

Muscular Dystrophy

What type of MD do you have?

- | | |
|---|--|
| <input type="checkbox"/> Duchenne's | <input type="checkbox"/> Becker Myopathy |
| <input type="checkbox"/> Limb-girdle dystrophy | <input type="checkbox"/> Fascioscapulohumeral dystrophy |
| <input type="checkbox"/> Myotonic myopathy | <input type="checkbox"/> Infantile Spinal Muscular atrophy |
| <input type="checkbox"/> Juvenile Spinal Muscular atrophy | |

What are your symptoms:

How is your muscle strength in your extremities and trunk?

How is your balance? _____

How is your posture? _____

What is the average length of activity before you become fatigued?

Do you carry Oxygen? Yes ___ No ___

Participant Name: _____