

1. What was your chief complaint when you visited your doctor?

2. What do you think caused the problem?

3. What does your doctor think is causing your medical problem?

4. Describe your medical problem

5. a. Does anything make it worse?

b. Does anything make it better?

6. Do you have any numbness? _____ Where?

7. Do you have any weakness? _____ Where?

8. Do you have any other medical conditions?

9. Describe your general health

10. Have you had any previous exam on the body part that will be scanned. . .

MRI's? _____ Where?

Cat Scans? _____ Where?

X-Rays? _____ Where?
