Annual Well Woman Visit for Established Patients

Texas Health Care Obstetrics and Gynecology

Welcome back to our office! You are here today for your Well Woman Exam. This exam is our chance to make sure you are WELL and healthy! Today's visit will involve a full physical exam and may involve a pap smear, infection screening, orders for other tests like a mammogram, or blood work.

Please take a minute to make sure we are up to date on your health status so we can do our best to make sure you remain a Well Woman!

Menstrual update:

- Do you have periods?_____ If so are they monthly/predictable?_____
- Date of your last period_____
- Do you have any concerns about your periods to address?_____
- Are you in menopause?_____
- Do you have any symptoms of menopause you would like to address?_____
- What are you using for pregnancy prevention?_____
- Do you need something different for pregnancy prevention?_____

General Health update:

- Have you had any changes in your health since your last visit?_____
- Have you had any surgeries since your last visit? _____
- Are you taking any new medications since your last visit?_____
- Do you have any concerns about depression or anxiety?_____

Lifestyle Update

- Are you exercising? _____ What type and how often?_____
- What type of diet do you eat? (regular, vegetarian, etc)_____
- Do you use tobacco?_____ How much?_____
- Do you drink alcohol?_____ How much? _____
- Do you use drugs?_____ What type and how much?_____

Are you safe at home?_____ Do you need help?_____

Do you have any other concerns to discuss today?_____

Thank you for the updates!

Review of Systems: Please put an X next to any symptoms you may be experiencing

	Constitutional
	chills
	fatigue
	fever
	mailise
	night sweats
	weight gain
	weight loss

	Head/eye/ear/nose
	Ear drainage
	ear pain
	eye discharge
	eye pain
	hearing loss
	nasal drainage
	sinus pressure
	sore throat
	visual changes

	Respiratory
	chronic cough
	new cough
	TB exposure
	shotness of breath
	wheezing

	Cardiac
	chest pain
	claudicaiton (leg pain)
	swelling
	palpitations

	Gastrointestinal
	abdominal pain
	blood in stool
	change in stool
	constipation
	diarrhea
	heartburn
	loss of appetite
	nausea
	vomiting

	Urinary
	pain with urination
	blood in urine
	urinating frequently
	leaking urine
	unable to urniate

	Gyn/Reproductive
	abnormal pap
	pain with periods
	pain with sex
	hot flashes
	irregular menses
	vaginal discharge
	heavy periods

	Skin/Breast
	nipple discharge
	breast lump
	brittle hair
	brittle nails
	hair loss
	hirsuitism
	hives
	itching
	mole changes
	rash
	skin lesion

	Neurologic
	dizziness
	numbness
	weakness
	gait distrubance
	headache
	memory loss
	seizures
	tremors

	Pyschiatric
	anxiety
	depression
	insomnia

	Metabolic/Endocrine
	cold intolerance
	heat intolerance
	driking more fluid
	eating more food

	Musculosketal
	back pain
	joint pain
	joing swelling
	weakness
	Neck pain

	Hematology
	easy bleeding
	easy bruising
	swollen lymph nodes

	Allergies
	contact allergies
	environmental allergies
	food allergies
	seasonal allergies