

## UNIVERSITY OF CALIFORNIA LIMB MALFORMATION STUDY

Please take a few minutes and complete this short questionnaire **for each participant**. Your answers are extremely valuable for our study, regardless of whether or not you have limb malformations. **All information you provide in this questionnaire will be kept confidential** and used only for the UC Limb Malformation Study. Please contact me, Nadav Ahituv, by email at [nadav.ahituv@ucsf.edu](mailto:nadav.ahituv@ucsf.edu) or by telephone at 415 476 1838 with any further questions you may have regarding this questionnaire.

Name: (Last) .....(First).....

DOB ...../...../.....

Gender:  Male  Female

Address: .....City .....State.....

ZIP..... Phone..... Email.....

The reason for the following ethnicity questions is that if we do find a mutation we can know to what control population to compare it to, to make sure this is unique and thus possibly causative. Feel free not to answer this portion if you don't want to.

### Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino
- Unknown

### Race [check all that apply]:

- American Indian/Alaska Native
- Asian
- Native Hawaiian or other Pacific Islander
- Black or African American
- White
- More than one race

### Country of origin of ancestors

Mother's side:

Father's side:

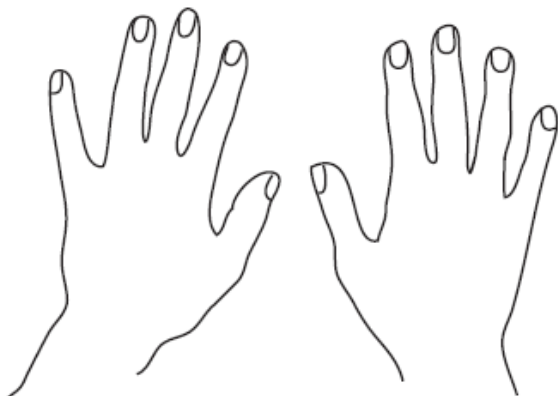
Any family history of limb malformations?  Yes  No

If so, what is their relationship to you?

Limb Malformation?  Yes  No

If no, no need to answer questions on the next page.

If yes, could you describe in words and draw malformation on the hands and/or feet below. Please also answer the following questions.



Description:



Description:

**Additional birth defect?**   Yes   No   **If yes, could you specify more below:**

**Was pregnancy normal?**   Yes   No   **If no, could you specify more below:**

**Thank you for your time!**