Lake Norman Medical Group

Lake Norman Gastroenterology

Past Medical History

- ☐ None

☐ Arthritis	☐ Artificial Heart Valve	☐ Alzheimer's Disease	☐ Anemia	☐ Asthma/ Bronchitis
☐ Bleeding Problems	☐ Colon Cancer	☐ COPD/Emphysema	☐ Crohn's Disease	☐ Depression
☐ Diabetes	☐ Fibrositis/Fibromyalgia	☐ Gallstones	☐ Glaucoma	☐ Heart Disease
☐ Heart Murmurs	☐ Hepatitis A	☐ Hepatitis B	☐ Hepatitis C	☐ High Blood Pressure
☐ Colon Polyp History	☐ HIV	☐ Irritable Bowel Syndrome	☐ Kidney Disease	☐ Parkinson's Disease
☐ Reflux Disease (GERD	☐ Rheumatic Fever	☐ Seizures	☐ Ulcer Disease	☐ Stroke
☐ Thryroid Disease	☐ Tuberculosis	☐ Ulcerative Colitis	☐ Defibrillator	

Other____

Surgical/Procedure History

- ☐ None
- ☐ Defibrillator Placement Date:________________
- ☐ Pacemaker Insertion Date:________________
- ☐ Abdominal Ultrasound Date:________________
- ☐ EGD Date:________________
- ☐ Colonoscopy Date:________________
- ☐ Flexible Sigmoidoscopy Date:________________
- ☐ CT Abdomen Date:________________
- ☐ Other:____ Date:__________________

Immunizations

- ☐ None
- ☐ Flu Vaccine Date received:_____________________
- ☐ Pneumonia Vaccine Date received:_____________________
- ☐ Other Date received:_____________________

Social History

Occupation:__________________

Marital Status:________________

Number of Children:___________

- ☐ Smoking If Yes, how long?___________ How much per day?__________
- ☐ Tobacco Use If Yes, how long?___________ How much per day?__________
- ☐ Illegal Drug Use If Yes, how long?__________ Type:_______________Frequency:__________ Quantity:__________
- ☐ Caffeine Intake:___________________________________
- ☐ Alcohol If Yes, how long?__________ Type:_______________Frequency:__________ Quantity:__________

Family Medical History

- ☐ Unknown
- ☐ Family History Non-contributory

Please report if: mother, farther, maternal grandmother, maternal grandfather, paternal grandmother, paternal grandfather, Sister or brother.

Diagnosis	Family Member	Age of Onset	Living/Deceased	Cause of Death	Age at Death
Celiac Sprue					
Colon Polyps					
Ulcerative Colitis/IBD					
Colon Cancer					
Liver Disease					
Colon Polyps					
Crohn’s Disease					
Diabetes (Type I)					
Diabetes (Type II)					
Gallstones					
Pancreatitis					
Ulcer, Gastric					
Ulcerative Colitis					
Other					

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Review Of Systems

Constitutional	Y	N	***Gastrointestinal***	Y	N	***Neurological***	Y	N
☐ None			☐ None			☐ None		
Feeling Tired			Abdominal Pain			Fainting		
Fever			Abdominal Swelling			Frequent Headaches		
Sweats/Chills			Change in Bowel Habits			Seizures		
Weight Gain			Constipation			Brain/Spinal Injury		
Weight Loss			Diarrhea			Confused		
Pregnant			Heartburn			Weakness/Numbness		
			Nausea					
Eyes	Y	N	Vomiting			***Psychiatric***		
☐ None			Anal Itching			☐ None		
Blurred Vision			Anal Pain/Sore			Anxiety		
Glaucoma			Appetite Loss			Depression		
Contacts or Glasses			Belching					
			Bloating			***Endocrine***		
ENMT			Difficulty Swallowing			☐ None		
☐ None			Get Full Easily			Excessive Thirst		
Difficulty Swallowing			Incontinence of Stool			Heat Intolerance		
Nose Bleeds			Pain when Defecating					
Sore Throat			Black/Tarry Stool			***Hematologic/Lymphatic***		
Hearing Aid			Maroon Stool			☐ None		
Hoarseness			Rectal Bleeding			Anemia		
Sinus Problems			Vomiting Blood			Easy Bleeding/Bruising		
Pain on Swallowing			“Coffee Grounds”			Past Blood Transfusion		
Cardiovascular			***Genitourinary***			***Allergy/Immunologic***		
☐ None			☐ None			☐ None		
Chest Pain			Frequent Urination			HIV Exposure		
Irregular Heart Beat			Blood in Urine			Persistent Infections		
Shortness of Breath			Incontinence			Strong Allergic Reactions or urticarial		
Swelling of Ankles								
Pacemaker			***Musculoskeletal***					
Defibrillator			☐ None					
Stents			Back Pain					
			Joint Pain					
Respiratory			Muscle Pain					
☐ None			Joint Replacements					
Chronic Cough			Joint Swelling					
Sleep Apnea								
Use of C-Pap			***Integumentary***					
Difficulty Opening Mouth			☐ None					
Positive TB Skin Test			Itching					
Wheezing			Skin Ulcers					
Difficulty Turning Head			Rashes					
Use of Oxygen at Home			Jaundice					
			Hair Loss					