

PIMI FORM 12
SENSORY PERCEPTION TEST
FORM1 2.SSD01

FORM/ITEM	VARIABLE NAME	CODES
	NEWID	Patient ID
	VISIT	Visit type
7		Baseline
7B	BLCT	Coolness threshold
7c	BLWT	Warmth threshold
7D	BLWCDT	Warm-Cold difference
7E	BLCPT	Cold pain threshold
7F	BLHPT	Hot pain threshold
8		After stress
8B	MSCT	Coolness threshold
8C	MSWT	Warmth threshold
8D	MSWCDT	Warm-Cold difference
8E	MSCPT	Cold pain threshold
8F	MSHHP	Hot pain threshold