

### Electronic supplementary material 3

Study documentation per patient

To be filled in on: [https://de.surveymonkey.com/r/Lipedema Meaverin](https://de.surveymonkey.com/r/Lipedema_Meaverin)



Mail Address for contacts: \_\_\_\_\_ (please always insert the same)

Patient number \_\_\_\_ (Please select 1, 2, no numbers of your system to avoid the possibility of identifying your patient and protect privacy)

Age: \_\_\_\_\_ BMI: \_\_\_\_\_

Lipedema at

upper arm

Forearm

Thigh

Calves

Wearing regularly compression?    yes            no            sometimes

Mean Pain Score (0-10) before the treatment

right arm \_\_\_\_\_      Left arm \_\_\_\_\_

right leg \_\_\_\_\_      Left leg \_\_\_\_\_

Infiltration of 0.4% Mepivacaine (or alternative: \_\_\_\_\_)

upper arm      Right \_\_\_\_\_ ml      left \_\_\_\_\_ ml

Forearm      Right \_\_\_\_\_ ml      left \_\_\_\_\_ ml

Thigh      Right \_\_\_\_\_ ml      left \_\_\_\_\_ ml

Calves      Right \_\_\_\_\_ ml      left \_\_\_\_\_ ml

Mean Pain Score (0-10) one week after the treatment

right arm \_\_\_\_\_      Left arm \_\_\_\_\_

right leg \_\_\_\_\_      Left leg \_\_\_\_\_

Answer invitation per mailing after 1 Month and 1 year

Mean Pain Score (0-10) one month / one year after the treatment

right arm \_\_\_\_\_      Left arm \_\_\_\_\_

right leg \_\_\_\_\_      Left leg \_\_\_\_\_