## Please check symptoms that apply to you currently or on a chronic basis.

Name			Date of Birth			MRN#		
General Symptoms	Yes	No	Cardiovascular	Yes	No	Musculature	Yes	No
Activity Change			Chest pain			Joint pain		
Appetite Change			Leg Swelling			Back pain		
Chills			Palpitations			Gait problem		
Chronic Pain						Joint swelling		
Daytime sleepiness			GI			Muscle pain		
Sweating			Abdominal Distention			Neck pain		
Fatigue			Abdominal pain			Neck stiffness		
Fever			Rectal bleeding					
Unexpected Weight Change			Blood in stool			Skin		
			Bowel incontinence			Color change		
HENT			Constipation			Hair change		
Congestion			Diarrhea			Hair loss		
Dental problem			Nausea			Nail change		
Drooling			Rectal pain			Pale appearance		
Ear discharge			Vomiting			Rash		
Ear pain or Facial swelling						Skin change		
Hearing loss			Endocrine			Skin lesion		
Mouth sores			Cold intolerance			Wound		
Nosebleeds			Heat intolerance					
Postnasal drip			Excessive thirst			Allergy/Immuno		
Reflux			Frequent hunger			Environmental allergies		
Runny nose			Frequent urination			Food allergies		
Sinus pain						Immunocompromised		
Sinus pressure			GU					
Sneezing			Bladder incontinence			Neurological		
Snoring			Breast lump			Dizziness		
Sore throat			Decreased libido			Facial asymetry		
Ringing in ears			Difficulty urinating			Headaches		
Trouble swallowing			Painful intercourse			Light-headedness		
Voice change			Painful urination			Numbness		
			Flank pain			Seizures		
Eyes			Frequency			Speech difficulty		
Eye Discharge			Genital Sore			Syncope (pass out)		
Eye itching			Blood in urine			Tremors		
Eye pain			Wake up at night to urinate			Weakness		
Eye redness			Sexual difficulties					
Light Sensitive			Urgency			Hematologic		
Visual Disturbance			Urine decreased			Enlarged lymph nodes		
			MEN ONLY			Bruise easily		
Respiratory			Erectile dysfunction					
Apnea			Penile discharge			Psychiatric		
Chest tightness			Penile pain			Agitation		
Choking			Penile swelling			Behavior problem		
Cough			Scrotal swelling			Confusion		
Shortness of breath			Testicular pain			Decreased concentration		
Stridor			FEMALE ONLY			Depressed mood		
Wheezing			Menstrual change			Uneasy mood		
			Menstrual problem			Hallucinations		
			Pelvic pain			Hyperactive		
			Vaginal bleeding			Nervous/anxious		
			Vaginal discharge			Self-injury		
			Vaginal pain			Severe stress		
						Sleep disturbance		
						Suicidal ideas		