

PERSONAL AND FAMILY MEDICAL HISTORY



CANCER/ONCOLOGY	GYNECOLOGY	MUSCULOSKELETAL/RHEUMATOLOGIC
Cancer – Type _____ Cancer – Type _____ Cancer – Type _____ Skin Cancer - Basal Cell Skin Cancer - Squamous Cell Skin Cancer - Melanoma	Chlamydia Endometriosis Fibroids Hysterectomy Osteopenia	Bursitis Carpal Tunnel Syndrome Fibromyalgia Osteoarthritis Rheumatoid Arthritis Chronic Joint Pains
CARDIOLOGY/HEMOTOLOGIC	OTHER	PSYCHOLOGICAL
Anemia Aortic Value Disorder Bleeding / Clotting Disorder Congestive Heart Failure Heart Attack Heart Disease - Arrhythmia/A-Fib Heart Disease - Pacemaker Heart Disease - Stent Heart Disease - implanted cardio defibrillator Heart Murmur /Mitral Valve Prolapse Coronary Artery Disease High Blood Pressure Peripheral Vascular Disease Stroke/TIA Heart Valve Disorders Hepatitis High Cholesterol HIV/AIDS Leukemia Tuberculosis	Alcoholism Drug User Smoker OTHER Chicken Pox Measles Mumps Shingles	Depression Anxiety Schizophrenia Bipolar Disorder ADD/ADHD PTSD
	GASTROINTESTINAL	RESPIRATORY
	Appendicitis Diverticulosis all Stones Gastrointestinal Bleeding GERD (ACID Reflux) Hemorrhoids Hepatitis A, B, or C Irritable Bowel Syndrome/Crohns Disease Stomach Ulcers	Asthma Bronchitis/Pneumonia Emphysema/COPD Other Lung Disease
ENDOCRINOLOGY	NEUROLOGICAL	UROLOGICAL
Diabetes – Type _____ Hyperthyroidism Hypothyroidism	Alzheimer's Balance Disorders Dementia Epilepsy Head Injury Headaches Lupus Lyme Disease Meningitis Migraines Multiple Sclerosis Neuropathy Parkinson's Seizures	Chronic Kidney Disease Kidney Stones Urinary Incontinence Dialysis (Hemo/Peritoneal) Kidney Failure Urinary Tract/Kidney infection
ENT		ANESTHESIA COMPLICATIONS
Glaucoma Vertigo Hearing Problems Nosebleeds		ALLERGIES