Supplemental table Nerve conduction study at 33 years of age.

		Distal latency (ms)	Amplitude (wrist)	Amplitude (elbow)	NCV (m/s)	F wave latency (ms)	F wave occurrence (%)
Lt. Median	Motor	4.4	11.2(mV)	10.8(mV)	41.7	31	15
	Sensory		14.5(μV)		39.1		
Rt. Median	Motor	4.5	12.4(mV)	11.3(mV)	43.9	38.6	5
	Sensory		5.6(μV)		36.1		
Lt. Ulnar	Motor	4.6	14.3(mV)	11.1(mV)	36.6	35.6	20
	Sensory		7.7(μV)		39.6		
Rt. Ulnar	Motor	4.1	10.7(mV)	9.0(mV)	40.0	35.7	15
	Sensory		8.4(μV)		34.6		
Lt. Tibial	Motor	5.5	3.9(mV)	3.6(mV)	35.0	60.1	100
Rt. Tibial	Motor	4.4	7.6(mV)	5.2(mV)	32.7	57.6	45

Rt. Sural	Sensory		1.4(μV)		37.9		

Nerve conduction study revealed decreased conduction velocity in motor and sensory nerves, decreased F-wave occurrence, and prolonged F-wave latency on every nerve examined. Amplitude of compound muscle action potentials in tibial nerves and amplitude of sensory nerve action potentials in sural nerves were decreased. These results were indicative of chronic inflammatory demyelinating polyneuropathy (CIDP) [1].

NCV: nerve conduction velocity.

1). Hughes RA, Bouche P, Cornblath DR, et al. European Federation of Neurological Societies/Peripheral Nerve Society guideline on management of chronic inflammatory demyelinating polyradiculoneuropathy: report of a joint task force of the European Federation of Neurological Societies and the Peripheral Nerve Society. Eur J Neurol 2006;13:326-332.