

Review of Symptoms

PLEASE CIRCLE ANY THAT APPLY

- 1) Constitutional: Excessive fatigue, exercise intolerance, fever, weakness, night sweats, general good health
- 2) Eyes: Infection, discharge, itching, excessive tearing or pain, spots or floaters, glaucoma, cataracts, blurred or double vision, light sensitivity
- 3) ENT: External ears and nose, TM's, hearing acuity, nasal septum and turbinates, lips, teeth and gums, posterior pharynx and tonsils
- 4) Respiratory: Asthma or other breathing problems, chronic cough, hemoptysis, breathing problems after exercise, sputum production, wheezy or noisy respiration, bronchitis
- 5) Cardiovascular: Chest pain, palpitations, heart murmurs, irregular pulse, hypertension, coldness or numbness in extremities, color changes in fingers/toes, edema, leg pain while walking
- 6) Gastrointestinal: Indigestion or pain associated with eating, hematemesis, bloating, burning sensation in esophagus, frequent nausea and or vomiting, change in bowel habit
- 7) Genitourinary: Painful urination, urine characteristics, incontinence, frequent urination
- 8) Hematologic: Anemia, bleeding tendencies, easy bruising, low platelet count, systemic infections, transfusions, lymphadenopathy, slow healing after cuts
- 9) Musculoskeletal: Fracture, muscle cramping, twitching or pain, weakness, joint swelling, redness or pain

10) Integumentary: Any known skin disease, itching, scars, moles, sores, color changes, changes in nail color

11) Neurological: Syncope, unconsciousness, seizure, memory loss, disorientation, speech or language dysfunction, inability to concentrate, sensory disturbance, stroke, head injury

12) Psychiatric: Anxiety, sleep disturbance, hallucinations, hx of psychiatric conditions, depression

13) Endocrine: Adrenal problems, diabetes, unexplained changes in height/weight, increased appetite, thirst, hair change/loss, goiter, hx of endocrine disease

14) Allergic/Immunologic: Hay fever, hives, itching, sneezing, chronic clear nasal drainage

15) All other symptoms: WNL

For Office Use ONLY

Vitals

T _____ P _____ R _____

BP _____

HT _____ WT _____