

**Duke Cardiology of Raleigh
New Patient Questionnaire**

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Please check all that apply regarding your CURRENT symptoms:

Chest pain	Shortness of breath	Palpitations	Lightheaded	Fainting
Cough	Sputum production	Wheezing	Snoring	Swelling
Constipation	Abdominal pain	Blood in stools	Diarrhea	Nausea/vomiting
Headache	Seizure	Paralysis	Tremor	Abnormal walking
Bruising	Bleeding	Rash	Leg pain	Swollen lymph nodes
Fever	Chills	Weight loss	Weight gain	Poor appetite

Women Only:

- | | | |
|---|---------------------|--------------|
| • Have you gone through menopause | Yes | No |
| • Have you taken Hormone Replacement Therapy? | Yes | No |
| • During pregnancy, did you experience | High Blood Pressure | Pre-clampsia |

Signature