CANADIA Dr. Vandani		905-799-8040. T	905-799-1850 ext : 21 A	ddress: 227-40 Fliv	chgate Blvd, Bramoton	ON, L6T 3J1
Dr. Sangeet	ta Bajaj, F: 905-	799-8040, T: 905-7	799-1850 ext : 31 Addres	a: 227-40 Finchgate	Blvd, Brampton CN,	L6T 3J1
□ Dr. Raman .	Joshi, F: 905-4	53-0972, T: 905-45	3-0765, Address: 200-14	5 Queen St E, Bram	pton, ON, L6W 3P8	
PATIENT NAME:				PHYSICIAN NAME:		
DATE OF BIRTH: ADDRESS:				PHONE: FAX:		
PHONE:	V.		77 7477 =			
HCN:				PHYSICIAN #:		
		UISTARY /+B	ATIENT OR PHYSI			
1. AGE:	2			CIAN TO COMP		(h)
			nale Dremme			يبر
	G have you had		ths 🗆 > 12 months		1 1 1	RAN
				200	JAM	7111
. UN THE D	MURAM, press	e snade areas o	PAIN or STIFFNE	≌′ → .	/W)>	Im
5. How LONG	does any MOR	NING STIFFNES	SS or SORENESS L	AST?	E 1 1 1	STT PERSON
☐ >60 mins	ALC: 100 A.C. A.C.	minutes □ < 3		10 %	20) [] (UE	1 1 1
		S SWELLING in	your Joints?		(-)(-)	
	□ NO □ Not				MM	101
110000000000000000000000000000000000000	HICH JOINTS at				(married Xames)	46
		Elbows Kne				
			ER with Activity			
			ASHES? TYES	□ NO	PSORIASIS?	□ YES □ NO
Do you hav	re a <u>DEFINITE</u> F	FAMILY HISTOR	Y of Rheumatoid An	hritis? YES	□ NO	
		PHYSICAL EXA	MINATION (* PHY	SICIAN TO COM	MPLETE *)	
		on EXAMINATIO			200 21	444 14264
If YES, WHIC	CH JOINTS are	SWOLLEN?	□ Fingers □ W	ists 🗆 Elbows	□ Knees □ A	nkles D Feet
11. Other REL	EVANT Physica	I Exam Findings:				
LAF	ODATODY 6 II	UACING (+ + D	LEASE ATTACH A	LIADEMAG	INC DEPORTS I	DONE+ +\
	75000000					
Hgb:	WBC:	PLT:	ESR:	CRP:	RF:	ANA:
		DIAGNO	SIS (* PHYSICIAN	TO COMPLETE	*)	
12. What do <u>Y</u>	OU THINK is the	DIAGNOSIS:				
12. What do <u>Y</u>	OU THINK is the	DIAGNOSIS:) @Rheun	atoid Psoriatic/Reac	tive Arthritis etc	
12. What do <u>Y</u>	OU THINK is the	e DIAGNOSIS:	10 77 (57 77)	atoidPsoriatioReac	tive Arthritis etc.	i vit
12. What do <u>Y</u>	OU THINK is the		nmatory 🖂 Ankylo	sing Spondylitis	tive Arthritis etc	8
	OU THINK is the	Inflan Cond	nmatory	sing Spondylitis	sue Disease, Vasculit	8
		di	nmatory	sing Spondylitis other Connective Tis line (Gout or Pseudo	isue Disease, Vasculit ogout)	
		Li Cond	nmatory □ Ankylo	sing Spondylitis other Connective Tis line (Gout or Pseudo D Osteoarthritis, D N	isue Disease, Vasculit ogout)	
13. CLASSIFY	the PROBLEM	L Chro	nmatory Ankylo Lupus Crysta nerative Condition (sing Spondylitis other Connective Tis line (Gout or Pseudo D Osteoarthritis, El N ibromyalgia)	isue Disease, Vasculit ogouf) Aechanical Back Pain Other:	enc)
13. CLASSIFY	the PROBLEM	Li Cond Cond Dege Chron	nmatory	sing Spondylitis other Connective Tis line (Gout or Pseudo D Osteoarthritis, El N ibromyalgia)	isue Disease, Vasculit ogouf) Aechanical Back Pain Other:	entc)
13. CLASSIFY 14. Has this Pa 15. Is this Prot	the PROBLEM atient EVER see olem related to a	inflan Cond Dege Chroin a Rheumatolog	nmatory	sing Spondylitis other Connective Tis line (Gout or Pseud: O Ostecarthritis, O N ibromyelgia) O Not Sure	isue Disease, Vasculit ogout) Aechanical Back Pain Other: YES (please attac	etc) ch all consult notes)
13. CLASSIFY 14. Has this Pa 15. Is this Prot 16. Rate the U	the PROBLEM atient EVER see plem related to a RGENCY of this	Inflan Cond Dege Chroi n a Rheumatolog PRIOR INJURY	nmatory	sing Spondylitis other Connective Tis line (Gout or Pseudo Costeoarthritis, C A ibromyalgia) Not Sure	isue Disease, Vasculit ogout) Aechanical Back Pain Other: YES (please attac	etc) ch all consult notes)
13. CLASSIFY 14. Has this Pa 15. Is this Prot 16. Rate the <u>U</u>	the PROBLEM atient EVER see plem related to a RGENCY of this	Inflan Cond Dege Chroi n a Rheumatolog PRIOR INJURY	nmatory	sing Spondylitis other Connective Tis line (Gout or Pseudo Costeoarthritis, C A ibromyalgia) Not Sure	isue Disease, Vasculti opout) Aechanical Back Pain Other: YES (please attac Semi-Urgent	etc) ch all consult notes)