

MEDICAL HISTORY QUESTIONNAIRE

DO YOU HAVE ANY PROBLEMS IN THE FOLLOWING AREAS?



<u>GENERAL</u>	<u>YES</u>	<u>NO</u>	<u>GENITOURINARY</u>	<u>YES</u>	<u>NO</u>
Fever	___	___	Difficulty urinating	___	___
Fatigue	___	___	Blood in urine	___	___
Weight loss or gain	___	___	Frequent urination	___	___
Frequent colds	___	___	Painful urination	___	___
Night sweats	___	___	<u>MUSCULOSKELETAL</u>		
Loss of appetite	___	___	Muscle pain	___	___
Difficulty sleeping	___	___	Joint pain/arthritis	___	___
<u>EYES</u>			Trouble walking	___	___
Blurred vision	___	___	<u>INTERGUMENTARY</u>		
Double vision	___	___	Rash/bruise easily	___	___
Flashes or floaters	___	___	Breast disease	___	___
Glare/light sensitive	___	___	<u>NEUROLOGICAL</u>		
Eye pain	___	___	Fainting	___	___
<u>EAR/NOSE/THROAT</u>			Frequent headaches	___	___
Sinus infection	___	___	Seizures	___	___
Cough	___	___	Memory difficulties	___	___
Hoarseness	___	___	Tremors	___	___
Loss of hearing	___	___	<u>PSYCHIATRIC</u>		
Nose bleeds	___	___	Depression	___	___
Oral lesions	___	___	Anxiety	___	___
Dental problems	___	___	Excessive anger	___	___
Ringling in ears	___	___	Psychiatric problems	___	___
<u>HEART</u>			<u>ENDOCRINE</u>		
Chest pain	___	___	Excessive thirst	___	___
Irregular heartbeat	___	___	Excessive sweating	___	___
Pacemaker	___	___	Cold or heat intolerance	___	___
Heart murmur	___	___	<u>HEMATOLOGIC/LYMPHATIC</u>		
Swollen feet/ankles	___	___	Swollen glands	___	___
<u>LUNGS</u>			<u>IMMUNOLOGIC</u>		
Wheezing, shortness/breath	___	___	Seasonal allergies	___	___
Coughing up blood/phlegm	___	___	Hay fever	___	___
<u>GASTROINTESTINAL</u>			<u>OTHER</u>		
Loss of appetite	___	___	Pregnant	___	___
Difficulty swallowing	___	___	Menopausal	___	___
Nausea	___	___	Vaginal bleeding	___	___
Bloating	___	___	Breast lumps	___	___
Vomiting	___	___			
Diarrhea	___	___	<u>Other comments</u> _____		
Blood in stool	___	___	_____		
Black stools	___	___	_____		
Heartburn	___	___	_____		
Change in bowel habits	___	___	_____		
Constipation	___	___	_____		
Abdominal pain	___	___	_____		