

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 caused the problem? _____

4. Describe your pain. (burning, sharp, etc.) _____
- 5 a Does anything make it worse? _____
b Does anything make it better? _____
c How long has it bothering you? _____
d Did the symptoms come on gradually or suddenly? _____
6. Do you have any weakness? _____ Where? _____
7. Have you ever broken any bones of the body part we will be imaging? _____
8. Do you have arthritis in any of your joints? _____
9. Have you had a previous:
MRI'S _____
When/Where _____
Cat Scan's _____
When/Where _____
Ultrasound's _____
When/Where _____