**SYSTEM REVIEW**

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| **Neurologic** | | | |
| * Headaches | * Vision Change | * Weakness; atrophy | * Seizures or loss of consciousness |
| * Vertigo | * Parenthesias | * Radicular Pain | * Involuntary Movements: tremors |

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| **RHEUMATOLOGIC** | |
| * Presence/ location of joint swelling | * Muscle, Weakness |
| * Skin Rashes | * Reaction to Sunlight |
| * Raynaud’s phenomenon | * Nail bed Changes |

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| **GENERAL QUESTIONS** | | | | | | |
| * Fever | | * Chills | | | * Sweating | |
| * Excessive, unexplained weight gain or loss | | * Irritability | | * Fatigue | | * Weakness |
| * Appetite loss | | * Nausea | | * Vomiting | | * Insomnia |
| **Vital signs:** | * Blood pressure | | * Temperature | | | * Pulse |