

advocare | Aroesty Ear, Nose
& Throat Associates

Adult & Pediatric Otolaryngology – Head & Neck Surgery • Sinus & Nasal Surgery • Hearing & Balance Disorders • Otolgic Surgery

Detailed Medical History

Patient Name: _____ Date of Birth: _____

Social History: ___ Single ___ Married ___ Divorced ___ Separated ___ Other: _____

Children: ___ No ___ Yes, How many? _____

Tobacco use: ___ Current smoker ___ Former smoker ___ never smoked

of years smoking _____ # packs per day _____ Date you quit: _____

Alcohol Use: # of drinks per week _____ Recreational drug use: _____

Caffeine use: ___ Yes ___ No Do you exercise regularly? ___ Yes ___ No

Do your religious beliefs impact your medical treatment? If so, please specify: _____

Review of Systems: Please indicate whether you have recently experienced any of the symptoms listed below. Please select “none” to indicate no symptoms experienced:

General	Nose	Respiratory	Musculoskeletal
Fatigue	Fullness	Coughing blood	Muscle Weakness
Fever	Runny nose – clear/white	Coughing mucous	Join pain
Night sweats	Runny nose – green/yellow	Dry cough	None
Weight gain	Stiffness/congestion	Shortness of breath	Psychological
Unintentional weight loss	Bloody nose	Wheezing	Depression
Fever	Discharge (a.m.)	None	Sleep disturbance
Night Sweats	Obstruction	Cardiovascular	None
None	Pain	Chest pain	
Eyes	Itching	Rapid/irregular heartbeat	
Blurred vision	Sneezing	None	
Itchy eyes	Altered sense of smell	Gastrointestinal	
None	Growth/mass	Abdominal pain	
Ears	None	Heartburn	
Pain	Throat/Neck	None	
Drainage	Hoarseness	Endocrine	
Fullness	Sore throat	Heat/cold intolerance	
Itchiness	Difficulty swallowing	None	
Change in hearing	Painful swallowing	Neurological	
Sudden hearing loss	Post-nasal drip	Headache	
Gradual hearing loss	Swollen glands	Numbness	
Ringling in ears	Slurred speech	None	
Dizziness/imbalance, gait issue	Lump in throat	Hematologic	

Thank you for taking the time to fill out this information. Knowing our patients' complete medical history helps us to help you.

Jeffrey H. Aroesty, MD, FACS • Aditi Mohankumar, MD • Katharine Robitzski, APN-C • Anne Anderson, MA, CCC/A, FAAA

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Please use space below for additional information for provider: _____

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