TOLERANCE TO ULTRAVIOLET RADIATION SKIN TYPING /SUBTYPING QUESTIONNAIRE

| Name Hor | | | e Phone | | | Birthday | | | |
|--|--|------------|------------------------------------|--|---------------|-------------------------|------------------------------------|------|--|
| AddressSi | | Stud | lent Faculty | | Не | Health Club | | | |
| City State ZIP | | | raternity | | So | orority | | | |
| | Other Why do you want to be tan? | | | | | | | | |
| | When exposed to ultraviolet radiation (sunlight or tanning bed | | | | | | | | |
| | A. Do you <u>eventually</u> develop a TAN?Ye | es (2 pts) | (Go To 1- | B) | | NO = Skir | Type 1 (Stop) | | |
| | B. Or do you <u>always</u> SUNBURN without tanning?N | | - | uestion 2) | _ | YES = Ski | in Type 1 (Stop) | | |
| 2. | . What is the natural color of your untanned <u>SKIN</u> ? | | | 7. Which best describes your <u>SUNBURN</u> potential? | | | | | |
| | (0) Reddish - White | | (0) <u>ALWAYS</u> sunburn withou | | | • | | | |
| | (2) White-Beige | | | | unburn but ca | | | | |
| | (4) Beige | | | | ALLY sunbur | | oderately | | |
| | (8) Light Brown | | | | inburn and ta | | | | |
| | (12) Brown (16) Black | | | | | | rk tan | | |
| | 16) Black (16) <u>NEVER</u> sunburn Vhat is your natural HAIR color? | | | | | TANNING | notontial? | | |
| | (0) Red, Light Blond | | (0) <u>NEVER</u> tan (Skin type 1) | | | | <u>a</u> potentiar. | | |
| | (2) Blond, Light Brown (2) Can develop a LIGHT to | | | | | | | | |
| | _ (4) Brown | | | (4) Can develop a MODERATE tan | | | | | |
| | (6) Dark Brown (8) Can develop a [| | | | | | | | |
| | (8) Brownish - Black (12) Can develop a <u>VERY I</u> | | | | | RK tan | | | |
| | (10) Black | | | | | | | | |
| 4. | What is your EYE color? Add the points from your answers | | | | | to questio | ns <u>1A & 1B</u> and <u>2</u> | - 8 | |
| | _ (2) Blue, Green, Grey and compare your total to the skin | | | | | | pes described belo |)W. | |
| | (4) Dark Grey, Light Brown | | | | | | | | |
| | (8) Brown | | 9. TOTA | L SCORE_ | SK | IN TYPE/ | SUBTYPE | | |
| | (10) Dark Brown | | | a = | | | | | |
| | How many FRECKLES do you have? | | Score . | | Tolerance To | | | | |
| | (3) Many 0-2 1 Geneticall (2) Some [Note: Skin type 1s MUS | | | | | unable to develop a tan | | | |
| | (1) Few | | 4-7 | 2A | Extremely lo | - | = | | |
| _ | (0) None | | 8 - 14 | 2B | Very low tole | | | | |
| | Which best describes your GENETIC heritage? | | 15 - 21 | 2C | Low tolerand | | VII | | |
| Mo | | | 22 - 31 | 3A | Low/Normal | | to UVR | | |
| | (0) Caucasian, Celtic (English / Irish) Ancestry | | 32 - 41 | 3B | Normal toler | | | | |
| | (2) Caucasian, Light-Skinned European Ancestry | | 42 - 54 | 3C | High/Norma | | | | |
| | (4) Caucasian, Dark-Skinned European Ancestry | | 55 - 69 | 4 | High toleran | ce to UVR | | | |
| _ | (8) Caucasian, Mediterranean Ancestry | | 70 - 86 | 5 | Brown skin i | s very UVR | tolerant | | |
| | (12) Middle Eastern, Indian, Asian, Hispanic Ancestry | | 87 + | 6 | | - | UVR tolerant | | |
| _ | (16) Aborigine, African, African-American Ancestry | | | | | | | | |
| | Are you suphurned on any part of your hadr? (***) | ••••• | | ••••• | •••••• | YES | No | •••• | |
| | Are you sunburned on any part of your body? (***) Are there areas of your body that you will expose to UVR that | are not | now tor- | od2 | | YES | No No | | |
| | . Are there areas of your body that you will expose to OVK that . How would you describe your level of acquired tan (facultativ | | | | 2 | 123 | INU | | |
| . 2 | No Tan Light Tan Moderate Tan Dark Tan | - hiame | | | •• | | | | |
| 13 | . Have you ever been advised by a physician to stay out of the | sun? (** | *) | | | YES | No | | |
| | If Yes, why? | | | | | | | | |
| 14. Are you taking any medication that could cause photosensitivity? (***) | | | | | | YES | No | | |
| 15 | If Yes, please list medication (s) Are you pregnant or suspect that you may be pregnant? (***) | | | | | YES | No | | |
| | . Are you pregnant or suspect that you may be pregnant? (""") . Do you have psoriasis? (***) | | | | | YES | No | | |
| | . Do you have psoriasis? () . Do you have systemic lupus erythematosis? (***) | | | | | YES | No | | |
| | . Have you ever been diagnosed with and treated for skin canc | er? (***) | | | | YES | No | | |
| | If Yes, please list details. | () | | | | | | 0 | |

(***) If you answer "Yes" to any of these questions, we recommend that you do not tan without your doctor's approval.

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