

REVIEW OF SYSTEMS

CONSTITUTIONAL

NEGATIVE WEIGHT LOSS WEIGHT GAIN FEVER FATIGUE

OTHER

EYES

NEGATIVE VISION CHANGE GLASSES/CONTACTS

OTHER

ENT/MOUTH

NEGATIVE MOUTH SORES SINUS INFECTIONS RINGING IN EARS

OTHER

CARDIOVASCULAR

NEGATIVE CHEST PAIN DIFFICULTY BREATHING LEG SWELLING PALPITATIONS

OTHER

RESPIRATORY

NEGATIVE WHEEZING COUGHING UP BLOOD SHORTNESS OF BREATH COUGH

OTHER

GASTROINTESTINAL

NEGATIVE DIARRHEA BLOODY STOOL NAUSEA/VOMITING CONSTIPATION

EXCESSIVE FLATULENCE ABDOMINAL PAIN

OTHER

GENITOURINARY

NEGATIVE BLOOD IN URINE PAINFUL URINATION URGENCY FREQUENCY INCONTINENCE

INCOMPLETE EMPTYING ABNORMAL VAGINAL BLEEDING PAIN WITH INTERCOURSE

ABNORMAL VAGINAL DISCHARGE

OTHER

MUSCULOSKELETAL

NEGATIVE MUSCLE WEAKNESS BACK PAIN JOINT PAIN

OTHER

SKIN/BREAST

NEGATIVE PAIN IN BREASTS NIPPLE DISCHARGE BREAST LUMPS SKIN RASH

OTHER

NEUROLOGICAL

NEGATIVE DIZZINESS SEIZURES NUMBNESS TROUBLE WALKING HEADACHES

MEMORY LOSS

OTHER

PSYCHIATRIC

NEGATIVE DEPRESSION ANXIETY DIFFICULTY CONCETRATING

OTHER

ENDOCRINE

NEGATIVE INTOLERANCE OF WARMTH / COLD NIGHT SWEATS HOT FLASHES EXCESSIVE THIRST

OTHER

HEMAT/LYMPH

NEGATIVE BRUISING BLEEDING SWOLLEN LYMPH NODES

OTHER