



SYSTEMS REVIEW

As you review the following, please CHECK any of those problems which apply to you.

GENERAL	HEART & LUNGS	BLOOD
Recent weight loss/amount	Pain in chest	Anemia
Recent weight gain/amount	Irregular heart beat	Bleeding tendency
Fatigue	Sudden changes in heart	
Weakness	rate	SKIN
Fever	Shortness of breath	Easy bruising
Diet Pills	Difficulty breathing at	Redness
	night ,	Rash
NERVOUS SYSTEM	Swollen legs or feet	Hives
Headaches	High blood pressure	Sun sensitive (sun allergy)
Dizziness	Heart murmurs	Tightness
Fainting	Cough	Nodules/bumps
Muscle Spasm	Coughing of blood	Hair loss
Sensitivity or pain of	Wheezing	Color changes of hands or
hands or feet	Night sweats	feet in the cold
Memory loss	Pacemaker	
	Defibrillator	MUSCLES/JOINTS/BONES
EARS	Heart Attack	Morning stiffness
Ringing in ears	Stroke	Lasting how long:
Loss of hearing		minutes
C	STOMACH & INTESTINES	hours
EYES	Nausea	Joint pain
Pain in eyes	Vomiting of blood/coffee	Muscle weakness
Redness	ground material	Muscle tenderness
Loss of vision	Stomach pain relieved by	Joint swelling
Double or Blurred vision	food or milk	
Dryness	Yellow jaundice	Please list any complications
	Increasing constipation	that are not listed above:
MOUTH	Persistent diarrhea	
Bleeding gums	Blood in stools	
Sores in mouth	Black stools	
Dry mouth	Heartburn	
THROAT	KIDNEY/URINE/BLADDER	
Frequent sore throat	Difficult urination	
Hoarseness	Painful/burning urination	
	Blood in urine	
NECK	Cloudy, "smoky" urine	
Swollen glands	Frequent urination	
Tender glands	Getting up at night to	
	urinate	Physician Signature
	Sexual difficulties	Joseph Magilletti V
	Prostate trouble	Date: