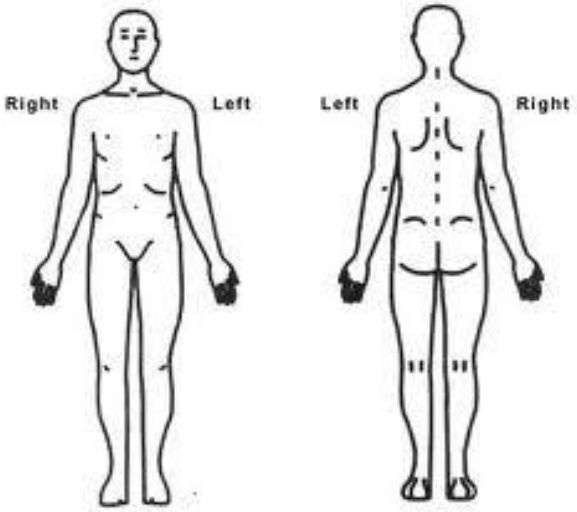
PHYSIOCARE AT HOME

MEDICAL HISTORY FORM

PATIENT: _____ **DATE:** _____

Patient profile	
Medical Diagnosis	
Reason For Referral	
Gait and Mobility Issues	
History of Present Illness	
Falls History	
Pain level (0 to 10 Score)	At rest: With AROM: With Gait: Fatigue: Dizziness:
Pain Increases with	
Pain Decreases with	
Pain Areas	

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Home and Mobility Aids		
Home Environment	○ House ○ Apartment ○ Seniors Residence	○ stairs with _____of railings ○ With elevator ○
Social Supports	○ Married ○ Widowed ○ Single ○ VON or PCW	○ Children living locally ○ Children living away ○ Housekeeper ○
Mobility Aids	○ None ○ Cane ○ 2 wheeled walker ○ 4 Wheeled Walker ○ Wheelchair ○ Car – driving self:Yes No ○ Dictus / splint / sling	○ Raised toilet seat ○ Bars for toilet ○ M rail for bed ○ Grab bars ○ Bath bench ○ Emergency Call Button ○ Safety Transfer belt
Exercise	○ Please describe:	○ Equipment:

Medications		
Alcohol use: ○ None ○ Occasionally ○ Daily Over the counter medication ○ ASA ○ Tylenol Arthritis ○ Tylenol 3 ○ Multivitamin	○ Pain Cream ○ Multivitamin ○ Vitamin A B C D Omega Fish Oil ○ Extra strength tylenol ○ Tylenol Arthritis ○ Accupril (High BP) ○ Amlopidine (Norvasc) HT CAD, Angina ○ Aspirin Low Dose ○ Atenolol/Tenormin (Beta Blocker) ○ Atrove*nt (Breathing) ○ Cardizem (High BP) ○ Celebrex (pain) ○ Coumadin / Warfarin (Blood clot) ○ Diclofenac (Voltaren) Pain Cream ○ Elavil (Sleep / Antidepressant) ○ Fosamax (Osteoporosis)	○ Losartan / Cozaar (High BP) ○ Metformin (Diabetes) ○ Metoprolol (Beta Blocker / Heart) ○ metoprolol (Toprol) Beta Blocker ○ Paxil (Antidepressant) ○ Plavic / Clopidogrel (Blood Clot/ CVA) ○ Prednisone Ramipril (Altace) HT CHF ○ Ranitidine / Zantac (Heartburn) ○ Repaglinide (Gluconorm) Insulin ○ Rosuvastatin / Crestor (High Chol.) ○ Senokot (Laxitives) ○ Sinemet (Parkinsons) ○ Syntrhoid (Thyroid) ○ Tramadol ○ Trazadone (Antidepressant)
Other medications:		

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Medications (continued)	○ Gliclazide (Diabetes) ○ Hydrocholorothiazide (diuretic) ○ Lasix (Fluid pill) ○ Levothryoxin (Thyroid)	○ Tylenol #3 ○ Venlafaxine (Antidepressant) ○ Xanax (Antidepressant/anxiety ○ Zocor (Simvastatin) Lipid lowering

Medical Conditions	Yes	In past	No	Comments
Osteoarthritis / Osteoporosis / Rheumatoid Arthritis / other rheumatologic conditions				
Cardiovascular Disease ○ High Blood Pressure ○ Coronary Artery Disease ○ Congestive Heart Failure ○ Pacemaker (TENS contraindicated)				○ Cardiac Stress Test or ____MIBI Test ○ Shortness of breath on exertion ○ Low Blood Pressure or fainting ○ Swollen ankles
Diabetes Mellitus (with or without feet numb)				
Concussion or history of head injury				
Foot issues (toes crossed, skin breakdown, numbness)				
Cerebrovascular Disease or Stroke				
COPD, Asthma or Emphysema / Lung Disease				
Epilepsy or other seizure disorders				
Parkinsons Disease or tremors				
Decreased Visual Acuity or cataracts/glaucoma				Surgery for eye issues YES NO
Hearing Impairment or hearing aid (s)				
Hypothyroidism or Allergies				
Cancer _____with or ____without surgery				
Depression or Anxiety Problems with sleep				Sleep Hours per night____ Sleep Disruptions per night___

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Bowel or Bladder issues Urinary incontinence urgency constipation				Do you rush to bathroom Y N Do you leave the lights on in bathroom Y N
Swallowing difficulties or choking Recurrent pneumonia				Problems with:_Liquids ___Pills __Toast Has this led to weight loss: Y N
Able to follow commands and is oriented				Knows their phone number: Y N
Difficulty thinking or remembering things				Estimated Stage of Dementia: ____early ____middle ____late stage
Dizziness ○ Vertigo –room spins when rolling over in bed ○ Lightheadedness – when standing up (BP) ○ Dysequilibrium – feeloff balance in standing ○ Fainting – when changing position ○ Motion sickness – when moving head, turning ○ Recent loss of hearing–refer back to Fam. Dr.				○ Trouble reading the paper ○ Blurred vision when turning head ○ Trouble keeping eyes focused ahead ○ problems with smooth pursuit ○ Problem with 5 head turns up/down ○ Increases with neck AROM
Surgical Implants or orthopaedic surgery				
Medical Tests / XRAYS				
Skin issues or foot impairments				