REASON FOR YOUR APPOINTMENT:			
WHICH SURGEON WOULD YOU LIKE TO SCHEDULE A CONSULTATION WITH: ☐ DR. PORTUESE ☐ DR. SHVIDLER			
ARE YOU PRESENTLY OR FREQUENTLY BOTHERED BY ANY OF THE FOLLOWING SYMPTOMS? PLEASE CHECK ANY THAT APPLY. MARK WITH A"?" IF YOU ARE UNSURE AND THE MEDICAL ASSISTANT OR PROVIDER WILL GO OVER WITH YOU.			
EARS	NOSE	THROAT	ALLERGY
□Pain	□RUNNY	□Hoarse	□Hives
□Drainage	□STUFFY	□Sore	□ITCHING
☐HEARING CHANGE/LOSS	□BLOODY	Snoring	☐RED ITCHY EYES
☐RINGING/ HEAD NOISE	□Nasal obstruction	☐ DIFFICULTY SWALLOWING	SNEEZING
□Dizziness	SINUSITIS	□Voice Change	□OTHER
□INFECTION	□Tonsillitis	☐Post Nasal Drainage	
□OTHER	□OTHER	☐PRODUCTIVE COUGH	PSYCHIATRIC
		□OTHER	DEPRESSION
CARDIOVASCULAR	GASTROINTESTINAL		HALLUCINATIONS
☐CHEST PAIN	☐ CHANGE IN APPETITE	MUSC/SKELETAL	☐MOOD CHANGES
RAPID HEART BEAT	☐ CHANGE IN WEIGHT	☐BROKEN NOSE	☐SLEEP DISTURBANCES
☐IRREGULAR HEART BEAT	☐BLOOD IN STOOL	☐HEAD INJURY	□STRESS
□OTHER	☐BOWEL PROBLEMS	□Injuries	□OTHER
CONSTITUTIONAL	□ CANKER SORES	☐JAW PAIN	RESPIRATORY
□Fatigue	□DIARRHEA	☐MUSCLE PAIN	
□Fever	□HEARTBURN	□NECK INJURY	□Pain w/breathing
□Night Sweats	□OTHER	□NECK PAIN	☐SHORTNESS OF BREATH
□WEIGHT GAIN/LOSS	GENITOURINARY	□OTHER	□WHEEZING
□OTHER	☐ DIFFICULTY URINATING	NEUROLOGIC	□OTHER
ENDOCRINE	☐FREQUENT URINATION	CLUMSINESS	SKIN
☐ CHANGE IN GROWTH	□OTHER	□ Convulsions	☐SKIN GROWTH/MOLES
☐ CHANGE IN HAIR	HEMATOLOGIC	□HEADACHE	☐SKIN ULCERS/BLEMISHES
☐HEAT INTOLERANCE	□ANEMIA	☐ MEMORY PROBLEMS	☐ SLOW HEALING WOUNDS
☐COLD INTOLERANCE	☐BLEED EASILY	□Migraine	□VERY DRY SKIN
☐ EXCESSIVE THIRST	☐BRUISE EASILY	□Numbness	□OTHER
□OTHER	☐JOINT PAIN	□Seizures	
EYES	☐SWOLLEN LYMPH NODE	□OTHER	
☐BLURRED VISION	□OTHER		
□ Double vision			