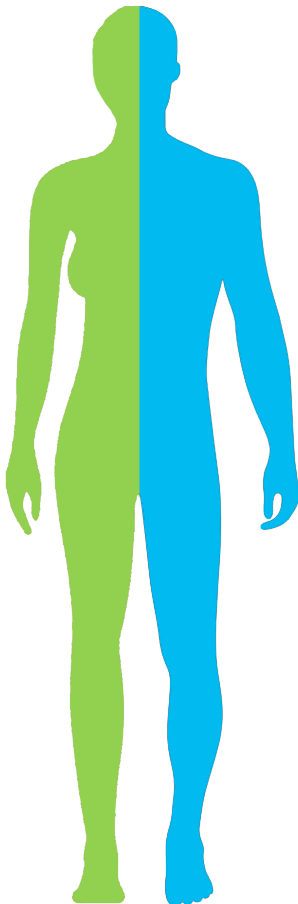


Alopecia Areata Questionnaire

This questionnaire can help you prepare for a conversation with your doctor about your alopecia areata symptoms and possibly participating in a clinical trial.

Fill in the answers to each question and take this with you to your next appointment with your health care provider.

Circle areas where you have hair loss.



What is your age?

How long have you had hair loss?

Diagnosis	Date of Diagnosis
<input type="checkbox"/> alopecia areata	_____
<input type="checkbox"/> alopecia totalis	_____
<input type="checkbox"/> alopecia universalis	_____
<input type="checkbox"/> undiagnosed	_____

How would you describe the severity of your alopecia areata?

What percentage of your scalp is affected?

If applicable, how many hair loss patches do you currently have?

If applicable, what is the largest number of hair loss patches you have had in the past at the same time?

How would you describe the size of your hair loss patches – dime, nickel, quarter, other?

Has your hair fully grown back?

If so, when and for how long?

How long has your current active episode of alopecia areata persisted?

Your Treatment History

	Current	Past		
Treatment				
Date Started				
Date Ended				
Results				