

Do you have a history of:

Drug Abuse

Alcohol Abuse

BRIEFLY DESCRIBE ANY CURRENT MEDICAL PROBLEMS

Has anyone in your family been treated for?

	YES	NO	COMMENTS
Heart Disease			
High Blood Pressure			
Stroke			
Diabetes			
Arthritis			
Parkinson's			
Cataracts/other eye problems			
Glaucoma			
Hearing Problems			
Lung Disease			
Skin Diseases			
Urinary Tract Infections			
Gastro-Intestinal			
Growths / Cancer			
Hospitalizations			
Major Operations			
Sexually Transmitted Diseases			
Kidney Disease			
Liver Disease			
Gynecologic Problems			
Psychiatric Disorders			
Other Medical Problems			

Has anyone in your family had?

Blackouts

Convulsions or Seizures

Headaches

Tremors

Dizziness

Forgetfulness

Major Weight Loss/ Gain

Does anyone in your family have a history of :

Drug Abuse

Alcohol Abuse

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