

Version June 2009



Date:



Partial Mayo Scoring Index A

Assessment for Ulcerative Colitis Activity	Patient Name: Date of Birth: PHN/ULI:	
Patient, please enter number of daily bowel motions you when in remission or before your diagnosis or symptoms ulcerative colitis began. This number will be Your Norma	of	
Patients, please complete Questions number 1 and 2.		
1. Stool Frequency (based on the past 3 days) Normal number of stools 1-2 stools more than normal 3-4 stools more than normal 5 or more stools more than normal 2. Rectal Bleeding (based on the past 3 days) No blood seen Streaks of blood with stool less than half the time Obvious blood with stool most of the time Blood alone passed Physician, please complete Questions number 3.	= 0 = 1 = 2 = 3 = 0 = 1 = 2 = 3	
3. Physician's Global Assessment (to be completed	hy Physician VERSIT	
Normal (sub scores are mostly 0) Mild disease (sub scores are mostly 1) Moderate disease (sub scores are mostly 1 to 2) = Severe disease (sub scores are mostly 2 to 3)	= 0 = 1	
The physician's Global Assessment acknowledges the and functional assessment and other observations su status	-	
Total Partial Mayo Index Score [sum of all above ite	ms]	
Remission = 0-1 Mild Disease = 2-4 Moderate Disease = 5-6 Severa Disease = 7-9		