

## Review of Systems

(Please check if you have had these symptoms in the past 3 months)

### Constitutional

- Weight loss
- Weight gain
- Fatigue
- Fever/Chills
- Night sweats

### Eyes

- Eye pain
- Vision changes

### Ear/Nose/Throat

- Trouble swallowing
- Hoarseness
- Neck pain

### Neurologic

- Dizziness
- Headaches
- Numbness/ Tingling
- Weakness

### Cardiovascular

- Heart murmur
- Chest pain/ pressure
- Poor circulation
- Palpitations
- Dizziness
- Fainting
- Shortness of breath
- Swelling in feet/ankles
- Last EKG done:  
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### Respiratory

- Coughing up blood
- Wheezing

### Psychological

- Alcohol abuse
- Anxiety
- Depression

### Genitourinary

- Painful urination
- Flank pain
- Blood in Urine
- Nighttime urination
- Urinary urgency
- Urinary frequency
- Urinary incontinence
- Urinary retention or hesitancy

### Musculoskeletal

- Joint pain
- Back pain

### Endocrine

- Excessive sweating

### Hematology

- Easy bleeding or bruising

### Gastrointestinal

- Hemorrhoids
- Abdominal pain  
Location: \_\_\_\_\_
- Constipation
- Diarrhea
- Heartburn/ reflux
- Vomiting blood
- Blood in stool or black stool
- Rectal bleeding
- Jaundice
- Nausea
- Vomiting

### Skin

- Rash
- Sores

### Female Only:

- Last mammogram  
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- Last pap smear  
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- Last period  
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### Males Only:

- Last testosterone  
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- Last PSA lab  
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