

Patient's Name: _____ Date: _____

PATIENT'S MEDICAL HISTORY

- The following is a list of symptoms that you may or may not have.
- Please mark any symptoms you are experiencing at the present time.
- Leave blank if N/A

Cardiovascular

(TCM: Heart/Small Intestines)

- ___ Heart palpitations
- ___ Chest pain or pressure
- ___ Dizziness
- ___ Shortness of breath
- ___ Irregular heart beat
- ___ High blood pressure
- ___ Leg cramps
- ___ Lack of joy in life
- ___ Craving/aversion to bitter food

Gastrointestinal

(TCM: Spleen/Stomach)

- ___ Indigestion
- ___ Bloating
- ___ Gas/belching
- ___ Abdominal pain or cramps
- ___ Gallstones
- ___ Diarrhea
- ___ Constipation
- ___ Black stool
- ___ Hemorrhoids
- ___ Excessive appetite
- ___ Decreased appetite
- ___ Anorexia
- ___ Nausea and vomiting
- ___ Colitis or Diverticulitis
- ___ Heartburn
- ___ Acid reflux
- ___ Fatigue
- ___ Cold hands and feet
- ___ Heaviness anywhere in body
- ___ Hard to wake up in the morning
- ___ Edema/swelling
- ___ Bad breath
- ___ Tendency towards hypoglycemia
- ___ Muscle fatigue
- ___ Difficulty digesting oily food
- ___ Tendency to become obsessive
- ___ Craving/aversion to sweets

Muscular-Skeletal

- ___ Back pain
- ___ Neck pain
- ___ Arthritis
- ___ Disc problem
- ___ Painful joints
- ___ Muscle pain/cramps
- ___ Scoliosis

Respiratory

(TCM: Lung/Large Intestines)

- ___ Dry cough
- ___ Cough with sputum
- ___ Cough with blood
- ___ Sore throat
- ___ Nasal problems
- ___ Nose bleeds
- ___ Nasal discharge
- ___ Asthma or wheezing
- ___ Poor sense of smell
- ___ Pneumonia
- ___ Hay-fever
- ___ Bronchitis
- ___ Allergies
- ___ Low resistance to colds or flu
- ___ Low physical stamina
- ___ Itchy skin
- ___ Grief/sadness
- ___ Craving/aversion to spicy foods

Genitourinary

(TCM: Kidney/Urinary Bladder)

- ___ Frequent urination
- ___ Painful urination
- ___ Bloody discharge from anus
- ___ Incontinence
- ___ Pain in the genital area
- ___ Decreased/excessive sex drive
- ___ Kidney stone
- ___ Kidney failure
- ___ Neuritis
- ___ Weakness/low back pain
- ___ Achy bones
- ___ Poor memory
- ___ Hair loss
- ___ Hearing problems
- ___ Ringing in ears
- ___ Craving/aversion to salty foods

Liver / Gallbladder (TCM Equivalent)

- ___ Jaundice
- ___ Hepatitis A
- ___ Hepatitis B
- ___ Hepatitis C
- ___ Cirrhosis
- ___ Irritability
- ___ Depression
- ___ Headache/migraine
- ___ Visual problems

- ___ Red eyes
- ___ Itchy eyes
- ___ Clenching of teeth at night (TMJ)
- ___ Muscle twitching
- ___ Joint tightness/stiffness
- ___ Soft brittle nails
- ___ Craving/aversion to sour food

Males only

- ___ Prostate problems
- ___ Pain in testicles
- ___ Low sperm count

Females only

- ___ Menstrual pain
- ___ Irregular menstrual cycle
- ___ Swelling/pain in breast
- ___ Lower back/sacrum ache
- ___ Menopause/perimenopause
- ___ Heavy bleeding
- ___ Vaginal discharge -excessive
- ___ Vaginal yeast infection
- ___ Vaginal dryness
- ___ Endometriosis
- ___ Polycystic ovary syndrome
- ___ Uterine Myoma
- ___ HPV
- ___ Genital warts
- ___ Breast cancer
- ___ Ovarian cancer
- ___ Osteoporosis
- ___ Night sweats/hot flashes

Miscellaneous

- ___ Psoriasis
- ___ Eczema
- ___ Skin rash
- ___ Lupus
- ___ Rheumatoid Arthritis
- ___ Parkinson's syndrome
- ___ Reynard's syndrome
- ___ Diabetes
- ___ Epilepsy
- ___ Multiple Sclerosis
- ___ Varicose veins
- ___ Blood clotting
- ___ Cancer
- ___ Genital Herpes
- ___ HIV +