



**AUERBACH BREAST CENTER  
REVIEW OF SYSTEMS**

Have you recently had any of the following symptoms or medical problems.

		Y	N
<b>General</b>	Anemia		
	Fevers		
	Night Sweats		
	Weight Loss		
	Swollen Glands		
<b>Breasts</b>	Lumps		
	Discharge		
	Pain		
<b>Ears</b>	Ringings		
	Hearing Loss		
	Infections		
<b>Eyes</b>	Blurring		
	Double Vision		
	Cataracts		
	Glaucoma		
<b>Nose/Sinus</b>	Infections		
	Bleeding		
<b>Throat</b>	Infections		
	Hoarseness		
	Trouble Swallowing		
<b>Endocrine</b>	Thyroid Problems		
	Cold Intolerance		
	Heat Intolerance		
	Excessive Thirst		
<b>Lungs</b>	Cough		
	Sputum (phlegm)		
	Coughing up Blood		
	Short of Breath		
	Wheezing		
<b>Heart</b>	Chest Pain		
	Palpitations		
	Ankle Swelling		
<b>Vascular</b>	Leg Cramps		
	Varicose Veins		
	Phlebitis		
	Blood clots		

		Y	N
<b>GI</b>	Nausea		
	Vomiting		
	Diarrhea		
	Constipation		
	Change in Bowels		
	Hemorrhoids		
	Hepatitis (jaundice)		
<b>Skin</b>	Rash		
	Easy Bruising		
	Poor Healing		
	Itching		
<b>Urinary</b>	Increased frequency		
	Burning w/urination		
	Bloody Urine		
	Kidney Stones		
	Infections		
<b>Bones/Joints</b>	Pain		
	Stiffness		
	Swelling		
	Limited Motion		
<b>Nervous System</b>	Seizures		
	Tremor		
	Fainting/Blackouts		
	Localized Numbness		
	Localized Weakness		
	Dizziness		
	Trouble Speaking		
	Trouble Walking		
	Vertigo		
	Trouble Sleeping		
Anxiety			
Depression			

Signature of person completing the form \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_