

Uveitis bei Patienten mit entzündlich-rheumatischen Erkrankungen im Kindesalter: Modul zur Kerndokumentation 2026

| | | | | | | | |
|----------------------|---|-------|-------------------------------------|---|-------------------------------------|---|--------------------------------|
| Erhebungsdatum | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div> | | Kerndok-Nr. des Patienten eintragen | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | | |
| Geburtsdatum | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Tag | Monat | | Geschlecht | <input type="radio"/> weiblich | <input type="radio"/> männlich |
| | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Monat | Jahr | | | | |
| Erstdiagnose Uveitis | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Monat | Jahr | | <input type="radio"/> nicht bekannt | Bei mir in Betreuung seit: | |
| | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Monat | Jahr | | | | |
| Beginn Arthritis | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Monat | Jahr | | <input type="radio"/> nicht bekannt | <input type="radio"/> bisher <u>keine</u> Arthritis | |
| | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | Monat | Jahr | | | | |

Befund bei Erstdiagnose, falls nicht bekannt bei Erstvorstellung in Ihrer Einrichtung

Nur wenn für diesen Patienten der Befund zur Erstdiagnose bzw. Erstvorstellung von Ihnen bereits im Vorjahr dokumentiert wurde, brauchen diese Angaben nicht nochmals erhoben werden.

Diagnosestellung im Rahmen einer

- ☐ augenärztlichen Untersuchung nach Überweisung des behandelnden Kinderarztes
☐ augenärztlichen Routineuntersuchung
☐ augenärztlichen Untersuchung aufgrund von Uveitissymptomen
☐ nicht bekannt

Augenbefall

☐ RA ☐ LA

Uveitislokalisation

| | | |
|-------------|-----------------------|-----------------------|
| | RA | LA |
| anterior | <input type="radio"/> | <input type="radio"/> |
| intermediär | <input type="radio"/> | <input type="radio"/> |
| posterior | <input type="radio"/> | <input type="radio"/> |
| Panuveitis | <input type="radio"/> | <input type="radio"/> |

Uveitisbeginn

| | | |
|-----------------------|-----------------------|-----------------------|
| | RA | LA |
| plötzlich/akut | <input type="radio"/> | <input type="radio"/> |
| schleichend/unbemerkt | <input type="radio"/> | <input type="radio"/> |
| nicht bekannt | <input type="radio"/> | <input type="radio"/> |

Uveitsmanifestation

| | | |
|---------------------|-----------------------|-----------------------|
| | RA | LA |
| Rötung, Schmerzen, | <input type="radio"/> | <input type="radio"/> |
| Photophobie | <input type="radio"/> | <input type="radio"/> |
| asymptomatisch oder | <input type="radio"/> | <input type="radio"/> |
| äußerlich reizfrei | <input type="radio"/> | <input type="radio"/> |

Anteriore Uveitis: Iritis (Vorderkammerentzündung) oder Iridozyklitis (überwiegende Vorderkammerentzündung und begleitende Infiltration im vorderen Glaskörper)

Intermediäre Uveitis: vorrangig Glaskörperinfiltration ohne chorioidale Entzündungsherde; ggf. mit geringem bis mäßigem Vorderkammerzellbefund oder begleitende retinale Vaskulitis

Posteriore Uveitis: Chorioretinitis, Retinochoroiditis oder Neurouveitis; ggf. mit begleitender Glaskörperinfiltration

Panuveitis: Entzündung der gesamten Uvea; Kombination von schwerer Iritis und Chorioretinitis

Schweregrad der Entzündung

Tyndall (Grad)

| | | |
|------------------|-----------------------|-----------------------|
| | RA | LA |
| kein Tyndall (0) | <input type="radio"/> | <input type="radio"/> |
| gering (1+) | <input type="radio"/> | <input type="radio"/> |
| moderat (2+) | <input type="radio"/> | <input type="radio"/> |
| schwer (3+) | <input type="radio"/> | <input type="radio"/> |
| massiv (4+) | <input type="radio"/> | <input type="radio"/> |

Zellen/1 mm² (Grad)

| | | |
|------------|-----------------------|-----------------------|
| | RA | LA |
| < 1 (0) | <input type="radio"/> | <input type="radio"/> |
| 1-5 (0.5+) | <input type="radio"/> | <input type="radio"/> |
| 6-15 (1+) | <input type="radio"/> | <input type="radio"/> |
| 16-25 (2+) | <input type="radio"/> | <input type="radio"/> |
| 26-50 (3+) | <input type="radio"/> | <input type="radio"/> |
| > 50 (4+) | <input type="radio"/> | <input type="radio"/> |

Visus bei Erstdiagnose (Bitte für beide Augen angeben und ggf. visusmindernde Komplikationen unten angeben)

| | Nulla Lux | Licht | FZ | HBW | 1/50 | 1/35 | 1/20 | 1/10 | 0,08 | 0,1 | 0,12 | 0,16 | 0,2 | 0,25 | 0,32 | 0,4 | 0,5 | 0,63 | 0,8 | 1,0 |
|----|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| RA | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| LA | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

getestet mit: ☐ Kinderbilder ☐ Lea-Test ☐ E-Haken ☐ Landoltringe ☐ Zahlen in 5 m

Komplikationen bei Erstdiagnose bzw. Erstvorstellung

| | | | | | |
|--|-----------------------|-----------------------|---|---|---|
| | RA | LA | | RA | LA |
| keine Komplikationen | <input type="radio"/> | <input type="radio"/> | Epiretinale Membran | <input type="radio"/> | <input type="radio"/> |
| Bandkeratopathie der zentralen Hornhaut | <input type="radio"/> | <input type="radio"/> | Ablatio retinae | <input type="radio"/> | <input type="radio"/> |
| Katarakt | <input type="radio"/> | <input type="radio"/> | Makulaödem | <input type="radio"/> | <input type="radio"/> |
| Rubeosis iridis | <input type="radio"/> | <input type="radio"/> | wenn OCT erfolgt: zentrale foveale Dicke in µm | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> |
| hintere Synechien | <input type="radio"/> | <input type="radio"/> | Amblyopie/Strabismus | <input type="radio"/> | <input type="radio"/> |
| Wie viele Quadranten? | | | Okuläre Hypertension (Augendruck > 21 mmHg) | <input type="radio"/> | <input type="radio"/> |
| RA <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | | | Glaukom (mit Optikopathie u/o Gesichtsfelddefekten) | <input type="radio"/> | <input type="radio"/> |
| LA <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | | | Okuläre Hypotonie (Augendruck < 6 mmHg) | <input type="radio"/> | <input type="radio"/> |
| Papillenödem | <input type="radio"/> | <input type="radio"/> | Phthisis bulbi | <input type="radio"/> | <input type="radio"/> |
| Glaskörpertrübungen | <input type="radio"/> | <input type="radio"/> | andere: _____ | <input type="radio"/> | <input type="radio"/> |
| | | | medikamentenbedingte Komplikationen: _____ | <input type="radio"/> | <input type="radio"/> |

Uveitisdauer ☐ limitierend (≤3 Monate)

☐ persistierend (>3 Monate)

Uveitisverlauf ☐ akut

☐ rekurrend

(Uveitisrezidiv[e] nach inaktiver Phase
≥ 3 Mon. bei Therapiefreiheit)

☐ chronisch

(persistierende Uveitis mit Schüben innerhalb von < 3 Mon. nach Therapieende)

| | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------------|---|-----------------------|--|-----------------------|--------------------------------|---------------------------------------|---|-----------------------|-------------------------------|-----------------------|------------------------------------|-----------------------|------------------------------------|-----------------------|-----------------------|-----------------------|-------------------------------------|-----------------------|-----------------------|--|
| Augenbefall aktuell | | RA ja <input type="radio"/> nein <input type="radio"/> | | LA ja <input type="radio"/> nein <input type="radio"/> | | | | | | | | | | | | | | | | | |
| Uveitislokalisation | | | | Schweregrad der Entzündung: | | | | | | | | | | | | | | | | | |
| | RA | LA | | Tyndall (Grad) | RA | LA | Zellen/1 mm² (Grad) | RA | LA | | | | | | | | | | | | |
| anterior | <input type="radio"/> | <input type="radio"/> | | kein Tyndall (0) | <input type="radio"/> | <input type="radio"/> | < 1 (0) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| intermediär | <input type="radio"/> | <input type="radio"/> | | gering (1+) | <input type="radio"/> | <input type="radio"/> | 1-5 (0.5+) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| posterior | <input type="radio"/> | <input type="radio"/> | | moderat (2+) | <input type="radio"/> | <input type="radio"/> | 6-15 (1+) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| Panuveitis | <input type="radio"/> | <input type="radio"/> | | schwer (3+) | <input type="radio"/> | <input type="radio"/> | 16-25 (2+) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| | | | | massiv (4+) | <input type="radio"/> | <input type="radio"/> | 26-50 (3+) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| | | | | | | | > 50 (4+) | <input type="radio"/> | <input type="radio"/> | | | | | | | | | | | | |
| Aktivität der Uveitis | | | | | | | | | | | | | | | | | | | | | |
| inaktiv | | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | | | | | | | | | | | | | | | | hoch aktiv | | | |
| | | 0 0.5 1 1.5 2 2.5 3 3.5 4 4.5 5 5.5 6 6.5 7 7.5 8 8.5 9 9.5 10 | | | | | | | | | | | | | | | | | | | |
| Aktueller Visus (mit bester Korrektur) | | | | | | | | | | | | | | | | | | | | | |
| | Nulla Lux | Licht | FZ | HBW | 1/50 | 1/35 | 1/20 | 1/10 | 0,08 | 0,1 | 0,12 | 0,16 | 0,2 | 0,25 | 0,32 | 0,4 | 0,5 | 0,63 | 0,8 | 1,0 | |
| RA | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| LA | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| getestet mit: | | <input type="radio"/> Kinderbilder | | | | <input type="radio"/> Lea-Test | | | | <input type="radio"/> E-Haken | | | | <input type="radio"/> Landoltringe | | | | <input type="radio"/> Zahlen in 5 m | | | |
| Aktuelle Komplikationen (ggf. visusmindernde Komplikationen unten angeben) | | | | | | | | | | | | | | | | | | | | | |
| | | | | RA | | LA | | | | | | RA | | LA | | | | | | | |
| keine Komplikationen | | | | <input type="radio"/> | | <input type="radio"/> | | Epiretinale Membran | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Bandkeratopathie der zentralen Hornhaut | | | | <input type="radio"/> | | <input type="radio"/> | | Ablatio retinae | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Katarakt | | | | <input type="radio"/> | | <input type="radio"/> | | Makulaödem | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Rubeosis iridis | | | | <input type="radio"/> | | <input type="radio"/> | | wenn OCT erfolgt: zentrale foveale Dicke in µm | | | | _ _ _ | | _ _ _ | | | | | | | |
| hintere Synechien | | | | <input type="radio"/> | | <input type="radio"/> | | Amblyopie/Strabismus | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Wie viele Quadranten? | | | | | | | | Okuläre Hypertension (Augendruck > 21 mmHg) | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| RA <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | | | | | | | | Glaukom (mit Optikopathie u/o Gesichtsfelddefekten) | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| LA <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | | | | | | | | Okuläre Hypotonie (Augendruck < 6 mmHg) | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| neue Synechien <input type="radio"/> nein <input type="radio"/> ja | | | | | | | | Phthisis bulbi | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Papillenödem | | | | <input type="radio"/> | | <input type="radio"/> | | andere: _____ | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Glaskörpertrübungen | | | | <input type="radio"/> | | <input type="radio"/> | | medikamentenbedingte Komplikationen: _____ | | | | <input type="radio"/> | | <input type="radio"/> | | | | | | | |
| Medikamentöse Uveitistherapie | | | | | | | | | | | | | | | | | | | | | |
| Lokaltherapie | | | | | | | | | | | | | | | | | | | | | |
| | | | | aktuell | | jemals | | | | | | | | | | | | | | | |
| | | | | RA | | LA | | | | | | | | | | | | | | | |
| keine Lokaltherapie | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Nichtsteroidale Antiphlogistika | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Kortikosteroide als Tropftherapie | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Kortikosteroide (subkonjunktival/parabulbär) | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Antiglaukomatosa | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Mydriatika | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| andere Therapie (Wirkstoff): _____ | | | | <input type="radio"/> | | <input type="radio"/> | | <input type="checkbox"/> | | | | | | | | | | | | | |
| Bisherige operative Therapie | | | | | | | | | | | | | | | | | | | | | |
| <input type="radio"/> keine operative Therapie | | | | | | | | | | | | | | | | | | | | | |
| <input type="radio"/> Kataraktoperation | | | | <input type="radio"/> IOL | | | | <input type="radio"/> Glaukomoperation | | | | <input type="radio"/> EDTA-Abrasio | | | | | | | | | |
| <input type="radio"/> Netzhautablösungs-OP | | | | <input type="radio"/> Kryotherapie der Netzhaut | | | | <input type="radio"/> Pars plana Vitrektomie | | | | | | | | | | | | | |
| <input type="radio"/> andere Operation _____ | | | | | | | | | | | | | | | | | | | | | |

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| | | | | | | | |
|--|--|--|--|--|--|--|--|

Hier bitte Praxisstempel!

Bitte senden Sie den ausgefüllten Bogen im portofreien Rückschlag an das Deutsche Rheuma-Forschungszentrum Berlin, Charitéplatz 1, 10117 Berlin.