

MENSTRUAL HISTORY

Age at Onset: _____ Regular? Yes No Cycle _____ days
 Duration: _____
 Date of Last Menstrual Period: _____
 Age at Menopause: _____
 Symptoms: _____
 Method(s) of Contraception used: _____
 Date of Last Gynecological Exam: _____ Normal?

CURRENT MEDICATIONS

Please list all medications taken in the past 5 years:

SEE LIST

- SEROQUEL
- CARBIDOPA/LEVO
- MIRTAZAPINE
- ASTELIN
- WARFARIN
- DOK
- GENIFIBER
- SORBITOL
- HALDOL

OTHER INFORMATION YOU WANT THE DOCTOR TO KNOW

YOU TREATED HER @ EAST VALLEY HOSPITAL
MARCH 9, 2007.