



Demystifying Hypermobility & related conditions for Individuals, Allied Health Professionals & Medical Practitioners. Visit [hypermobilityhealth.com.au](https://hypermobilityhealth.com.au)



# Hypermobility Health Connect® Self-Screening Test

This document contains a summary of the responses provided by:

## Amanda Sample

The conditions that have been self-screened for in this summary include:

- Joint Hypermobility
- Hypermobility Spectrum Disorder (HSD)
- Hypermobility Ehlers-Danlos Syndrome (hEDS)

## **i** Before you read this document

### **👤** Are you the patient?

This self-screening summary is designed to support your self-advocacy and guide conversations with your GP, specialist or allied health professional. Please share this document with your healthcare professional to support your clinical discussion in a structured way that is in line with the currently recognised diagnostic criteria.

### **👩** Are you a healthcare professional?

This self-screening summary has been generated by a patient or caregiver using an online tool designed to identify features commonly associated with Joint Hypermobility, Hypermobility Spectrum Disorders (HSD) and Hypermobility Ehlers-Danlos Syndromes (hEDS).

#### Important Notes:

- This summary is not intended to be a diagnostic tool and does not replace clinical or medical assessment.
- All information has been self-reported by the patient or caregiver and has not had clinical input.
- The purpose of this summary is to support clinical discussions and decision-making, not to serve as a standalone basis for diagnosis.

#### Recommended next steps:

- Review the patient's responses in the context of a full medical history and clinical examination.
- Consider formal assessment using validated tools such as the Beighton Score and the 2017 hEDS diagnostic criteria<sup>(1)</sup>.
- Evaluate for signs of systemic involvement and consider appropriate referrals e.g. rheumatology, physiotherapy, cardiology etc..
- If warranted, initiate a management plan or coordinate a multidisciplinary care approach for symptomatic support.

<sup>(1)</sup><https://www.ehlers-danlos.com/wp-content/uploads/2017/05/hEDS-Dx-Criteria-checklist-1.pdf>

**⚠️ The following is provided for informational purposes only. It does not constitute a medical diagnosis. Only a qualified healthcare professional can assess your individual circumstances and provide a formal diagnosis.**



### **👩** Are you a healthcare professional? Do you want to improve confidence in diagnosing and managing Hypermobility, HSD and hEDS in your practice?


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# Hypermobility Health Connect® Self-Screening Test

## Personal Information

Name	Amanda Sample
Age	35
Gender	Female / Woman / She / Her
Email	info@hypermobilityhealth.com.au
Country	Australia
State	New South Wales
Completed Date	27 Jun 2025 09:20:14

## Criterion 1 - Generalised Joint Hypermobility

 Criterion 1 - Generalised Joint Hypermobility detected:

### Self-reported Beighton Score

The Beighton Score is a widely used assessment tool to measure Joint Hypermobility. It consists of a 9-point scale evaluating the flexibility of the fingers, elbows, knees, and spine.

- **Fifth Finger (Pinky):** Neither
- **Thumbs:** Neither
- **Elbows:** Neither
- **Knees:** Neither
- **Spine Test:** Yes

 Beighton Score: 1 / 9

Is Beighton Score within age and sex-specific cut-offs?

Is Beighton Score 1pt below cut-off?

### Historical Joint Flexibility ("5 Point Questionnaire")

The 5 Point Questionnaire (5PQ) is a simple screening tool used to assess historical Joint Hypermobility, especially when a person may no longer be very flexible due to age, injury, or other factors. It helps clinicians understand if you were Hypermobility in the past.

- **Hands on the floor:** Yes
- **Thumb to forearm:** Yes
- **Body contortion/flexibility:** Yes
- **Joint dislocations:** Yes
- **Double-jointed description:** Yes

 5PQ Score: 5 / 5

Is Historical Joint Flexibility reported/detected?:

## Other Joint Hypermobility

Joint Hypermobility can result from accidents and trauma, illnesses, or be a part of the heritable connective tissue disorders. It can also change over time. This section includes a self-assessment of joint flexibility across your body and provides a broader understanding of your hypermobility.

Indicated previously hypermobile but no longer are: No

### Areas of Hypermobility

Joint	Experienced Hypermobility?
Shoulders	Yes - Either or Both
Elbows	Yes - Either or Both
Wrists	Yes - Either or Both
Hands/Fingers	Yes - Either or Both
Hips	Yes - Either or Both
Knees	Yes - Either or Both
Ankles	Yes - Either or Both
Feet	Yes - Either or Both
Neck	Yes
Back	Yes
SIJ	Yes
Jaw/TMJ	Yes - Either or Both

**Probable Joint Hypermobility Type:** Generalised Joint Hypermobility (GJH)

According to your self-reported conditions, you appear to have hypermobility affecting multiple joints throughout your body, including joints of the trunk (such as the neck, back, and hips) as well as the limbs. This widespread pattern of joint hypermobility is defined as Generalised Joint Hypermobility.

## Criterion 2 - Common HSD and hEDS Features

**Criterion 2 - Feature A, B or C detected:**

### Feature A - Skin, Tissue & Other Bodywide Features

This part of the test looks at signs and symptoms that help show whether your hypermobility affects more than just your joints. It asked you to think about things like your skin, heart, nervous system, digestion, and other health issues that are common in people with hypermobility even though many people don't realise they're connected.

Symptom	Response
Velvety skin	Yes
Stretchy skin	No

Symptom	Response
Atrophic scars	No
Bumps on feet	No
Unusual stretch marks	No
Fatigue or brain fog	Yes
Migraines/headaches	Yes
Gastrointestinal issues	No
Anxiety disorder	No
Dizziness or fainting	No
Heart rate fluctuation	No
Sleep disturbance	Yes
Crowded teeth/palate	No
Multiple hernias	Yes
Organ prolapse	Yes
Long arm span	No
Flexible fingers/wrist signs	Yes
Mitral valve problems	Yes
Enlarged aorta	Don't Know
Environmental allergies	Don't Know
Temperature regulation or sweating issues (under/over sweating)	No

Criterion 2 - Feature A detected:

### Feature B - Family History

Hypermobility Ehlers-Danlos Syndrome (hEDS), and the other Ehlers-Danlos Syndromes (EDS) are genetic conditions, meaning other family members may also have similarly bendy joints and related health issues. Likewise, hypermobility is often seen in multiple family members. Understanding your family history is an important part of the diagnostic process, as symptoms like joint hypermobility, chronic pain, fatigue, and connective tissue concerns often run in families, even if they have never been formally diagnosed. Sharing this information with your healthcare provider can help identify patterns, support earlier diagnosis, and guide more tailored management and advice.

Similar symptoms in relatives: Yes  
 Relatives affected: "Father","Niece","Nephew"  
 Criterion 2 - Feature B detected:

### Feature C - Musculoskeletal Features

Ongoing pain and functional issues with muscles and joints, such as, feeling “not well held together,” frequent sprains and strains, repeated subluxations or dislocations, soft tissue injuries like muscle or cartilage tears, and difficulty sensing body position (poor proprioception), can all be signs of Hypermobility, Hypermobility Spectrum Disorder (HSD), Hypermobility Ehlers-Danlos Syndrome (hEDS), and the other Ehlers-Danlos Syndromes (EDS). These symptoms can be reflective of possible


underlying connective tissue differences that affect joint stability, muscle function, and coordination, and may be key indicators in recognising a hypermobility-related disorder.

- Joint pain >3 months: No
- Chronic pain >3 months: No
- Repeated joint subluxations/dislocations: Yes
- Joint pain with function loss: Yes
- Cartilage tear diagnosis: Yes
- Early joint degeneration or OA: No
- Soft tissue damage: No
- Poor proprioception: Yes

Criterion 2 - Feature C detected:

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## Criterion 3 - Additional Considerations or Other Conditions

 Criterion 3 - No Exclusions:

Hypermobility as a symptom exists in multiple health conditions other than HSD and hEDS, so this section helps to rule out other conditions that can also cause joint hypermobility. While hypermobility is a key feature of hEDS, it can also appear in other genetic, musculoskeletal, or systemic disorders, such as Marfan syndrome, Loeys-Dietz syndrome, or neuromuscular conditions. By excluding other conditions (and this often takes blood or genetic tests) it ensures that a diagnosis of hEDS or HSD is accurate by carefully considering and excluding other possible causes of hypermobility. This is extremely important as it helps to avoid misdiagnosis and ensuring individuals receive the most appropriate care and management.

Extreme skin stretch or fragility: No

Skin fragility details:

Diagnosed CTDs: No

CTD Details:

Other diagnoses (e.g., myopathy): No

Other diagnoses details:

# Your Personalised Summary

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## 🏥 Preliminary Screening Outcome

📋 Probable Hypermobile Ehlers-Danlos Syndrome (hEDS)

## 📄 Preliminary Result Summary

From reviewing the information you submitted, your results show that:

Hypermobility is not only affecting multiple joints across your body, but is also impacting your daily life through broader symptoms that may be consistent with Hypermobile Ehlers-Danlos Syndrome (hEDS).

In summary your results based on the information provided indicate that you:

- Appear to exhibit hypermobility in multiple joints across your body, meeting the criteria for Generalised Joint Hypermobility (GJH). [Criterion 1]
- Appear to have significant Body-wide and Skin & Tissues features, Musculoskeletal features, and/or a positive Family History that are commonly associated with HSD or hEDS. There are sufficient signs to indicate the potential presence of HSD or hEDS. [Criterion 2]
- Do not report to have any other features and/or medical diagnoses that may be contributing to your symptoms or health conditions. [Criterion 3]

## 💡 Preliminary Recommendation

For assistance going forward:

Hypermobile Ehlers-Danlos Syndrome (hEDS) can be extremely debilitating and should be taken seriously. hEDS is a group of conditions characterised by symptomatic joint hypermobility, body wide symptoms that can impact several health systems across your body. The condition can vary greatly in its presentation and severity, meaning it affects individuals in unique ways.

Based on your self-screening results, we recommend taking your report to a health professional to discuss and seek a clinical assessment using the hEDS Diagnostic Checklist published by The Ehlers-Danlos Society. This checklist is endorsed by The International Consortium on Ehlers-Danlos Syndromes & Related Disorders for the clinical diagnosis of HDS/hEDS.

You can use the EDS health professional list on our website to help you find a Hypermobility and EDS aware health professional in your area, or contact us for more details.

## ➔ Next Steps...

We encourage you to share this Self-Screening Test Summary with your doctor, GP, or other qualified healthcare professional to support a formal diagnosis and help guide your care.

Unfortunately, in Australia, many medical professionals do not yet have up-to-date training in hypermobility care, which continues to evolve rapidly. This means that patients often go undiagnosed or misdiagnosed for years.

You can help change this.

At Hypermobility Health Connect®, we are committed to raising awareness and supporting clinicians to:

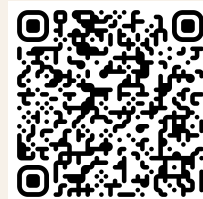
- Accelerate and improve diagnosis pathways
- Support their patients confidently and effectively
- Stay current with the latest research and treatment developments
- Access expert-led training, webinars, and ongoing mentoring



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## **We hear you. We see you. Together, we can make a difference.**

If you would like to help us advocate for better care and more informed health professionals, please share this report your doctor, GP, or other qualified healthcare professional and spread the word.

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### **DISCLAIMER – The stuff we need to say**

The Hypermobility Health Connect® Self-Screening Test is provided strictly for general informational purposes and is not intended to serve as medical advice, diagnosis, or treatment. Test results are generated solely based on the information you provide and do not account for your complete medical history, individual circumstances, or other factors that may affect your health. You acknowledge and agree that this Self-Screening Test is not a diagnostic tool and is not a substitute for consultation with a qualified healthcare professional. Please refer to our [privacy policy](#) and [terms of use](#) for detailed information.