Sebastopol Orthopaedics
& Sports Medicine

Dr. Michael Bollinger, MD
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Please mark conditions you have had recently or currently have:

Constitutional:			**Musculoskeletal:**		
Weight loss	☐ Yes	☐ No	Joint pain	☐ Yes	☐ No
Weight gain	☐ Yes	☐ No	Joint swelling	☐ Yes	☐ No
Sleep problems	☐ Yes	☐ No	Muscle pain	☐ Yes	☐ No
Decreased appetite	☐ Yes	☐ No	Cane	☐ Yes	☐ No
Eyes:			Walker	☐ Yes	☐ No
Blurred vision	☐ Yes	☐ No	Braces/Orthotics	☐ Yes	☐ No
Glasses	☐ Yes	☐ No	**Integumentary:**		
Other vision asst.	☐ Yes	☐ No	Skin problems	☐ Yes	☐ No
Glaucoma	☐ Yes	☐ No	Rashes	☐ Yes	☐ No
ENT:			Wound healing difficulties	☐ Yes	☐ No
Ringing in ears	☐ Yes	☐ No	**Neurological:**		
Hearing aids	☐ Yes	☐ No	Dizziness	☐ Yes	☐ No
Sinus infections	☐ Yes	☐ No	Headaches	☐ Yes	☐ No
Ear infections	☐ Yes	☐ No	Weakness	☐ Yes	☐ No
Cardiovascular:			Paralysis	☐ Yes	☐ No
Chest pain/Angina	☐ Yes	☐ No	Numbness	☐ Yes	☐ No
Short of breath	☐ Yes	☐ No	Tingling	☐ Yes	☐ No
Palpitations	☐ Yes	☐ No	**Psychiatric:**		
Leg/Ankle swelling	☐ Yes	☐ No	Alcoholism	☐ Yes	☐ No
Respiratory:			Drug abuse	☐ Yes	☐ No
Shortness of breath	☐ Yes	☐ No	Depression	☐ Yes	☐ No
Cough	☐ Yes	☐ No	Other mental illness	☐ Yes	☐ No
Sputum	☐ Yes	☐ No	**Endocrine:**		
Pneumonia	☐ Yes	☐ No	Low energy	☐ Yes	☐ No
Gastrointestinal:			Fever/sweat/chills	☐ Yes	☐ No
Recent nausea/vomiting	☐ Yes	☐ No	**Hematologic:**		
Difficulty swallowing	☐ Yes	☐ No	HIV + Exposure	☐ Yes	☐ No
Stomach pain	☐ Yes	☐ No	Bleeding problems	☐ Yes	☐ No
Heartburn	☐ Yes	☐ No	Blood clots	☐ Yes	☐ No
Decreased appetite	☐ Yes	☐ No	Hepatitis	☐ Yes	☐ No
Diarrhea	☐ Yes	☐ No			
Constipation	☐ Yes	☐ No			
Urinary:					
Bloody urine	☐ Yes	☐ No			
Frequent urination	☐ Yes	☐ No			
Incontinence	☐ Yes	☐ No			

Any other problems:_____

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