

# HEALTH HISTORY

**CONFIDENTIAL**

NAME (LAST, FIRST, MIDDLE)

DATE

PLEASE CHECK ANY SYMPTOMS YOU CURRENTLY HAVE OR HAVE HAD IN THE PAST YEAR

**GENERAL**

- Cold hands/feet
- Low energy
- Dizziness
- Allergies
- Fatigue
- Hot flashes
- Insomnia
- Spontaneous sweating
- Night sweating
- Lack of sweating
- Recent weight loss
- Recent weight gain
- Aversion to heat
- Aversion to cold
- Weak immune system

**NECK AND HEAD**

- Blurred vision
- Heaviness in the head
- Headache
- Phlegm in throat
- Cataracts
- Double vision
- Earache
- Ear discharge
- Eye pain/strain
- Corrected vision
- Nasal obstruction
- Nasal discharge
- Loss of sense of smell
- Hearing loss
- Hoarseness
- Nosebleeds
- Recurrent sore throat
- Red/inflamed eyes
- Ringing in ears
- Sinus problems
- Sores on lips
- Sores on tongue
- Taste change
- Teeth problems
- Vision: seeing halos/floaters

**RESPIRATORY**

- Asthma
- Persistent cough
- Coughing blood
- Shortness of breath
- Recurrent bronchitis
- Phlegm production
- Difficulty inhaling
- Difficulty exhaling

**CARDIOVASCULAR**

- Chest pain
- High blood pressure
- Low blood pressure
- Irregular heart beat
- Poor circulation
- Swelling of ankles
- Varicose veins
- Rib-side pain

**GASTROINTESTINAL**

- Abdominal pain
- Bloating
- Belching
- Gas
- Constipation
- Diarrhea/loose stools
- Bloody stools
- Black stools
- Difficulty swallowing
- Poor appetite
- Heartburn/acid reflux
- Hemorrhoids
- Indigestion
- Stomach ache
- Nausea
- Vomiting
- Food sensitivities

**DIET/LIFESTYLE**

- Vegetarian
- Healthy diet
- Eat fried foods
- Eat much meat
- Smoke
- Drink alcohol
- Drink coffee
- Eat a lot of sweets
- Exercise regularly
- Exercise excessively
- Lack of exercise

**GENITOURINARY**

- Dilute urine
- Dark urine
- Blood in urine
- Cloudy urine
- Burning urination
- Scanty urine
- Profuse urine
- Frequent urination
- Poor bladder control
- Urgency to urinate
- Prolapsed bladder

**MUSCULOSKELETAL**

- Pain, weakness, numbness in:
- Arms
  - Feet
  - Hands
  - Joints
  - Legs
  - Hips
  - Neck
  - Shoulders
  - Knees
  - Back
  - Pain all over
  - Lack of strength
  - Numbness

**SKIN**

- Broken blood vessels
- Blood not clotting
- Bruise easily
- Discoloration
- Dark circles around eyes
- Bags under eyes
- Swollen lymph nodes
- Dry skin
- Acne
- Brittle nails
- Premature gray hair
- Dry, brittle hair
- Hair falling out

**NEUROLOGIC**

- Fainting
- Convulsions
- Handwriting change
- Paralysis
- Stroke
- Seizures
- Tremor
- Recent clumsiness
- Drowsiness
- Vertigo

**EMOTIONAL**

- Nervousness
- Irritability
- Often feel angry
- Troubling dreams
- Cry uncontrollably
- Feel sad a lot
- Forgetful
- Mind not clear
- Anxiety
- Much fear
- Unrestrained joy
- Terrors
- Difficulty expressing emotions

**MEN ONLY**

- Genital pain
- Impotence
- Genital sores
- Lump in testicles
- Discharge from penis
- Nocturnal emission
- Low sexual energy

**WOMEN ONLY**

- Abnormal pap smear
- Bleed between periods
- Irregular periods
- Heavy periods
- Painful periods
- Premenstrual tension
- Breast lumps
- Low sexual energy
- Vaginal discharges
- Menopausal
- Uterine prolapse
- Facial hair
- May be pregnant
- Pain with intercourse
- Tipped uterus

BLOOD TYPE IF KNOWN:

**WEIGHT**

- Underweight
- Normal for height
- Overweight
- Very overweight

**PLEASE USE THE REVERSE OF THIS FORM TO WRITE DOWN A SAMPLE OF YOUR DAILY DIET: ----->**



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