Deaconess
Sleep Center
Phone: 812-450-3852

350 W. Columbia St. Suite 100
Evansville, IN 47710
Fax: 812-450-3994

7307 E. Columbia St.
Evansville, IN 47715
Fax: 812-473-2432

SLEEP CENTER SYSTEM REVIEW

Patient Name: _____ DOB: _____

EYES:

Glasses/contacts	Yes	No
Glaucoma	Yes	No
Cataracts	Yes	No

EARS/NOSE/MOUTH/THROAT:

Hearing loss or ringing	Yes	No
Chronic sinus problem	Yes	No
Seasonal allergy	Yes	No

CARDIOVASCULAR:

Chest pain/angina	Yes	No
Palpitation	Yes	No
Swollen feet/ankles/hands	Yes	No
High blood pressure	Yes	No

RESPIRATORY:

Shortness of breath	Yes	No
Cough	Yes	No
Sputum	Yes	No
Wheezing	Yes	No

GASTROINTESTINAL:

Nausea/vomiting	Yes	No
Frequent diarrhea	Yes	No
Constipation	Yes	No
Heartburn	Yes	No

GENTOURINARY:

Frequent urination	Yes	No
Incontinence or dribbling	Yes	No
Kidney stones	Yes	No

MUSCULOSKELETAL:

Joint pain	Yes	No
Joint stiffness or swelling	Yes	No
Back pain	Yes	No

SKIN:

Rash or itching	Yes	No
Skin cancer	Yes	No

NEUROLOGICAL:

Frequent headaches	Yes	No
Memory loss/confusion	Yes	No
Numbness or tingling	Yes	No
Stroke	Yes	No
Head injury	Yes	No

PSYCHIATRIC:

Nervousness	Yes	No
Depression	Yes	No

ENDOCRINE:

Gland/hormone problems	Yes	No
Thyroid disease	Yes	No
Diabetes	Yes	No

HEMATOLOGIC/LYMPHATIC:

Anemia	Yes	No
Blood clots	Yes	No